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#### DLN: 93491056001106

OMB No 1545-0052

Open to Public

# Form 990-PF

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

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

Department of the Treasury ▶ Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>. Internal Revenue Service Inspection For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015 A Employer identification number Name of foundation THE ML SHANOR FOUNDATION 75-6012834 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) PO BOX 2370 **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code WICHITA FALLS, TX 76307 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return A mended return  $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Address change Name change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 0 Part I Analysis of Revenue and Expenses Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per necessarily equal the amounts in column (a) (see (b) (c) purposes income ıncome books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 50.846 2 Check ► ☐ If the foundation is **not** required to attach . . . . . . . . . . . . . 3 Interest on savings and temporary cash investments 4,155 4,155 4,155 94,748 94,748 94,748 Gross rents . . . . . . . . . . 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 6,139 6a Revenue b Gross sales price for all assets on line 6a 208,947 Capital gain net income (from Part IV, line 2) . 6,139 Net short-term capital gain . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . . b Gross profit or (loss) (attach schedule) . C 50 Other income (attach schedule) . . 11 Total. Add lines 1 through 11 155,938 105,042 98,903 39,600 27,720 11,880 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . 15 Pension plans, employee benefits . . Expenses 匆 1,068 457 Legal fees (attach schedule). . . . 1,525 16a 夗 1,750 1,225 525 Accounting fees (attach schedule). . . b Other professional fees (attach schedule) . c Operating and Administrative **17** 囱 548 1,279 1,827 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 5,782 4,047 1,735 20 Occupancy . . . . . . 21 Travel, conferences, and meetings. 1,257 880 377 22 Printing and publications. 囫 1,150 805 345 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. 37.024 Add lines 13 through 23 . . . 52.891 15.867 394,420 394,420 25 Contributions, gifts, grants paid . . . . . . . 26 Total expenses and disbursements. Add lines 24 and

Subtract line 26 from line 12

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

25

27

a

68,018

37,024

447,311

-291,373

98,903

410,287

| Pa           | rt II  | Balance Sheets Attached schedules and amounts in the description column  | Beginning of year        | End of                          | <u> </u>              |
|--------------|--------|--|--------------------------|---------------------------------|-----------------------|
|              |        | should be for end-or-year amounts only (see instructions)                | (a) Book Value<br>67,284 | <b>(b)</b> Book Value<br>36,636 | (c) Fair Market Value |
|              | 1      | Cash—non-interest-bearing  |                          | ·                               |                       |
|              | 2      | Savings and temporary cash investments                                   | 1,205,782                | 787,064                         |                       |
|              | 3      | Accounts receivable  | 1 700                    |                                 |                       |
|              |        | Less allowance for doubtful accounts -                                   | 1,790                    |                                 |                       |
|              | 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 schedule)                       |                          |                                 |                       |
|              |        | Less allowance for doubtful accounts -                                   |                          |                                 |                       |
| 22           | 8      | Inventories for sale or use  |                          |                                 |                       |
| Sets         | 9      | Prepaid expenses and deferred charges                                    |                          |                                 |                       |
| AS           | 10a    | Investments—U S and state government obligations (attach schedule)       |                          |                                 |                       |
|              | ь      | Investments—corporate stock (attach schedule)                            | 1,975,743                | 2,135,526                       |                       |
|              | С      | Investments—corporate bonds (attach schedule)                            |                          |                                 |                       |
|              | 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) ▶ 1,705                  |                          |                                 |                       |
|              | 15     | O ther assets (describe 🟲)   |                          |                                 |                       |
|              | 16     | Total assets(to be completed by all filers—see the                       |                          |                                 |                       |
|              |        | ınstructions Also, see page 1, item I)                                   | 3,250,599                | 2,959,226                       | 0                     |
|              | 17     | Accounts payable and accrued expenses                                    |                          |                                 |                       |
|              | 18     | Grants payable   |                          |                                 |                       |
| φ            | 19     | Deferred revenue   |                          |                                 |                       |
| bilities     | 20     | Loans from officers, directors, trustees, and other disqualified persons |                          |                                 |                       |
| Liat         | 21     | Mortgages and other notes payable (attach schedule)                      |                          |                                 |                       |
| _            | 22     | O ther liabilities (describe   |                          |                                 |                       |
|              | 23     | Total liabilities(add lines 17 through 22)                               |                          | 0                               |                       |
|              |        | Foundations that follow SFAS 117, check here 🕨 🗀                         |                          |                                 |                       |
| φ            |        | and complete lines 24 through 26 and lines 30 and 31.                    |                          |                                 |                       |
| ä            | 24     | Unrestricted   |                          |                                 |                       |
| 8            | 25     | Temporarily restricted   |                          |                                 |                       |
| <u>=</u>     | 26     | Permanently restricted   |                          |                                 |                       |
| Fund Balance |        | Foundations that do not follow SFAS 117, check here 🕨 🔽                  |                          |                                 |                       |
| <u>-</u>     |        | and complete lines 27 through 31.  |                          |                                 |                       |
|              | 27     | Capital stock, trust principal, or current funds                         |                          |                                 |                       |
| Assets       | 28     | Paid-in or capital surplus, or land, bldg , and equipment fund           | 3,250,599                | 2,959,226                       |                       |
|              | 29     | Retained earnings, accumulated income, endowment, or other funds         |                          |                                 |                       |
| Met          | 30     | Total net assets or fund balances(see instructions)                      | 3,250,599                | 2,959,226                       |                       |
| _            | 31     | Total liabilities and net assets/fund balances(see instructions)         | 3,250,599                | 2,959,226                       |                       |
| Pa           | rt III | Analysis of Changes in Net Assets or Fund Balances                       | l                        |                                 |                       |
| 1            |        | Total net assets or fund balances at beginning of year—Part II, column   | (a), line 30 (must ad    | ree                             |                       |
|              |        | with end-of-year figure reported on prior year's return)                 | · · · · · · ·            |                                 | 3,250,599             |
| 2            |        | Enter amount from Part I, line 27a                                       |                          | <del> </del>                    | -291,373              |
| 3            |        | Other increases not included in line 2 (itemize)                         |                          | 3                               | _,                    |
| 4            |        | Add lines 1, 2, and 3  |                          |                                 | 2,959,226             |
| 5            |        | Decreases not included in line 2 (itemize) ►                             |                          | 5                               | , -,                  |
| 6            |        | Total net assets or fund balances at end of year (line 4 minus line 5)—P |                          | _                               | 2,959,226             |
|              |        |  |                          |                                 | · · ·                 |

| Form 99 | 90-PF (2015)  |  |                  |   |   | Page 3                        |  |
|---------|---|--|------------------|---|---|-------------------------------|--|
| Part 1  | V Capital Gains and Lo  | osses for Tax on Investm   | ent Income       |   |   |                               |  |
|         |   | d(s) of property sold (e g , real es<br>or common stock, 200 shs MLC |                  | How acquired P—Purchase (b) D—Donation    | Date acquired<br>(c) (mo , day, yr )                        | Date sold (d) (mo , day, yr ) |  |
| 1 a     | 149 REMY INTERNATION  | ALINC  |                  | Р   | 2014-01-03  | 2015-01-02                    |  |
| ь       | 191 FNFV GRP  |  |                  | Р   | 2014-01-03  | 2015-03-31                    |  |
| С       | 34 REMY INTERNATIONAL   | INC  |                  | Р   | 2014-01-03  | 2015-11-12                    |  |
| d       | 200,000 UNITED BANK CD  | )  |                  | Р   | 2014-04-29  | 2015-05-04                    |  |
| e       | Capital Gain Dividends  |  |                  |   |   |                               |  |
| (6      | e) Gross sales price  | Deprectation allowed (f) (or allowable)                              |                  | or other basis<br>expense of sale         |   | n or (loss)<br>(f) mınus (g)  |  |
| а       | 3   |  |                  | 4   |   | - 1                           |  |
| b       | 2,771   |  |                  | 1,972                                     |   | 799                           |  |
| С       | 1,003   |  |                  | 832                                       | 171   |                               |  |
| d       | 200,000   |  |                  | 200,000                                   | )   |                               |  |
| е       |   |  |                  |   |   | 5,170                         |  |
| Со      | mplete only for assets showing  | gaın ın column (h) and owned by                                      | the foundation   | on 12/31/69                               | Gains (Col  | (h) gaın mınus                |  |
| (i)     | FM V as of 12/31/69   |  |                  | ess of col (ı)<br>col (j), ıf any         | col (k), but not less than -0-) ( (I) Losses (from col (h)) |                               |  |
| а       |   |  |                  |   |   | - 1                           |  |
| b       |   |  |                  |   |   | 799                           |  |
| с       |   |  |                  |   |   | 171                           |  |
| d       |   |  |                  |   |   |                               |  |
| e       |   |  |                  |   |   |                               |  |
| 2       | Capital gain net income or (r   |  |                  | n Part I , line 7  <br>in Part I , line 7 | 2   | 6,139                         |  |
| 3       | Net short-term capital gain o   | or (loss) as defined in sections 12                                  | 222(5) and (6)   |   |   |                               |  |
|         | If gaın, also enter ın Part I, l<br>ın Part I, lıne 8                                   | ine 8, column (c) (see instruction                                   | ns) If(loss), er | nter - 0 -                                | 3   | -1                            |  |
| Part    | V Qualification Under   | Section 4940(e) for Redu   | ced Tax on       | Net Investme                              | <u> </u>  |                               |  |
|         | -   | ` '  |                  |   |   |                               |  |
|         | cional use by domestic private for a domestic private for 4940(d)(2) applies, leave the | foundations subject to the section<br>his part blank                 | n 4940(a) tax :  | on net investment i                       | income )  |                               |  |
| Was the | e foundation liable for the section   | on 4942 tax on the distributable a                                   | amount of any    | year in the base pe                       | rıod?   | ┌ Yes 🔽 No                    |  |

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

the Part VI instructions

|   | (a)<br>period years Calendar<br>or tax year beginning in) | <b>(b)</b><br>Adjusted qualifying distributions                              | (c)<br>Net value of noncharitable-use assets | (d) Distribution ratio (col (b) divided by col (c)) |                         |  |
|---|---|--|--|---|-------------------------|--|
|   | 2014  | 299,703  | 5,415,913                                    | 0 05  |                         |  |
|   | 2013  | 152,684  | 4,884,742                                    |   | 0 03126                 |  |
|   | 2012  | 162,067  | 4,011,725                                    |   | 0 04040                 |  |
|   | 2011  | 163,290  | 3,554,239                                    |   | 0 04594                 |  |
|   | 2010  | 153,203  | 3,135,700                                    |   | 0 04886                 |  |
| 2 | <b>Total</b> of line 1, colum                             | n (d)  |  | 2   | 0 221792                |  |
| 3 | -   | ratio for the 5-year base period—div<br>the foundation has been in existence |  | 3   | 0 044358                |  |
| 4 | Enter the net value o                                     | f noncharitable-use assets for 2015  | 5 from Part X, line 5                        | 4   | 6,282,992               |  |
| 5 | Multiply line 4 by line                                   | e 3  |  | 5   | 278,701                 |  |
| 6 | Enter 1% of net inve                                      | stment income (1% of Part I, line 2  | 7b) [  | 6   | 680                     |  |
| 7 | Add lines 5 and 6.  |  |  | 7   | 279,381                 |  |
| 8 | Enter qualifying distr                                    | ributions from Part XII, line 4  | [  | 8   | 410,287                 |  |
|   | If line 8 is equal to o                                   | r greater than line 7, check the box   | ın Part VI, lıne 1b, and complete tha        | t part  | using a 1% tax rate See |  |

|         | 990-PF (2015)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),  | 4940(e)    | ), or 4948—s    | ee pag   | e 18 of | the inst | ructio   |                 | age <b>4</b> |
|---------|---|------------|-----------------|----------|---------|----------|----------|-----------------|--------------|
| 1a      | Exempt operating foundations described in section 4940(d)(2), check here  |            | · <u>·</u>      | <u> </u> |         |          |          |                 |              |
|         | and enter "N/A" on line 1   | . ,        |                 |          |         |          |          |                 |              |
|         | Date of ruling or determination letter  |            |                 | }        |         |          |          |                 |              |
| _       | (attach copy of letter if necessary-see instructions)   | , , ,      |                 |          |         |          |          |                 |              |
| b       | Domestic foundations that meet the section 4940(e) requirements in Part \   | √, chec⊦   | <               | )        | 1       |          |          |                 | 680          |
|         | here Fand enter 1% of Part I, line 27b  | • •        |                 | • •      |         |          |          |                 |              |
| С       | All other domestic foundations enter 2% of line 27b Exempt foreign organic Part I, line 12, col (b)   | zations    | enter 4% of     |          |         |          |          |                 |              |
| 2       | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable for   | undatıor   | ns only Oth     | ers      | 2       |          |          |                 |              |
| -       | enter -0-) Add lines 1 and 2  |            |                 |          | 3       |          |          |                 |              |
| 3       | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fo  | undatio    | nc only Oth     | •<br>orc |         |          |          |                 | 680          |
| 4       | enter -0-)  | undatio    | iis oilly Otli  | C13      | 4       |          |          |                 |              |
| 5       | Tax based on investment income. Subtract line 4 from line 3 If zero or less,  | enter-0    | 0               |          | 5       |          |          |                 | 680          |
| 6       | Credits/Payments  |            |                 |          |         |          |          |                 |              |
| а       | 2015 estimated tax payments and 2014 overpayment credited to 2015   | 6a         |                 | 4,651    |         |          |          |                 |              |
| b       | Exempt foreign organizations—tax withheld at source   | 6b         |                 |          |         |          |          |                 |              |
| С       | Tax paid with application for extension of time to file (Form 8868). $$ . $$ .  | 6с         |                 |          |         |          |          |                 |              |
| d       | Backup withholding erroneously withheld   | 6d         |                 |          |         |          |          |                 |              |
| 7       | Total credits and payments Add lines 6a through 6d  |            |                 |          | 7       |          |          |                 | 4,651        |
| 8       | Enter any <b>penalty</b> for underpayment of estimated tax. Check here $\Gamma$ if Form   | 12220 I    | s attached      |          | 8       |          |          |                 |              |
| 9       | $\textbf{Tax due.} If the total of lines 5 and 8 is more than line 7, enter \\ \textbf{amount owed}$  |            |                 | •        | 9       |          |          |                 |              |
| 10      | Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount   | unt over   | rpaid           | •        | 10      |          |          | - 3             | 3,971        |
| 11      | Enter the amount of line 10 to be Credited to 2015 estimated tax  | 3,971      | Refunded        | •        | 11      |          |          |                 |              |
| Par     | t VII-A Statements Regarding Activities   |            |                 |          |         |          |          |                 |              |
| 1a      | During the tax year, did the foundation attempt to influence any national, sta  | te, or lo  | cal legislation | on or d  | d       |          |          | Yes             | No           |
|         | ıt participate or intervene in any political campaign?  |            |                 |          |         |          | 1a       |                 | No           |
| b       | $\mbox{Did}$ it spend more than \$100 during the year (either directly or indirectly) for   | r politica | al purposes     | (see In  | structi | ons      |          |                 |              |
|         | for definition)?  |            |                 |          |         | -        | 1b       |                 | No           |
|         | If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities  | es and co  | opies of any    | materia  | ls      |          |          |                 |              |
|         | published or distributed by the foundation in connection with the activities.   |            |                 |          |         |          |          |                 |              |
| С       | Did the foundation file Form 1120-POL for this year?  |            |                 |          |         |          | 1c       |                 | No           |
| d       | Enter the amount (if any) of tax on political expenditures (section 4955) imp   |            | - ,             |          |         |          |          |                 |              |
|         | (1) On the foundation  \$\bigs\tag{2} \tag{2} \tag{2} \tag{2} \tag{5} \tag{6}   |            |                 |          |         |          |          |                 |              |
| е       | Enter the reimbursement (if any) paid by the foundation during the year for po  | olitical e | expenditure     | tax ımp  | osed    |          |          |                 |              |
| _       | on foundation managers 🕨 \$   |            |                 |          |         |          |          |                 |              |
| 2       | Has the foundation engaged in any activities that have not previously been r  | eported    | to the IRS?     |          |         |          | 2        |                 | No           |
| _       | If "Yes," attach a detailed description of the activities.  |            |                 |          |         |          |          |                 |              |
| 3       | Has the foundation made any changes, not previously reported to the IRS, in   | _          | _               | •        |         | 5        | 2        |                 | Na           |
| 4-      | of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a col</i>  |            |                 |          |         |          | 3        | $\vdash$        | No           |
| 4a<br>b | Did the foundation have unrelated business gross income of \$1,000 or more If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?  | _          |                 |          |         |          | 4a<br>4b | $\vdash$        | No<br>No     |
| 5       | Was there a liquidation, termination, dissolution, or substantial contraction d   |            |                 |          |         |          | 5        |                 | No           |
| ,       | If "Yes," attach the statement required by General Instruction T.   | anny III   |                 |          |         |          |          |                 | 140          |
| 6       | Are the requirements of section 508(e) (relating to sections 4941 through 4   | .945) c    | atisfied eithe  | ar.      |         |          |          |                 |              |
| •       | By language in the governing instrument, or   | 3 13 / 30  | acionea erene   | - 1      |         |          |          |                 |              |
|         | By state legislation that effectively amends the governing instrument so the state of the s | that no    | mandatory d     | ırectıo  | ns      |          |          |                 |              |
|         | that conflict with the state law remain in the governing instrument?  |            |                 |          |         |          | 6        | Yes             |              |
| 7       | Did the foundation have at least \$5,000 in assets at any time during the year  |            |                 |          |         | ),       |          |                 |              |
|         |   |            | ·               |          |         |          | 7        | Yes             |              |
| 8a      | Enter the states to which the foundation reports or with which it is registered   | (see in    | structions)     |          |         |          |          |                 |              |
|         | ►TX   |            |                 |          |         |          |          |                 |              |
| b       | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form   | 990-PF     | to the Attor    | ney      |         |          |          |                 |              |
|         | General (or designate) of each state as required by General Instruction G? $\it I$  | f "No," a  | ttach explana   | ation .  |         |          | 8b       | Yes             |              |
| 9       | Is the foundation claiming status as a private operating foundation within the  | e meanır   | ng of sectior   | 4942     | (3)(3)  |          |          |                 |              |
|         | or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 $$   | (see ins   | tructions foi   | Part X   | (IV)?   |          |          |                 |              |
|         | If "Yes," complete Part XIV   |            |                 |          |         |          | 9        | $\sqcup \sqcup$ | No           |
| 10      | Did any persons become substantial contributors during the tax year? If "Yes  | s," attac  | h a schedule    | listing  | their n | ames     |          |                 |              |
|         | and addresses.  |            |                 |          |         |          | 10       |                 | No           |

| Par | 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        |          | No |
| 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        |          | No |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                               | 13        | Yes      |    |
|     | Website address ►N/A  |           | •        |    |
| 14  | The books are in care of ►FRANK W JARRATT Telephone no ►(940  | 1631      | -9768    |    |
|     | Located at ▶800 INDIANA WICHITA FALLS TX  ZIP+4 ▶76301  | , , , , , | 3,00     |    |
|     |   |           | <u> </u> |    |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —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 over                              |           | Yes      | No |
|     | a bank, securities, or other financial account in a foreign country?  | 16        |          | No |
|     | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial                                 |           |          |    |
|     | Accounts (FBAR) 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)  |           |          |    |
|     | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No   |           |          |    |
|     | (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 V No   |           |          |    |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes \( \backslash \) 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 ) Yes 🔽 No   |           |          |    |
| Ь   | 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)?   | 1b        |          | No |
|     | Organizations relying on a current notice regarding disaster assistance check here  |           |          |    |
| С   | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,   |           |          |    |
|     | that were not corrected before the first day of the tax year beginning in 2015?   | 1c        |          | No |
| 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   |           |          |    |
| b   | 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 allyears listed, answer "No" and attach statement—see instructions )   | 2b        |          | No |
| С   | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here                            |           |          |    |
| _   | ► 20, 20, 20  |           |          |    |
| За  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at  |           |          |    |
|     | any time during the year?   |           |          |    |
| b   | 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, <b>(2)</b> 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  |           |          |    |
|     | ıf the foundation had excess business holdings in 2015.).   | 3b        |          | No |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                   | 4a        |          | No |
| b   | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its                                    |           |          |    |
|     | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?                                | 4b        |          | No |

| Pai  | rt VII-B                                  | Statements Rega                | rdii               | ng Activities for                     | · Wh                    | ich Form 4720           | May                     | Be Required (Cont         | tinue     | d)          |         |
|--|---|--------------------------------|--------------------|---------------------------------------|-------------------------|-------------------------|-------------------------|---------------------------|-----------|-------------|---------|
| 5a   | During the                                | year did the foundation        | рау                | or incurany amoun                     | t to                    |                         |                         |                           |           |             |         |
|  | (1) Carry                                 | on propaganda, or other        | WISE               | attempt to influenc                   | e leg                   | ıslatıon (section 494   | 45(e                    | e)))?                     | √ No      |             |         |
|  | <b>(2)</b> Influe                         | nce the outcome of any         | spec               | ific public election (                | (see                    | section 4955), or to    | car                     | ry                        |           |             |         |
|  | on, dır                                   | ectly or indirectly, any       | vote               | r registration drive?                 |                         |                         |                         | \ Yes \                   | √ No      |             |         |
|  | (3) Provid                                | le a grant to an individu      | al foi             | travel, study, or otl                 | hers                    | ımılar purposes?        |                         | <b>▽ Yes</b> 「            | - No      |             |         |
| (4) Provide a grant to an organization other than a charitable, etc , organization described |   |                                |                    |                                       |                         |                         |                         |                           |           |             |         |
|  |   | tion 4945(d)(4)(A)? (se        |                    |                                       |                         |                         |                         |                           | √ No      |             |         |
|  |   | le for any purpose other       |                    |                                       |                         |                         |                         |                           |           |             |         |
|  | educa                                     | tional purposes, or for t      | he pi              | evention of cruelty                   | to ch                   | ıldren or anımals?.     |                         |                           | √ No      |             |         |
| b  | <b>b</b> If any answer is "Yes" to 5a(1)- |                                | 5), d              | ıd <b>any</b> of the transac          | tions                   | fail to qualify under   | the                     | exceptions described in   |           |             |         |
|  | Regulation                                | ns section 53 4945 or i        | nac                | urrent notice regard                  | ling c                  | lisaster assistance (   | see                     | instructions)?            |           | 5b          | No      |
|  | O rganızat                                | ions relying on a curren       | t not              | ice regarding disast                  | eras                    | sistance check here     | · .                     |                           | _         |             |         |
| c  | If the ans                                | wer is "Yes" to question       | 5a(                | 4), does the foundat                  | ion c                   | laım exemption from     | the                     |                           |           |             |         |
|  | tax becau                                 | se it maintained expend        | iture              | responsibility for th                 | he gr                   | ant?                    |                         | T Yes R                   | √ No      |             |         |
|  |   | ttach the statement requ       |                    |                                       |                         |                         |                         |                           |           |             |         |
| 6a   | Did the fo                                | undation, during the yea       | r, re              | ceive any funds, dire                 | ectly                   | or indirectly, to pay   | prer                    | miums on                  |           |             |         |
|  |   | I benefit contract?            |                    |                                       |                         |                         |                         |                           | √ No      |             |         |
| b  | Did the fo                                | undation, during the yea       | r, pa              | y premiums, directl                   | y orı                   | ndırectly, on a perso   | nal                     | benefit contract?         |           | 6b          | No      |
|  | If "Yes" to                               | 6b, file Form 8870.            |                    |                                       |                         |                         |                         |                           |           |             |         |
| 7a   | At any tin                                | ne during the tax year, w      | as t               | he foundation a part                  | y to a                  | prohibited tax shelt    | tert                    | ransaction?   Yes         | √ No      |             |         |
| ь  | If yes, did                               | the foundation receive         | any                | proceeds or have ar                   | y ne                    | t income attributable   | to t                    | the transaction?          |           | 7b          | No      |
|  | \   | Information About              | : Of               | ficers, Director                      | s, Tı                   | ustees, Founda          | tio                     | n Managers, Highly        | Paid      | Employ      | ees,    |
|  |   | and Contractors                |                    |                                       |                         |                         |                         |                           |           |             |         |
| _1_  | List all off                              | icers, directors, trustees     | s, fo              | undation managers a                   | and t                   | heir compensation (s    | see i                   |                           | 1         |             |         |
|  |   |                                | Title, and average | (c)                                   | Compensation( <b>If</b> |                         | (d)<br>Contributions to | ,                         | Expense a | ccount.     |         |
|  | <b>(a)</b> Nar                            | ne and address                 | (h)                | hours per week<br>devoted to position |                         | not paid, enter<br>-0-) |                         | mployee benefit plans     | (e)       | other allov |         |
| <u></u>  |   |                                |                    |                                       |                         |                         | and                     | d deferred compensation   |           |             |         |
|  | ARRATT                                    |                                |                    | MANAGER<br>40 00                      |                         | 36,000                  |                         |                           |           |             |         |
|  | BOX 2370<br>HITA FALL                     | S,TX 76307                     | ` `                | , ,                                   |                         |                         |                         |                           |           |             |         |
|  | (LAPPENBACH                               |                                | Director           |                                       | 1,200                   |                         |                         |                           |           |             |         |
|  | 30 X 2370                                 |                                | 0 00               |                                       | 1,200                   |                         |                         |                           |           |             |         |
|  |   | S,TX 76307                     |                    |                                       |                         |                         |                         |                           |           |             |         |
| ALAN   | J FREEMAN                                 |                                | Dire               | ctor                                  |                         | 1,200                   |                         |                           |           |             |         |
| 440  | 8 MALLOR                                  | Y                              | 0 0                | )                                     |                         |                         |                         |                           |           |             |         |
|  |   | S,TX 76309                     |                    |                                       |                         |                         |                         |                           |           |             |         |
| GREG   | ORY ROSS                                  |                                | 1                  | ctor                                  |                         | 1,200                   |                         |                           |           |             |         |
|  |   | VD STE 308                     | 0 0                | J                                     |                         |                         |                         |                           |           |             |         |
|  |   | S,TX 76308                     |                    | olovoos (othor than                   | thos                    | a included on line 1    |                         | instructions). If none, e |           | NONE "      |         |
|  | Compensat                                 |                                | emį                |                                       |                         | e included on line 1—   | see                     | Contributions to          | nter i    | NONE.       |         |
| Nar  | ma and add                                | (a)<br>ress of each employee p | a.d                | Title, and aver hours per we          |                         | (c) Compensatio         | n                       | employee benefit          | E         | Expense a   | ccount, |
| IVal   |   | e than \$50,000                | aiu                | (b) devoted to pos                    |                         | (c) Compensatio         | "                       | plans and deferred        | (e)       | other allov | vances  |
| NON  |   |                                |                    |                                       |                         |                         |                         | (d) compensation          |           |             |         |
| NON  | I E                                       |                                |                    | -                                     |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    |                                       |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    | -                                     |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    |                                       |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    | -                                     |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    |                                       |                         |                         |                         |                           | -         |             |         |
|  |   |                                |                    | -                                     |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    |                                       |                         |                         |                         |                           | -         |             |         |
|  |   |                                |                    |                                       |                         |                         |                         |                           |           |             |         |
|  |   |                                |                    | <u> </u>                              |                         |                         |                         | <u> </u>                  |           |             |         |

| Part VIII Information About Officers, Directors, True and Contractors (continued)   | ustees, Foundation Managers, Highly            | Paid Employees,  |
|---|--|------------------|
| 3 Five highest-paid independent contractors for professional service  | ces (see instructions). 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 service   | es   |                  |
| Part IX-A Summary of Direct Charitable Activities   |  |                  |
| List the foundation's four largest direct charitable activities during the tax year. Includ organizations and other beneficiaries served, conferences convened, research papers | Expenses                                       |                  |
| 1THE FOUNDATION PROVIDES FINANCIAL ASSISTANCE TO APPROXIMATELY 100 STUDENTS EACH YEAR (SEE ATTACH   |  | 297,000          |
| 2CHARITABLE CONTRIBUTIONS   |  | 97,420           |
| 3   |  |                  |
| 4   |  |                  |
| Part IX-B Summary of Program-Related Investmen  | ts (see instructions)                          |                  |
| Describe the two largest program-related investments made by the foundation du  | · · · · · · · · · · · · · · · · · · ·          | A mount          |
| 1   | -  |                  |
|   |  |                  |
|   |  |                  |
| 2   |  |                  |
| <u>-</u>  |  |                  |
|   |  |                  |
| All other pregram related investments. See instructions   |  |                  |
| All other program-related investments See instructions  |  |                  |
| 3   |  |                  |
|   |  |                  |
| Takal Add Imaa 1 Abusuub 2  |  |                  |
| <b>Total.</b> Add lines 1 through 3   |  |                  |

#### Part X Minimum Investment Return

| Pa  | (All domestic foundations must complete this part. Foreign foundations, see instruction   | s.)     |                          |
|-----|---|---------|--------------------------|
| 1   | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,   |         |                          |
|     | purposes  |         |                          |
| а   | Average monthly fair market value of securities   | 1a      | 5,277,547                |
| b   | Average of monthly cash balances  | 1b      | 1,099,335                |
| c   | Fair market value of all other assets (see instructions)  | 1c      | 1,790                    |
| d   | <b>Total</b> (add lines 1a, b, and c)   | 1d      | 6,378,672                |
| 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       |                          |
| 3   | Subtract line 2 from line 1d  | 3       | 6,378,672                |
| 4   | Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see  |         |                          |
|     | ınstructions)   | 4       | 95,680                   |
| 5   | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4   | 5       | 6,282,992                |
| 6   | Minimum investment return. Enter 5% of line 5   | 6       | 314,150                  |
| Pai | t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.) | rtaın f | oreign organizations     |
| 1   | Mınımum ınvestment return from Part X, line 6   | 1       | 314,150                  |
| 2a  | Tax on investment income for 2015 from Part VI, line 5   2a   680   |         |                          |
| b   | Income tax for 2015 (This does not include the tax from Part VI ) 2b  |         |                          |
| С   | Add lines 2a and 2b   | 2c      | 680                      |
| 3   | Distributable amount before adjustments Subtract line 2c from line 1  | 3       | 313,470                  |
| 4   | Recoveries of amounts treated as qualifying distributions   | 4       |                          |
| 5   | Add lines 3 and 4   | 5       | 313,470                  |
| 6   | Deduction from distributable amount (see instructions)  | 6       |                          |
| 7   | Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1   | 7       | 313,470                  |
| Par | t XII Qualifying Distributions (see instructions)   |         | ·                        |
| 1   | A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes  |         |                          |
| а   | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26   | 1a      | 410,287                  |
| b   | Program-related investments—total from Part IX-B  | 1b      |                          |
| 2   | A mounts 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      |                          |
| b   | Cash distribution test (attach the required schedule)   | 3b      |                          |
| 4   | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4   | 4       | 410,287                  |
| 5   | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment  |         |                          |
|     | ıncome Enter 1% of Part I, line 27b (see instructions)  | 5       | 680                      |
| 6   | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6       | 409,607                  |
|     | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years     | er the  | foundation qualifies for |

| P  | art XIII Undistributed Income (see insti  | ructions)     |                                   |                    |                    |
|----|---|---------------|-----------------------------------|--------------------|--------------------|
|    |   | (a)<br>Corpus | <b>(b)</b><br>Years prior to 2014 | <b>(c)</b><br>2014 | <b>(d)</b><br>2015 |
| 1  | Distributable amount for 2015 from Part XI, line 7                                    |               |                                   |                    | 313,470            |
| 2  | Undistributed income, if any, as of the end of 2015                                   |               |                                   |                    |                    |
| а  | Enter amount for 2014 only  |               |                                   | 41,743             |                    |
|    | Total for prior years 20, 20, 20  |               |                                   |                    |                    |
| 3  | Excess distributions carryover, if any, to 2015                                       |               |                                   |                    |                    |
|    | From 2010   |               |                                   |                    |                    |
|    | From 2011   |               |                                   |                    |                    |
|    | From 2012   |               |                                   |                    |                    |
|    | From 2013   |               |                                   |                    |                    |
|    | From 2014   |               |                                   |                    |                    |
|    | Total of lines 3a through e   |               |                                   |                    |                    |
|    | Qualifying distributions for 2015 from Part   |               |                                   |                    |                    |
| _  | XII, line 4  \$ 410,287   |               |                                   |                    |                    |
| 2  | Applied to 2014, but not more than line 2a  |               |                                   | 41,743             |                    |
|    |   |               |                                   | 11,713             |                    |
|    | Applied to undistributed income of prior years (Election required—see instructions)   |               |                                   |                    |                    |
| С  | Treated as distributions out of corpus (Election required—see instructions)           | 0             |                                   |                    |                    |
| d  | Applied to 2015 distributable amount  |               |                                   |                    | 313,470            |
| е  | Remaining amount distributed out of corpus  | 55,074        |                                   |                    |                    |
| 5  | Excess distributions carryover applied to 2015  |               |                                   |                    |                    |
|    | (If an amount appears in column (d), the<br>same amount must be shown in column (a).) |               |                                   |                    |                    |
| 6  | Enter the net total of each column as indicated below:                                |               |                                   |                    |                    |
| а  | Corpus Add lines 3f, 4c, and 4e Subtract line 5                                       | 55,074        |                                   |                    |                    |
|    | Prior years' undistributed income Subtract  |               |                                   |                    |                    |
|    | line 4b from line 2b  |               |                                   |                    |                    |
| c  | Enter the amount of prior years' undistributed  |               |                                   |                    |                    |
|    | income for which a notice of deficiency has   |               |                                   |                    |                    |
|    | been issued, or on which the section 4942(a)  |               |                                   |                    |                    |
| _  | tax has been previously assessed  |               |                                   |                    |                    |
| d  | Subtract line 6c from line 6b Taxable amount —see instructions                        |               |                                   |                    |                    |
| е  | Undistributed income for 2014 Subtract line   |               |                                   |                    |                    |
|    | 4a from line 2a Taxable amount—see  |               |                                   |                    |                    |
| _  | instructions  |               |                                   |                    |                    |
| Т  | Undistributed income for 2016 Subtract<br>lines 4d and 5 from line 1 This amount must |               |                                   |                    |                    |
|    | be distributed in 2015  |               |                                   |                    | 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)  |               |                                   |                    |                    |
| 9  | Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a           | 55,074        |                                   |                    |                    |
| 10 |   |               |                                   |                    |                    |
|    | Analysis of line 9 Excess from 2011   |               |                                   |                    |                    |
|    | Excess from 2012  |               |                                   |                    |                    |
|    | Excess from 2012  |               |                                   |                    |                    |
|    | Excess from 2014  |               |                                   |                    |                    |
|    | Excess from 2014  |               |                                   |                    |                    |
| е  | LXCE22 HOHI 2012   33,074   |               |                                   |                    |                    |

| Ŀ      | Part XIV Private Operating Founda  | tions (see ınstru                           | ictions and Part     | VII-A, question       | 9)                  |              |
|--------|--|---|----------------------|-----------------------|---------------------|--------------|
| 1a     | If the foundation has received a ruling or deter<br>foundation, and the ruling is effective for 2015   |   |                      | - 1                   |                     |              |
| b      | Check box to indicate whether the organizatio  | n is a private operat                       | ting foundation de:  | scribed in section    |                     | 厂 4942(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>(b)</b> 2014      | (c) 2013              | (d) 2012            | (e) local    |
| b      | 85% of line 2a   |   |                      |                       |                     |              |
| c      | Qualifying distributions from Part XII,  |   |                      |                       |                     |              |
| d      | Inne 4 for each year listed A mounts 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                                 |   |                      |                       |                     |              |
|        | 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<br>of minimum investment return shown in<br>Part X, line 6 for each year listed                      |   |                      |                       |                     |              |
| c      |  |   |                      |                       |                     |              |
|        | (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   |   |                      |                       |                     |              |
| Pa     | rt XV Supplementary Information (  | Complete this                               | part only if th      | e organizatior        | had \$5,000 o       | r more in    |
|        | assets at any time during the  | year—see inst                               | tructions.)          |                       |                     |              |
| 1<br>a | Information Regarding Foundation Managers: List any managers of the foundation who have before the close of any tax year (but only if the    |   |                      |                       |                     | lation       |
| b      | List any managers of the foundation who own 1 ownership of a partnership or other entity) of v   |   |                      |                       | large portion of th | e            |
| 2      | Information Regarding Contribution, Grant, Gi  | ft, Loan, Scholarshi                        | p, etc., Programs:   |                       |                     |              |
|        | Check here  if the foundation only makes of unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and | contributions to pre<br>n makes gifts, gran | selected charitabl   | e organizations an    |                     |              |
| a<br>  | The name, address, and telephone number or FW JARRATT PO BOX 2370 WICHITA FALLS,TX 76307 (940)631-9768                                       | e-mail address of th                        | ne person to whom    | applications shou     | ıld be addressed    |              |
| b      | The form in which applications should be subr<br>COPY ATTACHED SEE STATEMENT 11  | nitted and informati                        | on and materials t   | hey should include    | 2                   |              |
|        | Any submission deadlines AUGUST 1  |   |                      |                       |                     |              |
| d      | Any restrictions or limitations on awards, suc<br>factors  | h as by geographica                         | al areas, charitable | e fields, kinds of in | stitutions, or othe | r            |
|        | VICINITY   |   |                      |                       |                     |              |

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 394,420 **b** Approved for future payment

| Enter gross amounts unless otherwise indicated   | Unrelated bu         | ısıness ıncome        | Excluded by section   | 512, 513, or 514      | <b>(e)</b><br>Related or exempt          |
|--|----------------------|-----------------------|-----------------------|-----------------------|--|
| 1 Program service revenue  | (a)<br>Business code | <b>(b)</b><br>A mount | (c)<br>Exclusion code | <b>(d)</b><br>A mount | function income<br>(See<br>instructions) |
| a  |                      |                       |                       |                       |  |
| b  |                      |                       |                       |                       |  |
| c<br>d   |                      |                       |                       |                       |  |
| e  |                      |                       |                       |                       |  |
| f  |                      |                       |                       |                       |  |
| <b>g</b> Fees and contracts from government agencies   |                      |                       |                       |                       |  |
| <ul><li>2 Membership dues and assessments</li><li>3 Interest on savings and temporary cash investments</li></ul> |                      |                       | 14                    | 4,155                 |  |
| 4 Dividends and interest from securities   |                      |                       | 14                    | 94,748                |  |
| 5 Net rental income or (loss) from real estate   |                      |                       |                       |                       |  |
| <b>a</b> Debt-financed property  |                      |                       |                       |                       |  |
| <ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal property</li></ul>      |                      |                       |                       |                       |  |
| 7 Other investment income  |                      |                       |                       |                       |  |
| 8 Gain or (loss) from sales of assets other than inventory   |                      |                       |                       | 5,170                 | 969                                      |
| <b>9</b> Net income or (loss) from special events  |                      |                       |                       |                       |  |
| 10 Gross profit or (loss) from sales of inventory  |                      |                       |                       |                       |  |
| <br>11 Other revenue <b>a</b> LITIGATION<br>SETTLEMENT   | 900099               | 50                    |                       |                       |  |
| b  |                      |                       |                       |                       |  |
| c  |                      |                       |                       |                       |  |
| d  |                      |                       |                       |                       |  |
| e<br>12 Subtotal Add columns (b), (d), and (e)   |                      | 50                    |                       | 104,073               | 969                                      |
| 13 Total. Add line 12, columns (b), (d), and (e)   |                      |                       |                       | .3                    | 105,092                                  |
| (See worksheet in line 13 instructions to verify   | calculations )       |                       |                       |                       |  |
| Line No.  Explain below how each activity for what the accomplishment of the foundation instructions )           | ich income is re     | ported ın column (    | e) of Part XVI-A co   | ntributed importa     |  |
|  |                      |                       |                       |                       |  |
|  |                      |                       |                       |                       |  |
|  |                      |                       |                       |                       |  |
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|  |                      |                       |                       |                       |  |
|  |                      |                       |                       |                       |  |

| Part                | : XVII             | Information Re<br>Noncharitable  |                         |                      |                        |                   | sactions a                      | nd Relationship:             | s With                        |              |                    |                 |
|---------------------|--------------------|--|-------------------------|----------------------|------------------------|-------------------|---------------------------------|------------------------------|-------------------------------|--------------|--------------------|-----------------|
|                     |                    | ganization directly or ii<br>01(c) of the Code (othe   | ndırectly (             | engage               | ın any of t            | the following wi  |                                 |                              |                               |              | Yes                | No              |
| org                 | janızatı           | ions?  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
| <b>a</b> Tra        | ansfers            | from the reporting four  | dation to               | a noncl              | harıtable (            | exempt organız    | atıon of                        |                              |                               |              |                    |                 |
| (1)                 | Cash               |  |                         |                      |                        |                   |                                 |                              |                               | 1a(1)        |                    | No              |
| (2)                 | Othe               | rassets  |                         |                      |                        |                   |                                 |                              |                               | 1a(2)        |                    | No              |
| <b>b</b> Otl        | her trai           | nsactions  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
| (1)                 | Sales              | s of assets to a noncha  | rıtable ex              | empt or              | ganızatıoı             | n                 |                                 |                              |                               | 1b(1)        |                    | No              |
| (2)                 | Purcl              | hases of assets from a   | noncharıt               | able ex              | empt orga              | inization         |                                 |                              |                               | 1b(2)        |                    | No              |
| (3)                 | Renta              | al of facilities, equipme  | nt, or othe             | erasset              | :s                     |                   |                                 |                              |                               | 1b(3)        |                    | No              |
| (4)                 | Reim               | bursement arrangemen   | ts                      |                      |                        |                   |                                 |                              |                               | 1b(4)        |                    | No              |
| (5)                 | Loan               | s or loan guarantees.  |                         |                      |                        |                   |                                 |                              |                               | 1b(5)        |                    | No              |
|                     |                    | mance of services or m   |                         |                      |                        |                   |                                 |                              |                               | 1b(6)        |                    | No              |
| <b>c</b> Sha        | arıng o            | f facılıtıes, equipment, i   | mailing lis             | ts, othe             | er assets,             | or paid employ    | ees                             |                              |                               | 1c           |                    | No              |
| of t                | the goo<br>any tra | wer to any of the above ods, other assets, or se nsaction or sharing arra  (b) Amount involved                   | rvices giv<br>angement  | en by tl<br>, show i | he reportı<br>n column | ng foundation 1   | f the foundat<br>f the goods, o | ion received less tha        | in fair marke<br>ices receive | t value<br>d |                    | tc.             |
| (a) Line            | E INO              | (b) Amount involved  | (C) Name                | OI HOHEI             | ialitable exe          | empt organization | (u) Descri                      | puon or transfers, transa-   | ctions, and sna               | iliy allali  | jemen              | 11.5            |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
| des                 | scribed            | ndation directly or indii<br>I in section 501 (c) of the<br>complete the following s<br>(a) Name of organization | ie Code (d<br>schedule  |                      | an sectioi             |                   | in section 52                   | 27°                          | nption of relation            |              | <b>\rightarrow</b> | No              |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
|                     |                    |  |                         |                      |                        |                   |                                 |                              |                               |              |                    |                 |
| Sign<br>Here        | the<br>Info        | er penalties of perjury, best of my knowledge a rmation of which prepar *****  Signature of officer or to        | nd belief,<br>er has an | ıt ıs tru            | ie, correct            |                   |                                 | of preparer (other th        | May the return with the below |              | ed on<br>uss the   | all<br>Is<br>In |
|                     |                    | Print/Type preparer's<br>Alan J Freeman  | name                    | Prepa                | rer's Sıgn             | ature             | Date                            | Check if self-<br>employed ▶ | PTIN<br>PC                    | 018630       | ) 3                |                 |
| Paid<br>Prep<br>Use | arer               |  |                         |                      |                        |                   |                                 |                              | ; EIN ►                       |              |                    |                 |
| Only                |                    | Firm's address • 4245 Kemp Blvd Ste 9763082828   | Phone no (940)691-2181  |                      |                        |                   |                                 |                              |                               |              |                    |                 |

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient  | If recipient is an individual, show any relationship to | Foundation<br>status of | Purpose of grant or contribution | A mount |
|--|---|-------------------------|----------------------------------|---------|
| Name and address (home or business)                                    | any foundation manager<br>or substantial contributor    | recipient               | Contribution                     |         |
| a Paid during the year   |   |                         |                                  |         |
| SEE STATEMENT 9 SEE STATEMENT 9 SEE STATEMENT,TX 76307                 | N/A   |                         | EDUCATIONAL GRANTS               | 297,000 |
| boys girls clubs of vernon<br>2015 Yamparika Street<br>vernon,TX 76384 | N/A   |                         | CHARITABLE DONATION              | 58,420  |
| PROJECT BACK TO SCHOOL<br>PO BOX 660<br>WICHITA FALLS,TX 76307         | N/A   |                         | CHARITABLE DONATION              | 5,000   |
| CHILD ADVOCATES<br>808 AUSTIN ST<br>WICHITA FALLS,TX 76301             | N/A   |                         | CHARITABLE DONATION              | 12,000  |
| CHILD CARE INC<br>1000 LAMAR ST ROOM 432<br>WICHITA FALLS,TX 76301     | N/A   |                         | CHARITABLE DONATION              | 12,000  |
| MSU STUDENT AMBASSADOR<br>3410 TAFT BLVD<br>WICHITA FALLS,TX 76308     | N/A   |                         | CHARITABLE DONATION              | 10,000  |
| Total  |   |                         |                                  | 394,420 |

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# **TY 2015 Accounting Fees Schedule**

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Category   | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|------------|--------|--------------------------|------------------------|---|
| ACCOUNTING | 1,750  | 1,225                    | 0                      | 525   |

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# **TY 2015 General Explanation Attachment**

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Identifier | Return Reference         | Explanation   |
|------------|--------------------------|---|
|            | Supplemental Information | STATEMENT 13 INVESTMENTS COST FMV6,146 SHS AET 363,044 664,5058,000 SHS EFX 93,766 890,960777 SHS EGP 9,589 43,2094,000 SHS FIS 37,226 242,400574 SHS FNF 15,744 19,9013,500 SHS JNJ 294,336 359,52029,000 SHS PFE 947,973 936,120375 SHS PKY 6,119 5,86117,600 SHS UNH 153,985 2,070,464 \$1,921,782 \$5,232,941 |

# TY 2015 Land, Etc. Schedule

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Category / Item         | Cost / Other<br>Basis | Accumulated Depreciation | Book Value | End of Year Fair<br>Market Value |
|-------------------------|-----------------------|--------------------------|------------|----------------------------------|
| Machinery and Equipment | 1,705                 | 1,705                    |            |                                  |

# TY 2015 Legal Fees Schedule

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Category | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|----------|--------|--------------------------|------------------------|---|
| legal    | 1,525  | 1,068                    | 0                      | 457   |

# **TY 2015 Other Expenses Schedule**

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Description | Revenue and Expenses<br>per Books | Net Investment<br>Income | Adjusted Net Income | Disbursements for<br>Charitable Purposes |
|-------------|-----------------------------------|--------------------------|---------------------|--|
| INSURANCE   | 1,150                             | 805                      |                     | 345                                      |

### **TY 2015 Other Income Schedule**

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Description           | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |
|-----------------------|-----------------------------------|--------------------------|---------------------|
| LITIGATION SETTLEMENT | 50                                |                          |                     |

#### **TY 2015 Taxes Schedule**

Name: THE ML SHANOR FOUNDATION

**EIN:** 75-6012834

**Software ID:** 15000324

| Category      | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|---------------|--------|--------------------------|------------------------|---|
| FOREIGN TAXES | 32     | 22                       |                        | 10  |
| PAYROLL TAXES | 1,795  | 1,257                    |                        | 538   |

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As Filed Data -

DLN: 93491056001106

C I I I I D

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

Department of the Treasury Internal Revenue Service

Name of the organization

THE ML SHANOR FOUNDATION

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2015

**Employer identification number** 

|  | 75  | 5-6012834                         |  |  |
|--|---|-----------------------------------|--|--|
| Organization type (check o   | one)  |                                   |  |  |
| Filers of:   | ers of: Section:  |                                   |  |  |
| Form 990 or 990-EZ   | 501(c)( ) (enter number) organization   |                                   |  |  |
|  |   |                                   |  |  |
|  | 527 political organization  |                                   |  |  |
| Form 990-PF  | ▼ 501(c)(3) exempt private foundation   |                                   |  |  |
|  |   |                                   |  |  |
|  | 501(c)(3) taxable private foundation  |                                   |  |  |
| General Rule  For an organization  | 7), (8), or (10) organization can check boxes for both the General Rule and a Speci-<br>filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota<br>many one contributor Complete Parts I and II See instructions for determining a con  | ling \$5,000 or more (in money or |  |  |
| Special Rules  |   |                                   |  |  |
| under sections 509(a<br>received from any on   | lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, Iir ne contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or <b>(2)</b> () Form 990-EZ, line 1 Complete Parts I and II | ne 13, 16a, or 16b, and that      |  |  |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, for the prevention of cruelty to children or animals. Complete Parts I, II, and III   |   |                                   |  |  |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year |   |                                   |  |  |

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
THE ML SHANOR FOUNDATION

Employer identification number 75-6012834

| Part I     | Contributors (see instructions) Use duplicate copies of Part I if | f additional space is needed |   |                     |
|------------|---|------------------------------|---|---------------------|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions   | (d)<br>Type of contrib                          | oution              |
| 1          | LOAN REPAYMENTS STATEMENT 10                                      |                              | Person<br>Payroll                               | 고                   |
|            | SEE STATEMENT 10  SEE STATEMENT, TX76308                          | \$ 50,846                    | Noncash   | ·<br>               |
|            |   |                              | (Complete Part II for r                         | noncash             |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions   | (d)<br>Type of contrib                          | oution              |
|            |   |                              | Person  | Γ                   |
|            |   | \$                           | Payroll   | Г<br>_              |
|            |   |                              | Noncash  (Complete Part II for r                | <b> </b><br>noncash |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions   | (d) Type of contrib                             | oution              |
|            |   |                              | Person  | Γ                   |
|            |   | \$                           | Payroll   | Γ                   |
|            |   |                              | Noncash   | Г<br>               |
|            |   |                              | (Complete Part II for r contributions )         | ioricasri           |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions   | (d)<br>Type of contrib                          | oution              |
|            |   |                              | Person  | Γ                   |
|            |   | \$                           | Payroll   | Γ                   |
|            |   |                              | Noncash  (Complete Part II for r contributions) | noncash             |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions   | (d)<br>Type of contrib                          | oution              |
|            |   |                              | Person  | Γ                   |
|            |   | \$                           | Payroll   | Γ                   |
|            |   |                              | Noncash (Complete Part II for r                 | noncash             |
| (a)        | (b)   | (c)                          | contributions )                                 |                     |
| No.        | Name, address, and ZIP + 4  | Total contributions          | Type of contrib                                 | oution              |
|            |   |                              | Payroll   | ,<br>               |
|            |   | \$                           | Noncash   |                     |
|            |   |                              | (Complete Part II for r                         | noncash             |

| Name of organization<br>THE ML SHANOR FOUNDATION |  | Employer identification r                | number               |
|--|--|--|----------------------|
| THE ML SHANOR                                    | FOUNDATION   | 75-6012834                               |                      |
| Part II  | Noncash Property   | •  |                      |
| Part II  | (see instructions) Use duplicate copies of Part II if additional space is needed |  |                      |
| (a)<br>No.from Part I                            | (b)<br>Description of noncash property given                                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|  |  |  |                      |
| (a)<br>No.from Part I                            | (b)<br>Description of noncash property given                                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|  |  |  |                      |
| (a)<br>No.from Part I                            | (b)<br>Description of noncash property given                                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|  |  |  |                      |
| (a)<br>No.from Part I                            | (b)<br>Description of noncash property given                                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|  |  |  |                      |
| (a)<br>No.from Part I                            | (b)<br>Description of noncash property given                                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|  |  |  |                      |
| (a)<br>No.from Part I                            | (b)<br>Description of noncash property given                                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|  |  |  |                      |
|  |  |  |                      |

| Schedule B (Form 990, 990-EZ, or 990-F | <b>'</b> F) | (2015 | 5) |
|--|-------------|-------|----|
|--|-------------|-------|----|

| Schedule B (Form 990,                          | 990-EZ, or 990-PF) (2015)  |   | Page <b>4</b>  |
|--|--|---|--|
| ame of organization<br>HE ML SHANOR FOUNDATION |  |   | Employer identification number 75-6012834  |
| total more<br>line entry.<br>of \$1,000 o      | than \$1,000 for the year from any o   | one contributor. Complete co<br>III, enter the total of exclusive<br>mation once. See instruction | ribed in section 501(c)(7), (8), or (10) that olumns (a) through (e) and the following ely religious, charitable, etc., contributions ns.)   \$\bigset\$ \bigset\$ |
| (a)<br>No.from Part I                          | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |
| -  -   |  |   |  |
| -  | (e) Transfer of gift Transferee's name, address, and ZIP4 Rela                                       |   | ft Relationship of transferor to transferee  |
|  |  |   |  |
| (a)<br>No.from Part I                          | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |
| .   _  |  |   |  |
| -  | (e) Transfer of gift  Transferee's name, address, and ZIP4  Relationship of transferor to transferee |   |  |
| (a)<br>No.from Part I                          | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |
| .   =  |  |   |  |
| -  | (e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee   |   |  |
| (a)<br>No.from Part I                          | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |
| .   _  |  |   |  |
| <del>-</del>                                   | (e) Transfer of gift  Transferee's name, address, and ZIP4  Relationship of transferor to transferee |   |  |
| -  |  |   |  |