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# Form **990-PF**

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

\_2015

OMB No 1545-0052

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 <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For cal	lendar year 2015, or tax year beginning	, 2015,	and ending		<u> </u>	
	foundation			Α	Employer identification num	ber
M1CH Number a	AEL AND JANE SIGMON FAMILY FO	DUNDATION Idress)	Room/suite	В	73-1592997 Telephone number (see instru	ictions)
4220	BROOKLINE PLACE	,			(405) 329-344	
•	wn, state or province, country, and ZIP or foreign postal code			С	If exemption application is a	pending check here
NORM		7'	73072		ii exemplion application is a	bending, check fiele.
G Ch	eck all that apply Initial return Final return	Initial return of a forme Amended return	er public charity	D	1 Foreign organizations, ched	ck here ▶ 📗
	Address change	Name change			2 Foreign organizations meet	ing the 85% test, check
H Chi		c)(3) exempt private fou	indation.	1	here and attach computation	
0	Section 4947(a)(1) nonexempt charitable trust		rivate foundation	E	If private foundation status	was terminated
I Fair		ounting method X C		1	under section 507(b)(1)(A),	
(fro	m Part II, column (c), line 16)	Other (specify)	LJ	F	If the foundation is in a 60-i	nonth termination
\$		column (d) must be on c	ash basis )	<u>l</u>	under section 507(b)(1)(B),	check here ▶ 📙
Part		(a) Revenue and	(b) Net investmen	ıt	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income		income	for charitable purposes
	sarily equal the amounts in column (a)		1	i		(cash basis only)
	(see instructions) )  1 Contributions, girls, grants, etc, received (attach schedule)	150,000.	-			
	2 Ck X if the foundation is not required to attach Sch B	130,000.	,			
						· · -
200	3 Interest on savings and temporary cash investments		34,26	<del></del>		
} }-	5 a Gross rents		34,28	) I •		<u> </u>
R E	<b>b</b> Net rental income or (loss)					
	6 a Net gain or (loss) from sale of assets not on line 10					
<u> </u>	b Gross sales price for all assets on line 6a · · ·					
CO E	7 Capital gain net income (from Part IV, line 2)		21,21	9.		
C N	8 Net short-term capital gain	F 1 To Tomporous			21,219.	
⊕ E	10 a Gross sales less	KEOLIVET)	<u> </u>			
લ્ગ્ર	allowances		-01			
ري	b Less Cost of goods sold	AUG 1 5 2000	121	-		
3]][S	c Gross profit or (loss) (altach schedule)	6 2010	131		·	
_	11 Other income (attach schedule)	000	18:1			
	12 Total Add lines 1 through 11	150, 000.	55,48	30	21,219.	
	13 Compensation of officers, directors, trustees, etc	<u> </u>	<u> </u>	<del>, , , ,</del>	21/213.	
	14 Other employee salaries and wages					
	15 Pension plans, employee benefits					
A D	16a Legal fees (attach schedule)				:-	
M	b Accounting fees (attach sch). L-16b Stmt.  c Other prof fees (attach sch) . L-16c Stmt	400.				
N	17 Interest	4,126.				
O P E R A T	18 Taxes (attach schedule)(see instrs) EXCISE TAX	1,770.				<u></u>
RRAA	19 Depreciation (attach	27.701	-			
1 j	schedule) and depletion					
N V G E	20 Occupancy					=
A E	22 Printing and publications					
A E N X D P	23 Other expenses (attach schedule)					
E N			<u> </u>			=
S E S	24 Total operating and administrative expenses Add lines 13 through 23	6,296.				
5	25 Contributions, gifts, grants paid	63,020.				
	26 Total expenses and disbursements					
	Add lines 24 and 25	69,316.				
	27 Subtract line 26 from line 12 a Excess of revenue over expenses					
	and disbursements	80,684.				
	<b>b</b> Net investment income (if negative, enter -0-)		55,48	30.		
	C Adjusted net income (if negative, enter -0-)		<u></u>		21,219.	

BAA For Paperwork Reduction Act Notice, see instructions.

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Pari		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	47,241.	95,171.	95,171.
	3	Accounts receivable		-	
		Less allowance for doubtful accounts			
	4	Pledges receivable	<del>, ,,,</del>		
		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)	,		
A	1	Less allowance for doubtful accounts			
Š	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			
Ś	10 a	Investments – U S and state government obligations (attach schedule)			
	l b	Investments — corporate stock (attach schedule)	385,136.	797,980.	806,939.
	c	: Investments — corporate bonds (attach schedule)	737,713.	379,403.	371,049.
	11	Investments — land, buildings, and equipment basis ▶	·		
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis			
		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)	1,170,090.	1,272,554.	1,273,159.
L	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
В	19	Deferred revenue			
Ė	20	Loans from officers, directors, trustees, & other disqualified persons			
T T	21	Mortgages and other notes payable (attach schedule)			
- 1	22	Other liabilities (describe			
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			
EU	25	Temporarily restricted			
A D	26	Foundations that do not follow SFAS 117, check here			
A S B S A		and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds		· · · · · · · · · · · · · · · · · · ·	
SN	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	1,170,090.	1,272,554.	
R S	30	Total net assets or fund balances (see instructions)	1,170,090.	1,272,554.	
	31	Total liabilities and net assets/fund balances (see instructions)	1,170,090.	1,272,554.	
Par	t III	Analysis of Changes in Net Assets or Fund Balanc		2,2,2,001.	<b>.</b>
1	Total	net assets or fund balances at beginning of year — Part II. column (	(a) line 30 (must agree w	rith	1 170 000
_	end-	of-year figure reported on prior year's return)		1	1,170,090.
2	⊨nte	r amount from Part I, line 2/a	· · · · · · · · · · · · · · · · · · ·	2	80,684.
3		increases not included in line 2 (itemize) INVESTMENT INC	COME	<u> </u>	55,480.
4		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			1,306,254.
5 6		l net assets or fund balances at end of year (line 4 minus line 5) – P			1,272,554.
O	iotal	niet assets on tund balances at end of year (line 4 milius line 3) — F	artin, columnit (b), mie 30		1 1,4/4,334.

Par		_osses for Tax on Investmer				
-	(a) List and describe 2-story brick warehouse	the kind(s) of property sold (e.g., real e, or common stock, 200 shares MLC	estate, Company)	<b>b)</b> How acq P — Purcha D — Donat	ase (mo, day, yr)	(d) Date sold (mo , day, yr )
1 a	LPL FINANCIAL CAPIT	AL GAIN DISTRIBUTIONS	P		Various	12/31/15
b	LPL FINANCIAL CAPIT	AL GAIN DISTRIBUTIONS	P		Various	12/31/15
С	LPL FINANCIAL		P		Various	12/31/15
d	LPL FINANCIAL		P		Various	12/31/15
e						,
	(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		0.		0.		292.
b	22/0021	0.		0.		21,982.
		0.		,405.		15,926.
d	200,0101	0.	277	,024.		-16,981.
е			40/04/00			<u> </u>
		ng gain in column (h) and owned by th			(I) Gains (Co	(h)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any		gain minus col (k), b than -0-) or Losses (fr	om col (h))
a	0.	0.		0.		292.
b	0.	0.		0.		21,982.
	0.	0.		0.		15,926.
d	1					-16,981.
е	•					
2	Capital gain net income or (net o	capital loss) — If gain, also differential loss), ente	enter in Part I, line 7 er -0- in Part I, line 7	[	2	21,219.
3 Par	If gain, also enter in Part I, line 8 in Part I, line 8	ss) as defined in sections 1222(5) and column (c) (see instructions). If (loss in the column section 4940(e) for Reduce	s), enter -0-	ant Inco	3	21,219.
Was		s part blank on 4942 tax on the distributable amou y under section 4940(e) Do not comp		ıod?	· · · · · · · · · · Yes	No
1	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	ts	(d) Distribution (col (b) divided by c	
	2014	0.	· •	0.	-	0.000000
	2013	0.		0.		0.000000
	2012	0.		0.		0.000000
	2011	0.		0.		0.000000
	2010	0.		0.		0.000000
2	Total of line 1, column (d)				2	
3	Average distribution ratio for the					0.000000
	number of years the loundation	5-year base period — divide the total has been in existence if less than 5 ye	on line 2 by 5, or by the ears		3	
4	•	5-year base period — divide the total has been in existence if less than 5 years.  able-use assets for 2015 from Part X,	ears		4	0.000000
4 5	Enter the net value of noncharita	has been in existence if less than 5 ye	line 5	Ì	-	0.000000
-	Enter the net value of noncharita  Multiply line 4 by line 3	has been in existence if less than 5 years able-use assets for 2015 from Part X,	line 5		4	0.000000
5	Enter the net value of noncharitate  Multiply line 4 by line 3  Enter 1% of net investment inco	has been in existence if less than 5 years able-use assets for 2015 from Part X,	line 5		5	0.000000
5	Enter the net value of noncharitation Multiply line 4 by line 3	has been in existence if less than 5 yeable-use assets for 2015 from Part X,	line 5		4 5 6 7 8	0.000000 0. 0. 555.

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10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		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		X
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b	X	
	OK - Oklahoma			
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
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	
	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	
	By language in the governing instrument, or			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	If 'Yes,' attach the statement required by General Instruction T		i	

, ,	73-139299	<del>/</del>	<u> </u>	age 3
Part	VII-A Statements Regarding Activities (continued)	r-		
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> </u>
<b>12</b> [	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		Х
13 I	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		Х
14	Website address	329	<u>_</u> _ 344	4
	Located at \$ 4420 BROOKLINE PLACE. NORMAN. OK ZIP+4 \$ 73072			
15	Located at \$\ 4420 BROOKLINE PLACE, NORMAN, OK ZIP + 4 \$\ 73072 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		, <b>-</b>	
	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	J	l	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	T "	Yes	No
	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
(	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
(	(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)?			
(	(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)	•	:	
	— — — — — — — — — — — — — — — — — — —			
D	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 l	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 c		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 $4942(j)(5)$ ).			
	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			
	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 <b>all</b> years listed, answer 'No' and attach statement — see instructions.)	2 b		
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			^
	► 20 , 20 , 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	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			
4-5	determine if the foundation had excess business holdings in 2015)		†	X
44	charitable purposes?	. 4 a	-	X
	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?	. 4 b	,	Х
BAA			0-PF (	

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Part VII-B   Statements Regarding Activit		4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incur a	•				
(1) Carry on propaganda, or otherwise attempt t	o influence legislation (se	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, stu	dy, or other similar purpo	ses?	· · · · Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organiz	zation described	· · · · Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ar	rary, or nimals?	· · · · 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 regardi			▶ □		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	on from the	· · ·	No	
If 'Yes,' attach the statement required by Regula	tions section 53 4945-5(d	)			
				No	
<b>b</b> Did the foundation, during the year, pay premium	ns, directly or indirectly, o	n a personal benefit con	tract?	6 b	X_
If 'Yes' to 6b, file Form 8870			□v □	I	
7 a At any time during the tax year, was the foundati b If 'Yes,' did the foundation receive any proceeds				No 7 b	<del>  </del> -
Part VIII Information About Officers, D					
and Contractors	irectors, rrustees,	i odilaation mana	gers, riigiliy r ala c	pioyee	,,
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		se account, allowances
MICHAEL SIGMON	_				
4220 BROOKLINE PLACE OK 73072	CHAIRMAN 5.00	0.	0.		0.
JANE SIGMON 4220 BROOKLINE PLACE	PRESIDENT			i	
NORMAN OK 73072	5.00	0.	0.		0.
				İ	
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see is	nstructions). If none, e	nter 'NONE	,
(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) Expens	se account, allowances
NONE					
				<del> </del>	
			<u> </u>		
Total number of other employees paid over \$50,000					None <b>90-PF (2015</b> )
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All other program-related investments See instructions

BAA

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 . .

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 4940(e) reduction of tax in those years

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0.

0.

2

3 b

4

## 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	- · · · · · · · · · · · · · · · · · · ·			
а	Enter amount for 2014 only			0.	
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2015				
а	From 2010 0 .				
b	From 2011 0 .				
C	From 2012 0 .				
d	From 2013 0 .				
е	From 2014				
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2015 from Part XII, line 4 \$				
а	Applied to 2014, but not more than line 2a		<u>.</u>		
b	Applied to undistributed income of prior years (Election required — see instructions)				
C	Treated as distributions out of corpus (Election required — see instructions)				
C	I Applied to 2015 distributable amount $\dots$		"		
e	Remaining amount distributed out of corpus $oldsymbol{\cdot}$	0.			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
	(,,,				=4
6	Enter the net total of each column as				
	indicated below:				
ā	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
t	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				
	Subtract line 6c from line 6b Taxable				
	amount – see instructions		0.		
•	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.			
	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0.			
	Analysis of line 9				
	Excess from 2011 0 .				İ
	© Excess from 2012 0 .				
	Excess from 2013 0 .				
	d Excess from 2014 0.				
	Excess from 2015 0 .	<u> </u>	<u> </u>		Form 000 DE (2015)

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Part VIV. 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>b</b> Check box to indicate whether the foundation		ng foundation descr		X 4942(j)(3) or	4942(j)(5)		
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Pnor 3 years				
investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total		
<b>b</b> 85% of line 2a							
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>							
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities							
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c							
3 Complete 3a, b, or c for the alternative test relied upon							
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 investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)							
(2) Support from general public and 5 or more exempt organizations as provided – in section 4942(j)(3)(B)(iii)			-	-			
(3) Largest amount of support from an exempt organization			-				
(4) Gross investment income			T				
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the estructions.)	foundation ha	d \$5,000 or more	in		
Information Regarding Foundation Managers a List any managers of the foundation who has close of any tax year (but only if they have continued to the second s	ve contributed more	than 2% of the total n \$5,000) (See sect	contributions receive ion 507(d)(2) )	ed by the foundation b	efore the		
<b>b</b> List any managers of the foundation who ow a partnership or other entity) of which the foundation	n 10% or more of the undation has a 10%	e stock of a corpora or greater interest	tion (or an equally la	rge portion of the own	ership of		
2 Information Regarding Contribution, Gran Check here ► X if the foundation only marequests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions to gifts, grants, etc (see	preselected charita instructions) to indi	ible organizations an viduals or organizati	ons under other condi	colicited tions,		
a The name, address, and telephone number MICHAEL SIGMON	or e-mail address of	the person to whom	n applications should	be addressed			
4220 BROOKLINE PLACE							
NORMAN	OK 7307				<del>.</del>		
<b>b</b> The form in which applications should be su NONE	bmitted and informat	tion and materials tr	iey should include				
c Any submission deadlines NONE							
<b>d</b> Any restrictions or limitations on awards, sur NONE	ch as by geographica	al areas, charitable f	fields, kinds of institu	tions, or other factors			
DAA		EA0340 40/43/45			form <b>990-PF</b> (2015)		

Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	- Amount
Name and address (home	or business)	substantial contributor	Lecibietif		
a Paid during the year SEE ATTACHED LIST SEE ATTACHED LIST	ov. 72060		NOVE		62,000
NORMAN	OK 73069		NONE	SCHEDULE ATTACHED	63,020.
		:			
-					
Total				▶ 3a	63,020.
<b>b</b> Approved for future payment			Ī		
Total	<u> </u>			3t	

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelated business income		Exclude	d by section 512, 513, or 514	(6)
1	Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
ā						
t						
•				ļ		
•						
•		_		<u> </u>		
f						·
	Fees and contracts from government agencies				-	<del>.</del>
2	Membership dues and assessments					
3 4	Interest on savings and temporary cash investments Dividends and interest from securities					
5	Net rental income or (loss) from real estate	_	<del> </del>			
-	Debt-financed property			-		
	Not debt-financed property		=-			
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory				· · · · <del>- · -</del>	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory	·				
11	Other revenue		-			
	1					
1						
(						
•	<u> </u>			ļ		<del></del>
`				ļ		
12	Subtotal Add columns (b), (d), and (e)			<u> </u>		
	Total. Add line 12, columns (b), (d), and (e)				13	
(See	worksheet in line 13 instructions to verify calculations	)				<del></del>
Pa	rt XVI-B Relationship of Activities to the	Accomp	lishment of Exemp	pt Purp	ooses	
11:-	e No. Explain below how each activity for which inco	me is report	red in column (e) of Part	ΥVI-A c	ontributed importantly to	the
Lir	▼ accomplishment of the foundation's exempt pu	urposes (oth	er than by providing fund	ds for su	ch purposes) (See instru	ictions)
			<del></del>			
-				_		
_						
			-		·	
			<del></del>			
		<del> </del>				
					<u> </u>	
		·			<del></del>	
			• •			F 000 BE (0045)

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

4 5							Yes	No
Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								_
	• •		ncharitable exempt organizat	ion of				
	•	•				1 a (1)		
						1 a (2)	<del>  -</del>	X
	er transactions					(-/	<del>  </del>	
		oncharitable exempt	organization			1 b (1)	<del> </del>	
			exempt organization			1 b (2)	<del> </del>	X
			sets			1 b (3)		X
						1 b (4)	<del> </del>	X
		•				1 b (5)		- <u>X</u>
٠,	•		r fundraising solicitations			1 b (6)	<del>                                     </del>	<u>X</u>
			ther assets, or paid employee			1 c	<del>                                     </del>	<u></u>
0 3116	aring or lacinities, equip	mient, maining lists, o	iner assets, or paid employee	3		10	LL	
the	goods, other assets, o	or services aiven by t	plete the following schedule ( the reporting foundation. If the in column (d) the value of the	foundation received le	ss than fair market value			
(a) Line r	o (b) Amount involve	ed (c) Name of	noncharitable exempt organization	(d) Description	of transfers, transactions, and s	haring arran	gements	
			<del>-</del>					
			<del></del>					
de	the foundation directly scribed in section 501( Yes,' complete the folion	c) of the Code (other	with, or related to, one or mothan section 501(c)(3)) or in s	re tax-exempt organiza section 527?	ations	. Ye	s X	No
	(a) Name of organi		(b) Type of organization	on I	(c) Description of relat	nonship		
	(a) italilo di digalili		(1) 1) po o. o. ga		(0) - 000, p.10, 10, 10, 10, 10, 10, 10, 10, 10, 10,		-	
				-				
			<del>.</del>					
			· · · · · · · · · · · · · · · · · · ·					
T	Under penalties of perjury,	clare that I have examined	this return, including accompanying sch taxpayer) is based on all information of	nedules and statements, and to	o the best of my knowledge and be	elief, it is true,		
Sign	correct, and complete Deglar	ation of preparer (other than	taxpayer) is based on all information of	which preparer has any know	vledge			
Here	1/11/148	•	8/12/	16		this retu	IRS discu	, 1
11616	1/1/1/1/1/1/9	mon	7/1-//	<u>CHAIRMA</u>	<u> </u>	(see inst	shown be tructions)?	, work
	Signature of officer of tryste	fe	Date	Title			Yes	No
	Print/Type preparer	s name	Preparer's signature	Date	Check X if	PTIN		
Paid	RONALD D.	KIRKPATRICK	You Futtall	1/8 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	self-employed	P0065	7167	
Prepai	er Firms name	RONALD D K	<u>irkpátričk /c//a</u>		Firm's EIN ▶ 73-1	<u>070929</u>		
Use O	nly Firm's address "	2465 BOARD	WALK //					
		NORMAN	· · · · · · · · · · · · · · · · · · ·	OK 73069-63	32 Phone no (405	) 364-	9138	
BAA						Form 99	)0-PF (2	2015)

# Michael & Jane Sigmon Family Foundation

Distribution of Gifts for 2015

Ally's House 308 W. Main Street Moore, OK 73160 877-730-2559	\$2,500
Center for Children and Families 210 South Cockrel Avenue Norman, OK 73071 Katie Fitzgerald, Executive Director 405-364-1420	\$5,000

Cleveland County CASA, Inc.	\$5,000
(Court Appointed Special Advocates)	
P.O. Box 1714	
(Couch Center on Tecumseh Road)	
Norman, OK 73070	-
405-360-5295	
Carol Romano, Executive Director	

Eden Clinic	\$2,500
701 E. Robinson, Ste 105	
Norman, OK 73071	
405-579-4673	
Alison Stow, Nurse Manager	
Linda Cozadd, Executive Director Director	

Deaconess Pregnancy and	
Adoption Services	\$5,000
7101 NW Expressway, Suite 325	
Oklahoma City, OK 73132	
Diedre McCool Executive Director	

Deliverance Ministries, Inc. Oklahoma City, OK 73112 www.delmin.com Everett Cox, Executive Director 405-842-5509	\$1,500
Food and Shelter for Friends 104 West Commanche PO Box 5537 Norman, OKL 73070 405-360-4954 April Desheir, Executive Director	\$3,000
Hope House 6607 N. Wester Ave. PMG #178 Oklahoma City, OK 73116 405-286-9589 Brandy Romine, Program Director	\$7,500
LoveWorks 127 W. Main Street P.O. Box 722764, Norman, OK 73070 405-329-9576 Michal Hirsch, Executive Director	\$8,500
Mission of Hope (Haiti) 1907 Cypress Creek Rd, Ste 106 P.O. Box 171500 Austin, TX 78717 512-256-0835 Brad Johnson, President	\$2,520
Novo Ministries 1700 NE 4 <sup>th</sup> Street Oklahoma City, OK 73117	\$6,000

405-209-9765

Valarie Sherrer, Director and Founder

Circle of Care

\$3,000

1501 N.W. 24th Street, Ste. 214 Oklahoma City, OK 73106-3635 405-530-2078

Donald Batson, President and CEO

#### Oklahoma Jail-Prison Ministries

\$2,000

201 N. Shartel, P.O. Box 1252 Oklahoma City, OK 73101 405-713-1046 Don Duncan, Senior Chaplain

#### Salvation Army

\$3,000

318 E. Hayes St., P.O. Box 1092 Norman, Oklahoma 73070-1092 405-364-9910 Major Margaret Kennell, Corps Officer

**Second Chance** 

\$3,000

4500 24<sup>th</sup> Ave NW Norman, OK 73069 402-321-1915

#### WildCare Foundation

\$3,000

7601 84<sup>th</sup> Street Noble, Oklahoma 73068 www.WildCareOklahoma.org 405-872-9338 Rondi, M. Large, Director

12/2015

### Part XV Purpose of Grants or Contribution

Ally's House - Assists families of Oklahoma children with cancer.

Center for Children and Families - Provides a range of effective services to heal children who have been wounded by relationship trauma, strengthen families who are struggling with parenting challenges and empower youth to reach their full potential as caring adults.

Cleveland Count CASA, Inc. is a court appointed non-profit advocacy group serving Cleveland, Garvin and McClain counties. CASA speaks up for children who have been abused or neglected and need a voice in the child welfare system. CASA's community volunteers are trained court advocates who give a voice to children who have no one to represent their best interests.

Eden Clinic (Formerly Care Net) - Provides pregnancy testing, counseling, education, and material assistance. Counseling includes education on the three options for an unexpected pregnancy. Education includes pregnancy, childbirth parenting. Ultrasound equipment is available for expecting mothers to get to know their baby prior to its birth. Material Assistance includes baby clothing, diapers, baby accessories and baby furniture. Referrals to other agencies are made as needed.

**Deaconess Pregnancy and Adoption Services** – Assists women in crisis pregnancies and provides adoption services.

**Deliverance Ministries, Inc.** is a non-profit, non-denominational, volunteer-reliant ministry providing group education and individual counseling and prayer with a focus on deliverance and inner healing. The program stresses that deliverance is not a one-time quick fix, but rather and important part of identifying issues and equipping people with methods and tools to gain freedom from harmful strongholds that are hindering their lives.

**Food and Shelter for Friends** of Norman, Oklahoma provides hot daily meals for needy people and temporary shelter for homeless families in transition and counseling to encourage employment and resolving other problems of the homeless.

**Hope House -** Provides housing, support and direction to disadvantaged women to help them gain education and employment and contributing members of the community.

**LoveWorks** – Provides after school and summer programs for middle school youth, where they are helped to discover their gifts, talents and strengths and possible vocations through tutoring, life skills training, team work, community service, and leadership development.

Mission of Hope Haiti – Provides medical care, food, clothing and Christian based education for children in Haiti.

Novo Ministries is an inner city ministry for children and youth offering after school, evening and summer initiatives.

Oklahoma United Methodist Circle of Care (COC) is a Methodist-based agency whose mission is to provide help, healing and wholeness to children, youth and families who are hurting by helping people make better choices, live happier lives, and find hope and promise in their futures. COC combines Christian influence with a therapeutic continuum of professional services. COC's residential group homes include the United Methodist Boy's Ranch in Gore, Frances E. Willard Home for Girls in Tulsa, and the United Methodist Children's Home in Tahlequah. Foster care through Child Share helps place children in homes through local church congregations and provides care for the changing physical, emotional and spiritual needs of individuals.

**Oklahoma Jail-Prison Fellowship** is a non-profit, volunteer-reliant ministry ministering directly to jail and prison inmates through counseling and Bible study. Thousands of prisoners are touched every year by OJPF with nearly 2,000 professions of faith annually. OJPF is currently exploring a means of partnering with local churches to offer follow-up support for individuals once they are released.

Salvation Army (Norman, Okla.) - Assists needy people with a variety of programs including food, clothing and temporary shelter.

Second Chance – Finds homes for abandoned and lost dogs and cats in Norman, Okla.

Wild Care Foundation provides medical care for injured wild animals and eventually frees them back into their natural habitat.

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Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RON KIRKPATRICK, CPA	ACCOUNTING FEES	400.			

Total

400.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LPL FINANCIAL SERVICES	INVESTMENT ADVISORY FEES	4,126.			

Total

4,126.

#### Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount
MICHAEL AND JANE SIGMON	150,000.
Total	150,000.

#### **Supporting Statement of:**

Form 990-PF, p1/Line 4(b)

Description	Amount
LPL FINANCIAL LPL FINANCIAL	23,413.
Total	34,261.