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# Form 990-PF

# **Return of Private Foundation**

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

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

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

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2016 or tax year beginning

, and ending

Open to Public Inspection

	ame of fou				A Employer	identification number	
		ODS FAMILY FOUNDATION			-		
		d street (or PO box number if mail is not delivered to street address)	R	oom/suite		27-1767386	<del></del> _
		TERFORD BLVD		_200	<b>B</b> Telephone	number (see instruction	ns)
		s, state or province, country, and ZIP or foreign postal code	70440		ļ	(405) 040 400	14
_		MA CITY OK	73118		<b></b>	(405) 842-188	
F	oreign cou	intry name Foreign province/state/county	Foreign postal code C If exemption application is pending, check his				g, check here 🕨 🔼
G	Chack	all that apply   Initial return   Initial return		<del></del>	D 4 Foreign	n organizations, check h	
0	Check	call that apply ☐ Initial return ☐ Initial return ☐ Amended ret	of a former publi	c cnarity	1		
					1	n organizations meeting here and attach comput	. —
H	Chook	. L Address change L Name chang type of organization X Section 501(c)(3) exempt pri			4	oundation status was te	
				-I-4		7(b)(1)(A), check here	▶ [_
닏		on 4947(a)(1) nonexempt charitable trust			-		
		narket value of all assets at J Accounting method		Accrual	F If the foun	dation is in a 60-month	termination
		f year (from Part II, col (c), Other (specify)			under sec	tion 507(b)(1)(B), check	here
_		6) <b>\$</b> 615,959 (Part I, column (d) must be	e on cash basis )		L		
<b>}</b> Li	Part I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) N	et investment	(c) Adjusted net	(d) Disbursements for charitable
7		amounts in columns (b), (c), and (d) may not necessarily	expenses per books	1 ' '	ncome	income	purposes
<u>.</u>	<del> </del>	equal the amounts in column (a) (see instructions) )					(cash basis only)
>	1	Contributions, gifts, grants, etc , received (attach schedule)	35,3	001		<del></del>	<del> </del>
APR	2	Check  if the foundation is <b>not</b> required to attach Sch B		25	35		<del></del>
Ø	3	Interest on savings and temporary cash investments  Dividends and interest from securities	9,3	35	9,352		
$\supset$	4 50	Gross rents	9,3	02	9,352		
븻	5a b	Net rental income or (loss)					<del></del>
ہ کے		Net gain or (loss) from sale of assets not on line 10	-22,8	88		<u> </u>	<del></del>
SCANNED Revenue	b	Gross sales price for all assets on line 6a 137,344	-22,0	<del></del>			<del> </del>
ゟ゙゙゙゙゙゙゙゙゙゙゙	7	Capital gain net income (from Part IV, line 2)				RECEIVE	in I
R	8	Net short-term capital gain					
_	9	Income modifications	<del></del>		6		iç.
	10a	Gross sales less returns and allowances	<del></del>		6	MAR 2 7 20	17 1/2
	b	Less Cost of goods sold					1;;
	) c	Gross profit or (loss) (attach schedule)				OGDEN I	1 <b>T</b>
	11	Other income (attach schedule)			dan	- 000L14, 6	21
	12	Total. Add lines 1 through 11	21,8	19	9,387	0	
S	13	Compensation of officers, directors, trustees, etc				<u> </u>	
xpenses	14	Other employee salaries and wages					
e	15	Pension plans, employee benefits				<u></u> _	l
		Legal fees (attach schedule)					<u> </u>
ē	b	Accounting fees (attach schedule) STMT 1	3,2		1,627		1,627
ij	,_c	Other professional fees (attach schedul@)TMT 1 .	2,7	43	2,743	L	<del> </del>
1	17	Interest		}		<del></del>	<del> </del>
3	18	Taxes (attach schedule) (see instructions)	<u> </u>				<del></del>
Operating and Administrative E	19 20	Depreciation (attach schedule) and depletion Occupancy	<del></del>	<del></del>			<del> </del>
A	21	Travel, conferences, and meetings	<u> </u>		<del></del>	<del></del>	<del></del>
Þ	22	Printing and publications	<del></del>	1		<del></del>	<del>                                     </del>
a	23	Other expenses (attach schedule) STMT 1		64	64		
2	24	Total operating and administrative expenses.					<del> </del>
ati		Add lines 13 through 23	6,0	61	4,434	0	1,627
jec	25	Contributions, gifts, grants paid	30,0				30,000
ŏ	26	Total expenses and disbursements. Add lines 24 and 25	36,0		4,434	0	1
_	27	Subtract line 26 from line 12			,	<u></u>	
	а	Excess of revenue over expenses and disbursements	-14,2				1
	b	Net investment income (if negative, enter -0-)		1	4,953		
	С	Adjusted net income (If negative, enter -0-)				0	
_							<del></del>

Form 990-PF (2016)

P	art II	Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End o	of year		
		<del></del>	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash—non-interest	9	469	7,470	7,470		
	2	-	rary cash investments					
	3	Accounts receivable		The state of the s	e , y a*			
	İ	Less allowance for	doubtful accounts >					
	4	Pledges receivable			, , , , , ,			
	}	Less allowance for	doubtful accounts >					
	5	Grants receivable						
	6	Receivables due fro	om officers, directors, trustees, and other			<u> </u>		
		disqualified persons	(attach schedule) (see instructions)					
	7	Other notes and loans r	eceivable (attach schedule)	A Carlo		,		
		Less allowance for dou						
ţ	8	Inventories for sale	or use					
Assets	9	Prepaid expenses a	ind deferred charges					
ĕ	10a	Investments-US and	state government obligations (attach schedule)					
	b		orate stock (attach schedule) STMT 1	490,697	469,454	608,489		
	С	Investments—corpo	orate bonds (attach schedule)		<del></del>			
	11		dings, and equipment basis	4				
	ļ		reciation (attach schedule)		*	-		
	12	Investments-mortg		T				
	13	Investments—other	•		· · · · · · · · · · · · · · · · · · ·			
	14	Land, buildings, and equ	•	AND THE PARTY OF T				
			reciation (attach schedule)		·			
	15	Other assets (descri		<del> </del>				
	16	,	completed by all filers—see the	<del></del>				
		instructions Also, se		491,166	476,924	615,959		
$\neg \neg$	17		nd accrued expenses	401,100	470,024	010,000		
	18	Grants payable	na aceraca experience					
Liabilities	19	Deferred revenue		<u> </u>	· · · · · · · · · · · · · · · · · · ·			
≝.	20		rectors, trustees, and other disqualified persons					
ap	21		r notes payable (attach schedule)	<u> </u>				
≔	22	Other liabilities (des	auta N	<del> </del>				
	23		d lines 17 through 22)	0	0	1		
	<del></del> -		ollow SFAS 117, check here	<del> </del>				
es	Ì		24 through 26 and lines 30 and 31.	]				
2	24	Unrestricted	- 1 ug., 1- unu mico oo unu o i.	]	)			
alances	25	Temporarily restricte	ad.	<del> </del>	<del></del>			
	26	Permanently restrict		} <del></del>				
Net Assets or Fund B	] = "	•	o not follow SFAS 117, check here	}	·			
교	Ì	and complete lines		]	ì			
5	27	-	principal, or current funds					
ş	28		rplus, or land, bldg , and equipment fund	<u> </u>				
Se	29		cumulated income, endowment, or other funds	491,166	476,924	,		
As	30	_	fund balances (see instructions)	491,166	476,924	,		
et	31		net assets/fund balances (see	431,1001	470,524			
Z	• •	instructions)	The assets falla balances (See	491,166	476,924	,		
Рa	rt III		anges in Net Assets or Fund Balances	491,100	470,9241			
			lances at beginning of year—Part II, column (a)	line 30 /must parce	with			
•			l on prior year's return)	, mie 50 (must agree		404 166		
2		amount from Part I, i			1	491,166		
		2	-14,242					
		r increases not include ines 1, 2, and 3	cu in inie 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	476.004		
		eases not included in	line 2 (itemize)		4	476,924		
			ime ∠ (itemize) ► lances at end of year (line 4 minus line 5)—Part	tll column (b) line 20	5	470.004		
<u> </u>	iotal	not assets or rund bar	iances at end of year fine 4 fillius line 5)—Pari	in, column (b), line 30	) 6	476,924		

Part	V Capital Gains and	d Losses for Tax on Investn	<u>nent l</u>	Income_		,			
	(a) List and describe the 2-story brick wareho	(b) How acquired P—Purchase D—Donation	, , ,	o , day, yr )	(d) Date sold (mo , day, yr )				
1a	PUBLICLY TRADED SECU	URITIES-ST			Р		1/1/2016	12/31/2016	
b	PUBLICLY TRADED SEC	URITIES-LT			Р		1/1/2015	12/31/2016	
c	<del></del>								
d									
e	<del></del>				L				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis		(h) Gain or (loss) (e) plus (f) minus (g)		
a	25,332				26,864				
<u>b</u>	112,012		L		133,348	-21,33			
c			L						
<u>d</u>			<u> </u>						
e	1		<u> </u>						
	Complete only for assets sh	nowing gain in column (h) and owned	by the	foundation	on 12/31/69		(I) Gains (Col. (	h) gain minus	
	(i) F M ∨ as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col (ı) (j), ıf any		col (k), but not le Losses (fro	ess than -0-) or	
а								-1,532	
b								-21,336	
C									
d									
e									
2 Capital gain net income or (net capital loss)  { If gain, also enter in Part I, line 7   If (loss), enter -0- in Part I, line 7 }								-22,868	
3	Net short-term capital gain	or (loss) as defined in sections 1	222(5	) and (6)					
	If gain, also enter in Part I,	line 8, column (c) (see instruction	ns) lf	(loss), ente	er -0- in 1				
	Part I, line 8		•	`	}	3		0	
Part	V Qualification Und	ler Section 4940(e) for Redu	uced	Tax on N	et Investment	Incor	me		
Was t		e this part blank section 4942 tax on the distributal qualify under section 4940(e) Do				e perio	d?	Yes X No	
1	Enter the appropriate amo	unt in each column for each year,	. see t	he instruct	ions before makir	na anv	entries		
	(a)	(b)			(c)			(d)	
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	s	Net value o	of noncharitable-use as	ssets		bution ratio vided by col (c))	
<u></u>	2015		2,493		58	7,149	(60) (8) (1)	0 055340	
	2014		6,276			9,442		0 047823	
	2013		3,091			0,209		0 048085	
	2012		9,000			3,353		0 048303	
	2011		0,000			3,443		0 053556	
2	Total of line 1, column (d)						2	0 253107	
3	• • •	or the 5-year base period—divide	the to	otal on line	2 by 5, or by the	- [			
	=	ation has been in existence if less			, .,,	}	3	0 050621	
4	Enter the net value of none	charitable-use assets for 2016 fro	m Par	t X, line 5		-	4	567,014	
5	Multiply line 4 by line 3					]	5	28,703	
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)				}	6	50	
7	7 Add lines 5 and 6						7 28,753		
8	Enter qualifying distribution						8 31,627		
	If line 8 is equal to or great Part VI instructions	ter than line 7, check the box in P	'art VI,	line 1b, ar	nd complete that	part us	sing a 1% tax i	rate See the	

Fait	Excise tax based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948—see ins	tructi	ons)					
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		1.	·,				
b	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	. =		50	1		
-	here ► X and enter 1% of Part I, line 27b	9.,	<del></del>		30	┼		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	,				1		
_	Part I, line 12, col (b)		- marin					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	1		0	ļ		
3	Add lines 1 and 2	3	T		50			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			50			
6	Credits/Payments							
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 1,166	<u> </u>	ł			ļ		
b	Exempt foreign organizations—tax withheld at source 6b	J- ,				(		
C	Tax paid with application for extension of time to file (Form 8868)  6c	<b>.</b> .	1 :	- `				
_d	Backup withholding erroneously withheld  6d	1	}					
7	Total credits and payments Add lines 6a through 6d	<b>_</b>	ļ		1,166	ļ		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	8	<del> </del>			<del> </del>		
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del> </del> -		00			
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2017 estimated tax    1 116   Refunded	10	ļ		1,116			
	Enter the amount of line 10 to be Credited to 2017 estimated tax    1,116   Refunded	<u> </u>	L		0	<u> </u>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did				Yes	No		
	participate or intervene in any political campaign?			1a	103	X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					<del>- ^-</del>		
	Instructions for the definition)?							
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities							
C	c Did the foundation file Form 1120-POL for this year?							
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$					}		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	sed				1		
_	on foundation managers > \$		ï			l		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X		
•	If "Yes," attach a detailed description of the activities				į			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					: ا		
4a	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3 4a		X		
та b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?			4a 4b	N/A	<del>  ^</del>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	19/7	X		
-	If "Yes," attach the statement required by General Instruction T					<del>  ^</del> -		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				,	'		
	By language in the governing instrument, or				l i	1		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the	nat						
	conflict with the state law remain in the governing instrument?			6	х			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7	Х			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					,		
	OK							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	eral		<u> </u>				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	Х			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(							
	or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)	? If		9		x		
10	"Yes," complete Part XIV							
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing t names and addresses	neir		40				
	namos and addresses			10		Х		

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	L	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	]	]	
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address			
14	The books are in care of ► ASSET MANAGEMENT ADVISORS LLC Telephone no ► (405) 84	2-188	1	
	Located at ► 6307 WATERFORD BLVD, STE 200 OKLAHOMA CITY OK ZIP+4 ► 73118			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		1	<b>▶</b> □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If	1		
	"Yes," enter the name of the foreign country	<u> </u>		L
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<del></del>
	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)		<b>!</b>	,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	i		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Ì		ļ
	disqualified person?	Ì		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	ĺ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	l		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	ļ		
	the benefit or use of a disqualified person)?		l i	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ļ		
	foundation agreed to make a grant to or to employ the official for a period after	ļ	<u> </u>	
	termination of government service, if terminating within 90 days )	İ		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in	1		
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here	Ì		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1		
_	were not corrected before the first day of the tax year beginning in 2016?	1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	İ		
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?			
	——————————————————————————————————————			
L	If "Yes," list the years 20 , 20 , 20 , 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	ļ		,
	all years listed, answer "No" and attach statement—see instructions )	2b	N/A	
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	14/	<del></del>
·	► 20 , 20 , 20 , 20	Í		
3a	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 2016 as a result of (1) any purchase by the foundation or	)	]	
~	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1		1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	}		
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	l	[ ;	
	foundation had excess business holdings in 2016.)	3ь	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2016?	4b		Χ_

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 N	May Be Re	quire	d (contin	ued)			
5a		ne year did the foundation pay or incur any on propaganda, or otherwise attempt to it			section	4945(e))?		Yes	X No	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	3	· ·
		ence the outcome of any specific public ele tly or indirectly, any voter registration drive		see section 49	955), or	to carry on	•	Yes	X No	7 - 44a 2 <sup>1</sup> ,	,	21K.
		de a grant to an individual for travel, study		er sımılar purj	oses?			Yes	X No		1	September 1
		de a grant to an organization other than a on 4945(d)(4)(A)? (see instructions)	charıta	ble, etc , orga	ınızatıo	n described	ın	☐ Yes	X No		4	-11
		de for any purpose other than religious, choses, or for the prevention of cruelty to chil			terary, o	or education	nal	Yes	X No			, ,
b		swer is "Yes" to 5a(1)–(5), did <b>any</b> of the trons section 53 4945 or in a current notice i			•				d in	5b	N/A	
С	If the ans	ations relying on a current notice regarding swer is "Yes" to question 5a(4), does the fo it maintained expenditure responsibility fo	undatio	undation claim exemption from the tax					► □ No	12 min	, .	, ;
6a	Did the fo	attach the statement required by Regulation oundation, during the year, receive any fur sonal benefit contract?		, ,				☐ Yes	X No		, 1	, ,
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benef If "Yes" to 6b, file Form 8870					efit con	itract?		6b	<i>*</i> ,	X •	
7a b	At any time during the tax year, was the foundation a party to a prohibited tax shelter if "Yes," did the foundation receive any proceeds or have any net income attr						e trans	Yes action?	X No	7b	N/A	;
Part		Information About Officers, Directo	ors, Tr	ustees, Fo	undati	ion Manag	gers, F	lighly P	aid Em	ploye	es,	
1		and Contractors  fficers, directors, trustees, foundation r	nanad	are and their	compo	neation (e	ao inet	ructions)				
<u> </u>	Listano		(b) Title	e, and average	(c) Co	mpensation	(d)	Contribution	s to	(e) Expe	nse ac	count
Soc A	Hashad St	(a) Name and address	hours per week (If not paid, devoted to position enter -0-)			oyee benefit erred compe		other allowances				
3ee A	ttached S	atement		00	<u> </u>	0	 			 		
				00	-	0						
				00		0		<del>-</del> -				
				00		0						
2	Compen	sation of five highest-paid employees (	other ti		cluded	on line 1—	see ins	structions	s). If no	ne, ent	er	
	(a) Name a	nd address of each employee paid more than \$50 000		(b) Title, and a hours per w devoted to po	eek	(c) Compen	sation	(d) Contribi employee plans and c compens	benefit deferred	(e) Expe	ense ac allowan	
NONE												
		<del></del>										
<del></del>										<del></del>		
									İ			
Total	number of	other employees paid over \$50,000				·			<b>&gt;</b>			
									F	orm <b>99</b> 6	U-PF	(2016)

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	and Contractors (continued) nest-paid independent contractors for professional services (see instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		<u> </u>
		<del> </del>
Total number of	others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	o's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
		<del> </del>
2		
3		
, <del></del>		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	<del></del>
	argest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
	<del></del>	<u> </u>
2		
All other program-	related investments. See instructions	
3		}
Total. Add lines	1 through 3	
Total. Add intes		Form <b>990-PF</b> (2016

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 3 Average monthly fair market value of securities 1a 499,246 **b** Average of monthly cash balances 1b 76.403 Fair market value of all other assets (see instructions) 1c d Total (add lines 1a, b, and c) 1d 575.649 Reduction claimed for blockage or other factors reported on lines 1a and  $\mathcal{L}_{i,j}$ 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 3 575,649 Cash deemed held for charitable activities Enter 11/2 % of line 3 (for greater amount, see instructions) 8,635 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 567,014 Minimum investment return. Enter 5% of line 5 6 28,351 Distributable Amount (see Instructions) (Section 4942(1)(3) and (1)(5) private operating Part XI foundations and certain foreign organizations check here ▶ ☐ and do not complete this part ) Minimum investment return from Part X, line 6 1 28,351 2a Tax on investment income for 2016 from Part VI. line 5 2a 50 Income tax for 2016 (This does not include the tax from Part VI) 2b Add lines 2a and 2b 2c 50 3 Distributable amount before adjustments Subtract line 2c from line 1 3 28,301 Recoveries of amounts treated as qualifying distributions 4 4 5 5 Add lines 3 and 4 28,301 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 28,301 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 72 199 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 1a 31,627 Program-related investments-total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 D. 214 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 31.627 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 50 Adjusted qualifying distributions. Subtract line 5 from line 4 31.577 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Part	XIII Undistributed Income (see instruction	s)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI	Corpus	Years prior to 2015	2014	2015
	line 7	F La Esperator		7,-	28 30
2	Undistributed income if any as of the end of 2016		$\frac{\alpha}{3}$		
a	Enter amount for 2015 only	, 5 - 3 : N - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	1 1 1 1 1 1 n	0	**************************************
b	Total for prior years 20, 20, 20	15 E 37 E		· · · · · · · · · · · · · · · · · · ·	3,37
3	Excess distributions carryover, if any, to 2016	Hara G		the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	平 4 流流
a	From 2011 535	5 8 %			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	From 2012		3		The state of
C	From 2013	1	recipie 2:1	1 1 7 To 10 To 10 1	一个水子的"流气"。
a	From 2014 4 From 2015 3 254	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	ELA.	<b>"新海"的"海"。"</b> "
e •		2.702		2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1. T. T. T. T. T. T. T. T. T. T. T. T. T.
4	Total of lines 3a through e	3 /93		\$-00° 7.75° 7	The manual of
4	Qualifying distributions for 2016 from Part XII,  line 4  \$ 31 627		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 3 5 5 5	<b>成的一點</b> 。
-	Ine 4 ▶ \$ 31 627 Applied to 2015 but not more than line 2a		Park to Control	- Indiana	
a b	Applied to undistributed income of prior years	1/2 22 5 75 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	t v Zto	" 1 (5° 10° 10° 10° 10° 10° 10° 10° 10° 10° 10	で、100mm 10mm 10mm 10mm 10mm 10mm 10mm 10m
b	(Election required—see instructions)	The second second		A STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STA	
С	Treated as distributions out of corpus (Election	1	TE TO TO THE	7.77	7 7 3
•	required—see instructions)		7, " hay a	7 3 3 3 4 3 A	
đ	Applied to 2016 distributable amount	4. 13 200 23		19e - 47 42f / 4	28 301
e	Remaining amount distributed out of corpus	3 326	- 45 4 7 - 46 4 .	7.373 T.A.	20 30 I
5	Excess distributions carryover applied to 2016	3 320	- 12 3 46 15 3 - 1 15 1	4 4 4	** ** ***
-	(If an amount appears in column (d) the same	F + 78 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -		7 1 44 a	177/ 2 5 195 part 70
	amount must be shown in column (a) )	T		ha all a said	4 1
6	Enter the net total of each column as	" - F	١ ا	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
	indicated below	27 (c)		, , , , , ,	
а	Corpus Add lines 3f 4c and 4e Subtract line 5	7 119		ا مينو م	
b	Prior years' undistributed income. Subtract	1 - SE		。" "城"人	
	line 4b from line 2b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	01	4.	7.5%
С	Enter the amount of prior years' undistributed	الرواد العرام المرام الماسي			3434157.1
	income for which a notice of deficiency has	ا د در کید		3	
	been issued or on which the section 4942(a)	Et - Bu - Mila		ه سام الم	
	tax has been previously assessed	等。		الريط الأرياس الأريض إ	The state of the state of
d	Subtract line 6c from line 6b Taxable		Ţ	4 19 19 19 19	<b>小龙马龙龙</b>
	amount—see instructions	a time		F	The state of
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount—see	P			The state of
f	Instructions	<b>がままれる。</b>	history curx	0	ित्र किर्मार
'	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			
	distributed in 2017		5.77	***** (** a.	_
7	Amounts treated as distributions out of corpus		1 1 2		<u> </u>
•	to satisfy requirements imposed by section		1		الله المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع ا المراجع المراجع
	170(b)(1)(F) or 4942(g)(3) (Election may be				A. 2. 1.
	required—see instructions)				
8	Excess distributions carryover from 2011 not		312 - 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	5	- 6 12 m 3 14 To 2 m 2 m
	applied on line 5 or line 7 (see instructions)	535			
9	Excess distributions carryover to 2017		7	<u> </u>	**
	Subtract lines 7 and 8 from line 6a	6 584		- 7	و ساا دا د ساا دا
10	Analysis of line 9		7		25 7 h. 1
а	Excess from 2012		- 15 mg 1	- 45 45 7 1	
b	Excess from 2013		The fact of the		The state of the state of
	Excess from 2014 4		37	1 30 m. 1 2 m. 1	THE THE THE THE
	Excess from 2015 3 254			The same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the sa	" " " " " " " " " " " " " " " " " " "
е	Excess from 2016 3,326	N. 3 4. V. 13	E Comment	إلى المراقب المراقب المراقب المراقب	

Part	XIV Private Operating Foundat	<b>ions</b> (see instru	ictions and Part \	VII-A, question 9)		N/A
	If the foundation has received a ruling of	r determination le	tter that it is a priva			
	foundation, and the ruling is effective fo		•	-		
þ	Check box to indicate whether the foundation		iting foundation desc	ribed in section	4942(J)(	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(c) iotai
	each year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					l o
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly		1		·	
	for active conduct of exempt activities Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the					
Ŭ	alternative test relied upon					
а	"Assets" alternative test—enter	}				
а				1		
	(1) Value of all assets	ļ <del></del>	<del> </del>	<del> </del>	<del></del>	0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test—enter					
_	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					l o
	(2) Support from general public					
	and 5 or more exempt		1			
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from			ł		
	an exempt organization		<del></del>			0
	(4) Gross investment income	<u>L</u>		<u> </u>	<del></del>	0
Part		•	•	e foundation had	d \$5,000 or mo	re in assets at
	any time during the year—	see instructior	ns.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation wh					foundation
	before the close of any tax year (but on	y if they have con	tributed more than	\$5,000) (See section	on 507(d)(2) )	
MAR	GOLYN W ANDREWS TARYN W	BURT	MATTHEW	T WOODS	ADAM H WO	ODS
	List any managers of the foundation wh					
	ownership of a partnership or other enti					
NONE		0 0.0.	0.1.1.1.1.1.1		<del></del>	<del></del>
2	Information Regarding Contribution,		•	•		
	Check here ▶ ☐ if the foundation or	ly makes contribu	tions to preselecte	d charitable organiza	ations and does no	ot accept
	unsolicited requests for funds. If the fou under other conditions, complete items		ts, grants, etc (see	e instructions) to indi	viduals or organiz	ations
a	The name, address, and telephone num	ber or e-mail add	ress of the person	to whom application	s should be addre	ssed
MARC	GOLYN W ANDREWS 6307 WATERFOR	D RIVD STE 200		V OK 73118 (405) 8	42 <sub>-</sub> 1881	
	The form in which applications should b					
WRIT	TEN REQUEST					
С	Any submission deadlines					_
NONE						
	Any restrictions or limitations on awards factors	s, such as by geog	raphical areas, cha	arıtable fields, kınds	of institutions, or o	other
ORGA	ANIZATIONS WHICH ADHERE TO THE	FOUNDATION'S I	MISSION TO FURT	THER GOD'S WORK	<	

THE WOODS FAMILY FOUNDATION 27-1767386 Form 990-PF (2016) Page **11** Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or contribution status of Amount Name and address (home or business) recipient Paid during the year OPPORTUNITY INTERNATIONAL PC SOCIAL WELFARE 15,000 550 W VAN BUREN STREET, STE 200 CHICAGO, IL 60607 **OPEN HEARTS FOUNDATION** PC SOCIAL WELFARE 15,000 3380 MOTOR AVE LOS ANGELES, CA 90034

Total		<b>•</b>	3a	30,00
Approved for future payment				
			- 1	
			l	
	1			
	}			
			- [	
			Ì	
Total	 		3b _	

Pa	rt XVI-A Analysis of Income-Producing A	ctivities				<u>_</u>
	er gross amounts unless otherwise indicated		siness income	Excluded by sect	on 512, 513, or 514	
	•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue					(See Instructions )
	a					
	b	<u> </u>				
	c		•			
	d					•
	e	-				
	f	-	<del></del>			
2	g Fees and contracts from government agencies					<del></del>
2 3	Membership dues and assessments Interest on savings and temporary cash investments			14	25	
4	Dividends and interest from securities			14 14	9,352	
5	Net rental income or (loss) from real estate	x 32	1, 1, 3, 1	14	9,352	
·	a Debt-financed property			<u> </u>		
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income	-			····	
8	Gain or (loss) from sales of assets other than inventory			18	-22,868	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory				***	
11	Other revenue a					
	b					
	С					
	d					
	e					
	Subtotal Add columns (b), (d), and (e)		0		-13,481	
	Total. Add line 12, columns (b), (d), and (e)				13	-13,48
(Se	worksheet in line 13 instructions to verify calculation					
	rt XVI-B Relationship of Activities to the					
	e No. Explain below how each activity for which incor accomplishment of the foundation's exempt pure	ne is reported in co	olumn (e) of Part X	VI-A contributed	importantly to the	ne )
	description of the realization of exempt par	poses (ether than	by providing fands	nor such purpos	C3) (OCC III3II UCIII	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		<del></del>	<del>-</del>	-		
-			<del></del>			•
						<del></del>
			70-			
		3			<del></del>	•
				· · · · · · · · · · · · · · · · · · ·		
						·
77074						

		Exempt Org	nanizations							
1	Did			gage in any of the following	with any of	her organiza	tion described	95 m	Yes	No
		-		ction 501(c)(3) organizatio	,	•		1:6		110
		ical organizations		onon oo roganizano	113) 01 111 300	,uon 527, 1016	ing to	1 4		
а	•	•		noncharitable exempt org	anization of			1		
a			orting loundation to a	nonchantable exempt org	ariizalion oi			10/4	~ -	
		Cash						1a(1)		X
		Other assets						1a(2)		Х
þ		er transactions						1:		
			a noncharitable exemp	_				1b(1)		X
				e exempt organization				1b(2)		Х
			equipment, or other a	ssets				1b(3)		Х
		Reimbursement ar	_					1b(4)		Х
		_oans or loan gua						1b(5)		X
			·	or fundraising solicitations				1b(6)		X
C				, other assets, or paid em				1c	L	X
d				plete the following schedule.						
				en by the reporting foundate						
	value	e in any transaction	or sharing arrangement	t, show in column (d) the va	lue of the goo	ods, other asso	ets, or services receiv	/ed		
(a) Line	no	(b) Amount involved	(c) Name of noncha	aritable exempt organization	(d) Des	scription of transf	ers, transactions, and sh	arıng arrai	ngemen	its
						<u> </u>				
					}					
							. =			
						<del></del>				
2a	Is th	e foundation direc	tly or indirectly affiliate	ed with, or related to, one	or more tax-	exempt organ	nizations			
				er than section 501(c)(3))				Yes	X N	0
b	If "Ye	es," complete the	following schedule							
		(a) Name of organ	ization	(b) Type of organization	on		(c) Description of relation	nship		
	1		<b>A</b>	rn, including accompanying schedules a			nowledge and belief, it is true,			
ign Iere	сопе	ct and complete Declaration	on of prepare rother, than taxpayer	r) is based on all information of which pr	eparer has any kno	owledge	with the p	RS discuss	wn beloy	<u>~_</u>
	Sig	nature of officer or trus	stee	Date Title	<del></del>		(see instru	ictions)?	Yes	No
		Print/Type preparer's	s name	Preparer's signature/	A-0.0	Date ,	Check I if	PTIN		
Paid		GAIL E MELTZN	NER CPA	Preparer's signature / Sail E. Mettyne	u, CPU	3/15/17	Check if self-employed	P0044	7551	
repa		Firm's name	THOM-DOBSON-WO					94268		
Jse C	nly	Firm's address		/E, STE B, OKLAHOMA C	ITY OK 731	116		842-02	12	
		1 . mm a dadiess *	· · •	1.1000 (100)	J UL					

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

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

OMB No 1545-0047

2016

**Employer identification number** 

THE WOODS FAMILY FOUND	ATION	27-1767386
Organization type (check one	)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private found	dation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
· · · · · · · · · · · · · · · · · · ·	overed by the <b>General Rule</b> or a <b>Special Rule</b> .  (8), or (10) organization can check boxes for both the General Rule and a	ı Special Rule See
General Rule		
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instructional inbutions.	
Special Rules		
regulations under secti 13, 16a, or 16b, and th	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or lat received from any one contributor, during the year, total contributions of a amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Core	990-EZ), Part II, line the greater of <b>(1)</b>
contributor, during the	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received, total contributions of more than \$1,000 exclusively for religious, charped purposes, or for the prevention of cruelty to children or animals. Complete	table, scientific,
contributor, during the contributions totaled m during the year for an o	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions exclusively for religious, charitable, etc., purposes, but is ore than \$1,000. If this box is checked, enter here the total contributions the exclusively religious, charitable, etc., purpose. Don't complete any of the particle this organization because it received nonexclusively religious, charitable enduring the year.	no such nat were received arts unless the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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 Form 990-EZ or on its

Name of organization
THE WOODS FAMILY FOUNDATION

Employer identification number 27-1767386

Part I	Contributors (See instructions) Use duplicate copi	es of Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARGOLYN WOODS ANDREWS PO BOX 40 ELLSWORTH MI 49729 Foreign State or Province Foreign Country	\$ 35,300	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupation (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

### THE WOODS FAMILY FOUNDATION EIN 27-1767386 FORM 990-PF - STATEMENT 1 December 31, 2016

FORM 990-PF, Part I, Line 16(b) - Accounting Fees	-
Thom-Dobson-Womack, Inc Asset Management Advisors	\$  1,200 2,054
	\$ 3,254
FORM 990-PF, Part I, Line 16(c) - Other Professional Fees	
Asset Management Advisors - Management Fees	\$ 2,743
FORM 990-PF, Part I, Line 23 - Other Expenses	
Miscellaneous	\$ 64
FORM 990-PF, Part II, Line 10b - Investments	
Publicly Traded Stocks and Bonds , valued at cost (FMV \$608.489)	\$ 469.454

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									0	0	ō	
	Check "X"							Avg Hrs	Avg Hrs		Expense	•
Name	if Business	Street	Crty	State	State Zip Code	Foreign Country	Trtle	Per Week	Compensation	Benefits	Account	Explanation
MARGOLYN WOODS ANDREWS		PO BOX 40	ELLSWORTH	MN 49729	87.29			1 00	0	0	0	•
TARYN WOODS BURT		1818 DART ST	HOUSTON	XT	73007		VP/DIR	00 0	0	0	0	
MATTHEW TWOODS		800 WEST 5TH ST, NO 501	AUSTIN	X	78703		VP/DIR	000	0	0	0	
ADAM H WOODS		1051 16TH AVE N	ST PETERSBURG	٦ %	33704		VP/DIR	000	0	0	0	
4												
SCOTT DAVIS		6307 WATERFORD BLVD STE 200 OKLAHOMA CITY		×	73118		SEC/TREAS	9	0	0	0	