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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.

Open to Public Inspection

For cale	endar year 2016 or tax year beginning		and ending						
Name of fo				A Employer identification num 73-1291004	ber				
Number ar	nd street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number (see instructions)					
9106 City or tow	N. KELLEY AVE.		(405) 848-061	0					
•	HOMA CITY	OK	73131	C If exemption application is pending, check here. ▶					
	eck all that apply Initial return	Initial return of a forme		D 1 Foreign organizations, check here					
	Final return	Amended return			لـــا				
	X Address change	Name change		2 Foreign organizations meeti here and attach computation					
H Che	- 7 *`	(c)(3) exempt private fou							
	Section 4947(a)(1) nonexempt charitable trus		rivate foundation	If private foundation status v under section 507(b)(1)(A), (
	- B - 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ounting method XC Other (specify)	ash Accrual						
► \$		column (d) must be on c	ash basis)	F If the foundation is in a 60-m under section 507(b)(1)(B),					
Part I					(d) Disbursements				
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investmen income	it (c) Adjusted net income	for charitable purposes (cash basis only)				
	(see instructions)) 1 Contributions, gifts, grants, etc received (attach schedule)	49,403.		. (. A&				
	2 Check In the foundation is not required to attach Sch B	49,403.							
			<u> </u>						
	Interest on savings and temporary cash investments Dividends and interest from securities	1,022.	1,02	32.					
	5 a Gross rents								
	b Net rental income or (loss)								
₽ R	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all	. 489744		1					
Š	assets on line 6a · · ·								
nc2a8h2	8 Net short-term capital gain			3 3 3 4 4 4 7 7 8 8 8 7					
	9 Income modifications		6.9 (k.a. <u></u>						
٩	10 a Gross sales less returns and			RECE	YEW OF				
SEP	b Less Cost of				12				
	goods sold C Gross profit or (loss) (attach schedule)	.,24)8:8857-,		S SEP 0	2017 131				
CANNED	11 Other income (attach schedule)			ें जि					
Z			1 00		a.ut I				
<u> </u>	12 Total Add lines 1 through 11	50,425.	1,02	22. 0604	14830 1.35-31 W.				
S	14 Other employee salaries and wages								
	15 Pension plans, employee benefits								
A	16a Legal fees (attach schedule)								
N N	b Accounting fees (attach sch)L-16b Stmt.	375.							
o h	C Other professional fees (attach sch)								
O I S T R A	18 Taxes (attach schedule)(see instrs) INCOME . TAXES.	29.		- - - 					
	19 Depreciation (attach								
I T	schedule) and depletion				<u> </u>				
N V G E	21 Travel conferences, and meetings								
A E N X	22 Printing and publications								
N X D P E	23 Other expenses (attach schedule) OFFICE SUPPLIES	146.	Į						
A N D E N S E S	24 Total operating and administrative	140.							
E S	expenses. Add lines 13 through 23	550.	14 6 5 1 1 8 0 W						
	25 Contributions, gifts, grants paid	5,000.			5,000.				
	26 Total expenses and disbursements Add lines 24 and 25	5,550.			5,000.				
	27 Subtract line 26 from line 12.								
	a Excess of revenue over expenses and disbursements	44,875.							
	b Net investment income (if negative, enter -0-)		1,02						
	C Adjusted net income (if negative, enter -0-)								

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) End of year Beginning of year Part | Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash — non-interest-bearing 2 `Savings and temporary cash investments 255,610 300,485 300,485 Accounts receivable £WW Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach sch) . > ASSETS Less allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges . . 10 a Investments - U S and state government obligations (attach schedule)..... **b** Investments - corporate stock (attach schedule) . . . c Investments — corporate bonds (attach schedule) . . . Investments - land, buildings, and Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other (attach schedule) . . Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) Other assets (describe Total assets (to be completed by all filers see the instructions Also, see page 1, item I). 255,610 300,485 300,485 17 Accounts payable and accrued expenses. . . 18 19 20 Loans from officers, directors, trustees, & other disqualified persons 22 Other liabilities (describe E s Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. NF 300,485 255,610. Ù Ν D Foundations that do not follow SFAS 117, check here . > В and complete lines 27 through 31. Ą A 28 Paid-in or capital surplus, or land, bldg , and equipment fund OE Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 255,610 300,485 Total liabilities and net assets/fund balances 255,610 300,485 Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 255,610. end-of-year figure reported on prior year's return) 1 2 Enter amount from Part I, line 27a 44,875. 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 300,485 5 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 300,485.

Form 990-PF (2016) CAROL ELIZABETH YOUNG FOUNDATION

73-1291004

Page 2

<u> </u>	(a) List and describe 2-story brick wareho	the kind(s) of property sold (e g , real obuse, or common stock, 200 shares ML	estate,	(b) How acque P — Purcha D — Donat	ise (mo, day, yr)	(d) Date sold (mo , day, yr)			
k									
	;								
	1								
e									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)				
a	1								
t)								
	;								
	<u> </u>								
	•								
	Complete only for assets showing	ng gain in column (h) and owned by the	e foundation on 12/31/69		(I) Gains (Co	(h)			
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col (k), b than -0-) or Losses (fr	ut not less			
	3								
t)					 			
	3								
	1								
	•					-			
2	Capital gain net income or (net	capital loss) If gain, also e	enter in Part I, line 7 er -0- in Part I, line 7		2				
3	Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and	 -	-	_				
		8, column (c) (see instructions) If (loss			3				
Pai	rt V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me	-			
		foundations subject to the section 494							
(, ,,	optional dee by comeding product			,					
If sec	ction 4940(d)(2) applies, leave thi	s part blank							
Was	the foundation liable for the secti	ion 4942 tax on the distributable amou	nt of any year in the base of	eriod?	☐Yes	X No			
		y under section 4940(e) Do not compl	• •			Δ,10			
		each column for each year, see the in		v entries					
<u> </u>	(a)	(b)	(c)	ly chines	(d)				
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assi	ets	Distribution (col (b) divided				
	2015	10,496.							
	2014	1 10,420.1		0.		0.000000			
	2013	 		0.		0.000000			
		49,998.				0.000000			
	2012	49,998.		0.		0.000000			
	2012 2011	49,998. 0. 0.		0. 0. 0.		0.000000 0.000000 0.000000			
	2011	49,998.		0. 0. 0.	2	0.000000 0.000000 0.000000 0.000000			
2	2011 Total of line 1, column (d) Average distribution ratio for the	49,998. 0. 0.	on line 2 by 5, or by the	0.	2 3	0.000000 0.000000 0.000000 0.000000			
	2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	49, 998. 0. 0. 0. 5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears	0.		0.000000 0.000000 0.000000 0.000000			
	2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit	49, 998. 0. 0. 0. 5-year base period — divide the total has been in existence if less than 5 years base assets for 2016 from Part X, in the control of t	on line 2 by 5, or by the ears	0.		0.000000 0.000000 0.000000 0.000000			
3	2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit	49, 998. 0. 0. 0. 5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears	0.	3	0.000000 0.000000 0.000000 0.000000 0.000000			
3	2011 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit Multiply line 4 by line 3	49, 998. 0. 0. 0. 5-year base period — divide the total has been in existence if less than 5 years base assets for 2016 from Part X, in the control of t	on line 2 by 5, or by the ears	0. 0. 0.	3	0.000000 0.000000 0.000000 0.000000 0.000000			
3 4 5	Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharit Multiply line 4 by line 3 Enter 1% of net investment income	49, 998. 0. 0. 0. 5-year base period — divide the total has been in existence if less than 5 year base assets for 2016 from Part X, in the control of th	on line 2 by 5, or by the ears	0.	3 4 5	0.000000 0.000000 0.000000 0.000000 0.000000			
3 4 5 6	Total of line 1, column (d) Average distribution ratio for the number of years the foundation. Enter the net value of noncharit. Multiply line 4 by line 3 Enter 1% of net investment inco. Add lines 5 and 6	49, 998. 0. 0. 0. 5-year base period — divide the total has been in existence if less than 5 years base assets for 2016 from Part X, in the second of th	on line 2 by 5, or by the ears	0.	3 4 5 6	0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.			

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	inetr	uction	18)		30 .
	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1				 	
٠. ٣	Date of ruling or determination letter. (attach copy of letter if necessary — see instructions)	ننسد	ندهند		الملك الملك	k liki
h	Domèstic foundations that meet the section 4940(e) requirements in Part V,	4	ľ			1.0
	check here · X and enter 1% of Part I, line 27b	7.86	147.75	3.100.75	-1 ::33	10.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	ÉLL				
		}	İ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)					0.
3	Add lines 1 and 2		ļ			10.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5				10.
6	Credits/Payments:					
	2016 estimated tax pmts and 2015 overpayment credited to 2016		15 m		A L	
	Exempt foreign organizations — tax withheld at source 6 b		0.43			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.					
d	Backup withholding erroneously withheld				X.	
7	Total credits and payments Add lines 6a through 6d		<u>L</u>			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				10.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
11	Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded	11				
Par	t VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		_ X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	ı				
	Did the foundation file Form 1120-POL for this year?			1 c		X
	(1) On the foundation ▶ \$; 🐐	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$					
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					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a	_	X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	$\neg \uparrow$	X
	If 'Yes,' attach the statement required by General Instruction T			8° 8's		N.W
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			6		X
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	${x}$	
	Enter the states to which the foundation reports or with which it is registered (see instructions)		• • •			1 -1
	OKLAHOMA		-			
g.			_			
D	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	X	383a3
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part's)(5) (IV .		9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			10		v
BAA		• • •		rm 990-	PF (2	X 016)
					•	,

	1990-PF (2016) CAROL ELIZABETH YOUNG FOUNDATION 73-129100) 4	<u>P</u>	age s
Par	tivili-A Statements Regarding Activities (continued)	- 		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	Yes	No 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		Х
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address $ N/A $		X	
14	Website address	848	-061	0
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		· •	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	2.0		
Pai	rt.VII-B Statements Regarding Activities for Which Form 4720 May Be Required	- 887 Y	<u> </u>	Qu.
<u></u>	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
i	b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here			
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	13 1 1 1 1		Χ
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 $4942(j)(5)$)			
ā	a 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?			
	If 'Yes,' list the years ► 20 , 20 , 20			
ł	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b	1	v
(c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		- 1/2	
	► 20 , 20 , 20 , 20			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
1	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 Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	3 b		X
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		X
١	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?	4 b		Z
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Form 990-PF (2016) CAROL ELIZABETH YO	DUNG FOUNDATION		73-129	91004 Page (
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)								
5 a During the year did the foundation pay or incur a	•			MARKET ST							
(1) Carry on propaganda, or otherwise attempt t		,	· · · · Yes X	No							
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	election (see section 495 n drive?	55), or to carry · · · · · · · · · · · · · ·	Yes X	No							
(3) Provide a grant to an individual for travel, study, or other similar purposes?											
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)											
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes											
b If any answer is 'Yes' to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?											
Organizations relying on a current notice regardi	ng disaster assistance ch	neck here	· · · · · · · · · · · •								
c if the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ility for the grant?		Yes	No							
If 'Yes,' attach the statement required by Regula		•									
 6 a Did the foundation, during the year, receive any on a personal benefit contract? b Did the foundation, during the year, pay premium 			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No							
If 'Yes' to 6b, file Form 8870	is, directly of indirectly, c	on a personal benefit con	tract /	6b X							
7 a At any time during the tax year, was the foundation	on a party to a prohibited	d tax shelter transaction?	Yes X	No							
b If 'Yes,' did the foundation receive any proceeds	or have any net income	attributable to the transa	ction?	7 b							
Part VIII Information About Officers, D and Contractors				Employees,							
1 List all officers, directors, trustees, foundation				r							
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances							
LEE W. YOUNG, 9106 N. KELLEY AVE. OKLAHOMA	PRES & TRUSTEE	0	0	0							
OKLAHOMA CITY OK 73131 MARIE ELIZE YOUNG, 9106 N. KELLEY AVE.	0.00	0.	0.	0.							
OKLAHOMA CITY, OK 73114	TREAS & TRUSTEE	0.	0.	0.							
JEAN M. WARREN, 6610 HILLCREST OKLHOMA	VP & TRUSTEE		0.	0.							
CITY OK 73116	0.00	0.	0.	0.							
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, e	nter 'NONE.'							
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances							
NONE											
				· · · · · · · · · · · · · · · · · · ·							
			-								
Total number of other employees paid over \$50,000.				None							

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Pa	rt VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	l Employees,
	and Contractors (continued)	
3		(a) Component
NION		(c) Compensation
ЙОІ		
Tota	at number of others receiving over \$50,000 for professional services	. None
Da	THX A Summary of Direct Charitable Activities	
Га	CHARACTER SUMMARY OF DIRECT CHARMEDIE ACTIVITIES	
List I	he foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	Expenses
	nizations and other beneficiaries served, conferences convened, reséarch papers produced, etc	
1	DONATION_TO NEXUS_EQUINE_TO FUND 'THE RIGHT HORSE INITIATIVE' WHICH PROMOTES HORSE ADOPTIONS	
	WITCH PRODUCED HOROLANDOLLIONS	 5,000.
2		
		[
3		
4		
Pa	rt IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
		_]
2		
Δ11	other program-related investments. See instructions	
3	other program-related investments. Oce instructions	
_		1

Form 990-PF (2016)

BAA

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	5,000.
- 1	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required)	3 a	
	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	10.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,990.

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

Form 990-PF (2016)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 line 7					0.
2 Undistributed income, if any, as of the a Enter amount for 2015 only				0.	
b Total for prior years 20 05, 20	, 20		20,000.		
3 Excess distributions carryover, if any,	to 2016				
a From 2011	0.				
b From 2012	0.				
c From 2013	0.				
d From 2014	50,000.				
e From 2015	10,500.				
f Total of lines 3a through e		60,500.			
4 Qualifying distributions for 201	6 from Part				
XII, line 4 F \$	5,000.				
a Applied to 2015, but not more	than line 2a · · ·			A CONTRACT OF A	
b Applied to undistributed incom- (Election required — see instru					
c Treated as distributions out of (Election required — see instru	ctions)				
d Applied to 2016 distributable a	mount		ersioner, son		
e Remaining amount distributed		5,000.			
5 Excess distributions carryover applied			(3 × 4 × 3 × 4 × 4 × 4 × 4 × 4 × 4 × 4 ×		
(If an amount appears in colun same amount must be shown	nn (d), the				
same amount must be snown	ii coidiiii (a))				
6 Enter the net total of each co	dumn se				
indicated below:	idiiii as				
a Corpus Add lines 3f, 4c, and 4e Sub	tract line 5	_65,500.			
b Prior years' undistributed incor line 4b from line 2b			20,000.		
c Enter the amount of prior years income for which a notice of de	eficiency has				
been issued, or on which the s tax has been previously assess	ection 4942(a) sed				
d Subtract line 6c from line 6b T amount — see instructions	axable		20,000.		
e Undistributed income for 2015 Subtr line 2a Taxable amount — see instru				0.	
f Undistributed income for 2016	Subtract lines				
4d and 5 from line 1. This amo	unt must be				0.
7 Amounts treated as distribution corpus to satisfy requirements					
section 170(b)(1)(F) or 4942(g) may be required — see instruc	(3) (Election				
8 Excess distributions carryover applied on line 5 or line 7 (see	from 2011 not instructions)	0.			
9 Excess distributions carryov Subtract lines 7 and 8 from line	rer to 2017. e 6a	65,500.			
10 Analysis of line 9					
a Excess from 2012	0.				
b Excess from 2013	0.				
c Excess from 2014	50,000.				
d Excess from 2015	10,500.				
e Excess from 2016	5,000.				

ant XIV Private Operating Foundation	ons (see instru	ctions and Part	VII-A guestion 9	73-1291004	Page
1 a If the foundation has received a ruling or deter					N/A
is effective for 2016, enter the date of the rulin	ıg			· · · · · · · · • [
b Check box to indicate whether the foundation		ng foundation descri		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
b 85% of line 2a			 	 	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter				1	
(1) Value of all assets	····				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter				1	
(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		-	<u> </u>		
art XV Supplementary Information (Complete this	nart only if the	e foundation had	1 \$5 000 or more	
assets at any time during the	year – see in	structions.)	o roundation nat	. 40,000 01 111010	·••
I Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have con	contributed more	than 2% of the tota n \$5,000) (See sect	il contributions receive tion 507(d)(2))	ed by the foundation be	fore the
LEE W. YOUNG-PRESIDENT; MAR	IE E. YOUNG	-TREASURER			
b List any managers of the foundation who own a partnership or other entity) of which the four NONE	10% or more of th ndation has a 10%	e stock of a corpora or greater interest	ation (or an equally lar	ge portion of the owne	rship of
2 Information Regarding Contribution, Grant Check here ☐ if the foundation only make	es contributions to	preselected charita	able organizations and		
requests for funds. If the foundation makes gill complete items 2a, b, c, and d	πs, grants, etc (se	e instructions) to inc	dividuals or organizati	ons under other condit	ions,
a The name, address, and telephone number of	r e-mail address of	the person to whom	n applications should	be addressed	
See Information Regarding Contribution, Grain	nt, Gift, Loan, Scho	olarship, etc, Progra	ıms		
b The form in which applications should be sub-	mitted and informa	tion and materials th	hey should include		
	<u>.</u>			· · · · · · · · · · · · · · · ·	
c Any submission deadlines					
c Any submission deadlines d Any restrictions or limitations on awards, such	as by geographic	al areas, charitable	fields, kinds of institut	ions or other factors	

. Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or bus	iness)	or substantial contributor	recipient		
a Paid during the year NEXUS EQUINE, INC. P.O. BOX 54572 OKLAHOMA CITY	OK 73154			THE RIGHT HORSE INITIATIVE EIN:81-1990122	5,000.
			:		
b Approved for future payment				▶ 3a	5,000.
B Approved for fatalo payment					
Total				► 3b	

	amounts unless otherwise indicated		ed business income	Excluded	by section 512, 513, or 514	(e)
	ram service revenue	Business code	(b) Amount	Exclu-	Amount	Related or-exempt function income (See instructions)
a a	an service revenue			code		<u> </u>
ъ		<u> </u>		+		
c		 				
d		 		1		
e				_		
f						
g Fees	and contracts from government agencies					
2 Memi	bership dues and assessments					
	st on savings and temporary cash investments	<u> </u>		14	1,022.	
	ends and interest from securities	744.23 . 9826.		`@\$\$\$!~ Y\$	******	
	ental income or (loss) from real estate					
	financed property					
	ebt-financed property	<u> </u>				
	ntal income or (loss) from personal property		<u> </u>			
	r investment income	ļ				
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory			- 		
	r revenue			3 - 37		
a	10401100	3 3 3 3 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4	** \$\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	* X#85		93x(c) 1 30 \$20 300 C 420
b		 		1	<u> </u>	
с		† <u> </u>				
d						
e						
12 Subto	otal Add columns (b), (d), and (e)	(NA 11 14		14 1	1,022.	
	I. Add line 12, columns (b), (d), and (e)				13	1,022.
	heet in line 13 instructions to verify calculations					
	I-B Relationship of Activities to the					
Line No.	Explain below how each activity for which included accomplishment of the foundation's exempt p	come is repor	ted in column (e) of Pa	irt XVI-A co	intributed importantly to	the
·	accomplishment of the foundation's exempt p	ourposes (our	than by providing to		Purposes/ (occ man	
						· · · · · · · · · · · · · · · · · · ·
	 					
	 					· - · · · · · · · · · · · · · · · · · ·
		 -				
					·····	
			<u>.</u>			
				- 	 	
		 —.				
			· <u> </u>			
						
	 					
	 					
						
						
			<u></u>			

des relation de relation	scribed in ating to po ansfers from Cash. Other as her transa Sales of Purchas Rental of Reimbu Loans of Perform	nization directly section 501(c) colitical organization the reporting or the reporting seets	of the Code ions? foundation	to a nonchar to a nonchar exempt organ ritable exempt her assets rship or fund	ritable exe	npt organiz	nizations)	or in section 5	27,				1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1b (6)	Yes	X X X X X X X X X X X X X X X X X X X
d If t the an	he answe goods, c y transact	r to any of the a ther assets, or s ion or sharing a	bove is 'Yes services give rrangement	s,' complete t en by the rep , show in col	the following fou umn (d) th	ng schedule ndation If t ne value of t	Column he founda he goods	(b) should alwa tion received le other assets, o	ays sh ess tha or serv	ow the fair an fair mar vices recei	marke ket val	et val ue in	ue of		
(a) Line	no (b	Amount involved	(c) N	lame of noncha	iiiable exem	ipi organizatio	11	(d) Description	u (rans	iers, transac	uons, ai	iu sha	iing arran	gements	<u> </u>
			 		·										
_	- 						_								
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				_											
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de	scribed in	ation directly or section 501(c) applete the following	of the Code	(other than	or related section 50	to, one or r 01(c)(3)) or i	nore tax-e n section	exempt organiza	ations 				Yes	X	No
	(a) Na	me of organizat	ion		(b) Type	of organiza	ation		(c)	Description	on of re	latio	nship		
						 -									
	Under pena correct, and	ties of perjury, I decla complete Declaration	are that I have e n of preparer (c	examined this reti other than taxpay	urn, including er) is based c	i accompanying on all informatio	schedules a n of which pr	nd statements, and t eparer has any knov	to the be vledge	est of my knov	vledge a	nd beli	ef, it is true,		
Sign		_											May the I	RS discu	iss
Here		SIM.	Sun			18/2	9/17	PRESIDE	NT				preparer	shown be	elow
	Signature	of officer or trustee	11			Date		Title				_	(see instr	Yes	\\No \
	P	int/Type preparer's na	ande		Preparer's s	signature	7	Date		Check		Р	TIN		لتبي
Paid	_K	EITH A. RO	OBBEN		Kiás	UH E	ofber		/17	self-emp	loyed		00450	1201	
		rm's name	KEITH A	A. ROBBE	EN, C.E	P.A. PC		1,007,20	` - '	Firm's EIN			97678	·	
Prepa	ושו	rm's address	9106 N			· A · FC					00-	UZ:	11010		
Use O	niy '	3 8001033			AVE.		OK	73131		Phone no	111) E \	040	1610	
BAA			OKLAHOI	MA CITY			UK	13131	<u>_</u>	. Hono Ho	(4)	<u>)5)</u>	848-0	70IU	

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

2016

Department of the Treasury

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

Internal Revenue Service	Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instruction	ons is at www.irs.gov/torm990.
Name of the organization		Employer identification number
CAROL ELIZABETH	YOUNG FOUNDATION	73-1291004
Organization type (check	k one)	····
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiz	ation
	4947(a)(1) nonexempt charitable trust r	not treated as a private foundation
	527 political organization	,
	ozr political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust to	reated as a private foundation
	501(c)(3) taxable private foundation	realist as a private realisation
	50 1(c)(3) taxable private roundation	
Check if your organization	n is covered by the General Rule or a Special Rule.	
, ,	•	
Note. Only a section 501((c)(7), (8), or (10) organization can check boxes for both the General	Rule and a Special Rule See instructions
General Rule		
X For an organization fil	ling Form 990, 990-EZ, or 990-PF that received, during the year, cont e contributor. Complete Parts I and II. See instructions for determining	tributions totaling \$5,000 or more (in money or
property) from any on	e definition of the control of the c	ig a contributor's total contributions
Smanial Dulan		
Special Rules		
under sections 509(a)	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 i(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-	33-1/3% support test of the regulations EZ) Part II line 13, 16a, or 16b, and that
received from any one	e contributor, during the year, total contributions of the greater of (1) \$	55,000 or (2) 2% of the amount on (i)
roim 990, Part VIII, III	ne 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	
For an organization de	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ th	nat received from any one contributor.
during the year, total of	contributions of more than \$1,000 exclusively for religious, charitable revention of cruelty to children or animals. Complete Parts I, II, and II	scientific, literary, or educational
pulposes, of for the pi	revention of cideity to children of animals. Complete Parts 1, 11, and 11	II
Des en essenimetion de	combod in control 504/a\/7\ /8\ av /40\ films Farm 000 as 000 F7 th	and an arranged from
during the year, contri	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the ibutions exclusively for religious, charitable, etc., purposes, but no su	nat received from any one contributor, ch contributions totaled more than
\$1,000 If this box is o	checked, enter here the total contributions that were received during t	he year for an exclusively religious,
	se Don't complete any of the parts unless the General Rule applies	
it received nonexclusiv	vely religious, charitable, etc , contributions totaling \$5,000 or more d	uring the year · · · · · · ▶ ♀

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file 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 Form 990-EZ or on its 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)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	1 of 1 of Part	
Name of org	anization ELIZABETH YOUNG FOUNDATION)	er identification number 291004	
	Contributors (see instructions) Use duplicate copies of Part I if additional space		291001	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	JMW CHARITABLE LEAD UNITRUST 1606 COVENTRY PARK	\$\$49,403.		
	OKLAHOMA CITY OK 73120		(Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		· ·	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Oncash Complete Part II for noncash contributions)	

	10, Part XV, Line 2 ding Contribution, Gra	ant, Gift, Loan,	Scholarship, etc	; Programs	
Name . THE BOX	ARD OF DIRECTORS	3			
Address CAROL I	E. YOUNG FOUNDAT	TION, INC.,	909 E. BRI'	TTON ROAD	
City, St, Zip, Phone	OKLAHOMA CITY		OK 7	3114 (405)	848-0610
E-mail					
The form in which a	pplications should be s	ubmitted and inf	formation and ma	iterials they sho	ould include
LETTER FORMAT	AMOUNT DESIRE	O AND USE O	F FUNDS		
Any submission dea	dlines				
NONE					
Any restrictions or li	mitations on awards, si	uch as by geogr	aphical areas, ch	arıtable fields, l	kinds of
nstitutions, or other	factors.				
YES - TO PROVI	DE ASSISTANCE TO	HISPANIC E	PEOPLE THOUGH	HOUT THE AM	ERICAS AND
Name .					
Address			_		
City, St, Zip, Phone	•	•			
E-mail					
The form in which a	pplications should be s	ubmitted and inf	formation and ma	iterials they sho	ould include.
				<u>-</u>	
Any submission dea	ıdlınes.				
•	mitations on awards, s	uch as by geogr	aphical areas, ch	arıtable fields, l	kınds of
nstitutions, or other	factors				
	- 				
					
	POPMENTIN THE STAT	TE OF OKLAH	OMA		
_ine 16b - Accoun	ting Fees				
Name of	Type of Comics	Amount	Net	A divista d	Diahumamant
Name of	Type of Service	Amount		Adjusted	Disbursements
Provider	Provided	Paid Par Books	Investment	Net	for Charitable
		Per Books	Income	Income	Purposes
FITH A ROBBEN CPA DC	TAY PREPARATION	375			

Total <u>375.</u>