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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

Department of the Treasury Internal Revenue Service

SCANNED JUN 2

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

2016

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection For calendar year 2016 or tax year beginning 2016, and ending Name of foundation Employer identification number French Family Charitable Foundation
Number and street (or PO box number if mail is not delivered to street address) 73-1546685 Room/suite R Telephone number (see instructions) P.O. Box 1265

City or town, state or province, country, and ZIP or foreign postal code (405) 348-8300 C If exemption application is pending, check here. OK 73034 Edmond Initial return of a former public charity G Check all that apply: Initial return D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year Accounting method: X Cash Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis.) 12,834,087. under section 507(b)(1)(B), check here . . . Part | Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) for charitable expenses per books ıncome income purposes (cash basis only) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) -1,100,000. If the foundation is not required to attach Sch B Interest on savings and temporary cash investments . . Dividends and interest from securities . 226,400. 226,400 OCDEN 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . 113,464 Net short-term capital gain income modifications 10 a Gross sales less returns and allowances . b Less Cost of C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) Total. Add lines 1 through 11. 1,326,400. 339,864 $\overline{}$ 13 Compensation of officers, directors, trustees, etc . 14 Other employee salanes and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule). . . b Accounting fees (attach sch). . . . 2,125. 2,125 C Other professional fees (attach sch) . . . 3,500. 3,500 1,955 1,955 18 Taxes (attach schedule)(see instrs) . . Depreciation (attach 19 schedule) and depletion . . . 21 Travel, conferences, and meetings . 22 Printing and publications 23 Other expenses (attach schedule) Investment Advosor Fees 10,330. 10,330 24 Total operating and administrative expenses, Add lines 13 through 23_. 17,910. 17,910. 25 Contributions, crifts, grants paid 582,000. Total expenses and disbursements. 599,910 17,910 Subtract line 26 from line 12: 27 a Excess of revenue over expenses and disbursements 726,490 **b** Net Investment income (if negative, enter -0-). 321,954 C Adjusted net income (if negative, enter -0-) . . ō.

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0301 12/16/16

Form 990-PF (2016)

Form	990-	PF(2016) French Family Charitable Foundation	on	73-154	16685 Page 2	
Par	1	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o		
			(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable				
	1	Less: allowance for doubtful accounts				
	4	Pledges receivable				
	l	Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch)				
Ą	ļ	Less: allowance for doubtful accounts				
A S E T	8	Inventories for sale or use				
Ę	9	Prepaid expenses and deferred charges				
S	10 8	a Investments — U.S. and state government obligations (attach schedule)				
	1	b Investments — corporate stock (attach schedule) . L-10b. Stmt	9,901,499.	10,741,453.	12,834,087.	
		c Investments — corporate bonds (attach schedule)	3,301,133.	10,711,133.	12,031,007.	
	11	· •				
		Less accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans			 	
	13	Investments — other (attach schedule)				
	14	Land, buildings, and equipment: basis				
	'-	Less accumulated depreciation (attach schedule)				
	45	Other assets (describe				
		Total assets (to be completed by all filers —				
	'`	see the instructions. Also, see page 1, item I)	9,901,499.	10,741,453.	12,834,087.	
Ė	17	Accounts payable and accrued expenses				
Ä	18	Grants payable				
B	19	Deferred revenue			1	
- !	20	Loans from officers, directors, trustees, & other disqualified persons				
ī	21	Mortgages and other notes payable (attach schedule)			1	
Ţ	22	Other liabilities (describe			1	
Ė		l de la companya de		 	1	
	23	Total liabilities (add lines 17 through 22)	_			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
N F E U T N	24	Unrestricted	9,901,499.	10,741,453.		
E U	25	Temporanly restricted				
D	26	Permanently restricted				
A S S A E L T A		Foundations that do not follow SFAS 117, check here . Full and complete lines 27 through 31.				
ĔĹ	27	Capital stock, trust principal, or current funds				
T A S N	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1	
С	29	Retained earnings, accumulated income, endowment, or other funds				
OE RS	30	Total net assets or fund balances (see instructions)	9,901,499.	10,741,453.	1	
	31	Total liabilities and net assets/fund balances		10//11/1331	1	
		(see instructions)	9,901,499.	10,741,453.	<u> </u>	
Parl	:	Analysis of Changes in Net Assets or Fund Balance	<u>es</u>	· · · · · · · · · · · · · · · · · · ·	···	
—1—	Total	net assets or fund balances at beginning of year — Part II, column (a	a), line 30 (must agree wi			
_		of-year figure reported on prior year's return)			9,901,499.	
		r amount from Part I, line 27a	• • • • • • • • • • • • •		726,490.	
3		increases not included in line 2 (itemize) Capital Gains		3	113,464.	
					10,741,453.	
		asses not included in line 2 (itemize)		5		
	Total	net assets or fund balances at end of year (line 4 minus line 5) $-$ Pa		6	10,741,453.	
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Part VI instructions.

Enter qualifying distributions from Part XII, line 4

442,781.

582,000.

7

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

$\overline{}$	73-134 (2010) FIGHTLY CHAILTY CHAILTADIE FOUNDATION 73-134				age 7
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ruction	s)		
1 a	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)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V,			3,2	20.
	check here . X and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	1			
	foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			3,2	220.
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			3,2	20.
6	Credits/Payments.	1			
	2016 estimated tax pmts and 2015 overpayment credited to 2016	1			
	Exempt foreign organizations — tax withheld at source	1			
	Tax paid with application for extension of time to file (Form 8868) 6c 3,049.	1			
C	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d			4,5	<u>00.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			1,2	280.
_11	Enter the amount of line 10 to be Credited to 2017 estimated tax				
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			Yes	No
	participate or intervene in any political campaign?		1 a		X
t	Did it spend more than \$100 dunng the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 ь		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.				
	: Did the foundation file Form 1120-POL for this year?		1 c	-	Х
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation				
•	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
	of Yes,' has it filed a tax return on Form 990-T for this year?		4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		х
	If 'Yes,' attach the statement required by General Instruction T.				
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		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	x	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	OKLAHOMA				
ŀ	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	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)				ļ
	for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part-XIV)? If Yes, complete Part-XIV	 -	-9-		_X_
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names				
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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		v
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			11		<u> </u>
	advisory privileges? If 'Yes,' attach statement (see instructions)	·				Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption ap Website address · · · · · · · · · · · · · · · · · ·	plication?	• • • • •	13	Х	
14	The books are in care of Hal French Telepho	ne no.	(405)	348	-830	-
	Located at P.O. Box 1265, Edmond, OK ZP+4	730	183			
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year				. •	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authobank, securities, or other financial account in a foreign country?	rity over a		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					
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1				
	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?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	\vdash	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.).	Yes	XNo			
b	o 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)? .		 <i>.</i>	1 b		
	Organizations relying on a current notice regarding disaster assistance check here		- П			1
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?			1 c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	Yes	XNo			
	If 'Yes,' list the years 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(3 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2 all years listed, answer 'No' and attach statement — see instructions)) to		2 b		
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	► 20 ,20 ,20 ,20					
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	of 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	<u>L</u> J				
	determine if the foundation had excess business holdings in 2016.)			3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u></u>	<u>.</u>	4 a		_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?.			4 b		X
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Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)							
5 a Dunng the year did the foundation pay or incur a	-									
(1) Carry on propaganda, or otherwise attempt t	o influence legislation (se	ection 4945(e))?	Yes X	No						
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?										
(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?										
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 regards										
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt ility for the grant?	tion from the	Yes	No						
If 'Yes,' attach the statement required by Regular	`	,								
6 a Did the foundation, during the year, receive any to a personal benefit contract?		·	1 1 1 1 1 1 1 1 1							
b Did the foundation, during the year, pay premium If 'Yes' to 6b, file Form 8870.	is, directly of mairectly, 0	n a personal benelit con	uaulf	6b X						
7 a At any time during the tax year, was the foundati	on a party to a prohibited	l tay shelter transaction?	Vac V	No.						
b If 'Yes,' did the foundation receive any proceeds										
Part VIII Information About Officers, D										
and Contractors	,,	. Canadaon mana	goro, mgmy raid s	p.oycoo,						
1 List all officers, directors, trustees, foundation	n managers and their c	compensation (see inst	ructions).							
	(b) Title, and average	(c)Compensation	(d)Contributions to	4.3 -						
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	èmployee benefit plans and defeπed compensation	(e) Expense account, other allowances						
Hal French										
Edmond,	Director									
Okla MA 73083	10.00	0.	0.	0.						
Gabe French										
Edmond,	Director									
Okla MA 73083	10.00	0.	0.	0.						
Megan French										
Edmond,	Director		_	_						
Okla MA 73083	10.00	0.	0.	0.						
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see is	nstructions), if none, e	nter 'NONE.'						
	(b) Title, and average		(d)Contributions to							
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances						
None										
			 							
	<u> </u>									
	1			,						
Table and the second second			L	· · · · · · · · · · · · · · · · · · ·						
Total number of other employees paid over \$50,000 .	TEEA0208 420			None None (2016)						

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Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Non	ie	
	No.	ne
		
Tota	I number of others receiving over \$50,000 for professional services	. None
Dar	t IX-A Summary of Direct Charitable Activities	
	UNA Journary of Birect Gharitable Activities	···
List th organ	e foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of izations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1		
		. <u>_ </u>
2		
		4
•		
3		·
		· – -
4		
•		· - -
Par	t IX-B Summary of Program-Related Investments (see instructions)	
Des	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
_	ther program-related investments. See instructions.	· -
3		i e

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<u>lear</u>	see instructions.)	gn rou	indations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		~
а	Average monthly fair market value of securities	1 a	11,860,584.
	Average of monthly cash balances	1 b	
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	11,860,584.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	11,860,584.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	177,909.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,682,675.
6	Minimum investment return. Enter 5% of line 5	6	584,134.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foun	dations
	and certain foreign organizations check here Pand do not complete this part.)	•	
1	Minimum investment return from Part X, line 6	1	584,134.
2 a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2 c	3,220.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	580,914.
4	Recoveries of amounts treated as qualifying distributions	4	300/3221
5	Add lines 3 and 4	5	580,914.
6	Deduction from distributable amount (see instructions)	6	300,311.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	580,914.
Par	Qualifying Distributions (see instructions)		300,7221
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·		
	Program-related investments – total from Part IX-B	1 a	582,000.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
		-	·
а	Amounts set aside for specific chantable projects that satisfy the: Suitability test (prior IRS approval required)	3 a	
b	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	582,000.
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	3,220.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	578,780.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years.	undatio	
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				580,914.
2 Undistributed income, if any, as of the end of 2016				300,521.
a Enter amount for 2015 only			591,163.	
b Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2016				
a From 2011			Ì	
b From 2012				
c From 2013 2,738.			Ì	
d From 2014 3, 622 .				
e From 2015				
f Total of lines 3a through e	9,640.			
4 Qualifying distributions for 2016 from Part				
XII, line 4: ► \$ 582,000.				
a Applied to 2015, but not more than line 2a			582,000.	
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016	9,163.			
(If an amount appears ın column (d), the same amount must be shown ın column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	477.			i
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount – see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions			9,163.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				580,914.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	477.			
10 Analysis of line 9:				
a Excess from 2012 0 .				
b Excess from 2013 0.				
C Excess from 2014 0 .				
d Excess from 2015 477.				
e Excess from 2016 0 .		1		

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Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling						
is effective for 2016, enter the date of the ru	ling			<u></u>		
b Check box to indicate whether the foundation		ng foundation descri	bed in section	4942(j)(3) or	4942(j)(5)	
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	41.0045	Prior 3 years	1,522	(e) Total	
each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013		
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						
Complete 3a, b, or c for the alternative test relied upon.						
a 'Assets' alternative test — enter:						
(1) Value of all assets				1		
(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)			<u>, </u>			
(3) Largest amount of support from an exempt organization					···· · · · · · · · · · · · · · · · · ·	
(4) Gross investment income		<u> </u>		<u> </u>		
Part XV Supplementary Information	(Complete this	part only if the	foundation ha	d \$5,000 or more	in	
assets at any time during th		structions.)		··· - ,		
1 Information Regarding Foundation Managers a List any managers of the foundation who had close of any tax year (but only if they have compared to the compared to the close of any tax year).	ve contributed more	than 2% of the total of \$5.000) (See section	contributions received	ed by the foundation be	efore the	
Hal French, P.O.Box 1265,		• •	````			
b List any managers of the foundation who ow a partnership or other entity) of which the for	n 10% or more of the undation has a 10%	e stock of a corporati or greater interest	on (or an equally la	rge portion of the owner	ership of	
2 Information Regarding Contribution, Gran Check here	akes contributions to	preselected charitab	le organizations an	d does not accept unso	olicited tions,	
⁻ a The name, address, and telephone number	or e-mail address of	the person to whom	applications should	be addrēssēd.		
b The form in which applications should be su	bmitted and informat	ion and materials the	ey should include.		-	
c Any submission deadlines:						
d Any restrictions or limitations on awards, suc	ch as by geographica	al areas, charitable fie	elds, kınds of institu	tions, or other factors:		
	· · ·					
BAA	TE	EA0310 12/16/16		Fo	orm 990-PF (2016)	

3 Grants and Contributions Paid During the Ye	If recipient is an individual,	Foundation		
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	O Substantial Contributor			
A Chance to Change			Drug Addiction	
2113 W. Britton Road	İ	501(c)3	1 -	
Oklahoma City OK 73120		1301 (0/3	1	5,000
ALS Patient Services Outreach			Health Services	3,000
PO Box 702558		501(c)3	1	
Tulsa OK 74170		301 (0/3		2,500
Alzheimers Association			Health Services	2,500
2123 N. Classen		501(c)3	i I	
Oklahoma City OK 73106		301 (0/3		5,000
Angels Foster Family Network OKC, Inc			Foster Care	3,000
PO Box 31746		501(c)3	1	
Edmond OK 73003		301 (0)3		100,000
			 Social Services	100,000
Central Habitat for Humanity		501(c)3	1	
5005 South I-35 Service Road Oklahoma City OK 73129		1201 (6) 3		25 000
		[[[] []]]	Conial Commissa	25,000
Character Council of Edmond		301 (6) 3	Social Services	
PO Box 392		501 (= \ 2		4 000
Edmond OK 73083		501(c)3		4,000
Citizens caring for Children	}		Social Services	
730 W. Willshirw Creek Blvd, Suite 111	1	501 (=) 2	ļ	1 000
Oklahoma City OK 73116		501(c)3		1,000
Corn Bible Academy			Education	
PO Box 38		() -		150 000
Corn OK 73024		501(c)3		150,000
Edmond Historical Society Museum			Arts	
431 S. Boulevard				
Edmond OK 73034		501 (c) 3		1,000
See Line 3a statement]	
				000 500
			1	288,500
	<u> </u>	l		
Total		· · · · · ·	3a	582,000
b Approved for future payment			ļ i	
		1		
		-		
			1	
		ļ		
		l	Į (-
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	1			
			1	
	1			
			1	
	i contract of the contract of			

	I-A Analysis of income-Producing					
Enter gross amounts unless otherwise indicated. 1 Program service revenue:		(a) Business code	business income (b) Amount	(c) Exclu- sion	by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions.)
1 Prog	ram service revenue:	L code		code		(See instructions.)
a						
b						
С						
-4						
е						
f						
g Fees	and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Interes	st on savings and temporary cash investments					
4 Divid	lends and interest from securities	512b1	226,400.	14		
5 Net r	ental income or (loss) from real estate					
a Debt	-financed property					
	debt-financed property					
6 Net re	ental income or (loss) from personal property					
	r investment income					
8 Gain o	or (loss) from sales of assets other than inventory	512b5	551,448.	18		
9 Net ii	ncome or (loss) from special events					
10 Gros	s profit or (loss) from sales of inventory					
11 Othe	r revenue.					
a						
b						
C						
		1		l i		
d	*** ** ** * * * * * * * * * * * * * * *	1]		
e						
e Subt	otal. Add columns (b), (d), and (e)		777,848.			
e Subto	I. Add line 12, columns (b), (d), and (e)	· · · · · · ·	777,848.		13	777,848.
e Subto	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	s.)			,	777,848.
e Subto	I. Add line 12, columns (b), (d), and (e)	s.)			,	777,848.
e Subto	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subtraction 12 Subtraction 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subto See works Part XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the
e Subto Subt	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations I-B Relationship of Activities to the Explain below how each activity for which income.	e Accompli	shment of Exemp	ot Purp	oses	the

Part XVII	Information Regarding	Transfers '	To and	Transactions an	d Relationships	With None	haritable
	Exempt Organizations				•		

describe relating a Transfer (1) Cas (2) Other b Other tra (1) Sale (2) Pure (3) Ren (4) Reir (5) Loa (6) Perf	organization directly din section 501(c) to political organization for political organizations from the reporting the control of the control	of the Code (other titions?) g foundation to a	noncharitable e	xempt organization	ons) or in sec			1 b (2) 1 b (3) 1 b (4) 1 b (5)	Yes	X X X X X X X X X X X X
the good	swer to any of the a is, other assets, or saction or sharing a	services given by	the reporting fo	oundation. If the for	indation recei	ved less tha	n fair market value	ralue of in		
(a) Line no	(b) Amount involved		of noncharitable ex				fers, transactions, and s	haring аттап	gement	5
						•				
										
										
				· · · · · · · · · · · · · · · · · · ·						
							 			
					·				_	
										
										
								· .		

describe	undation directly or ed in section 501(c) complete the follow	of the Code (other	ed with, or relate er than section 5	d to, one or more to 501(c)(3)) or in sect	exempt org	ganizations		. Yes	x	No
(a) Name of organiza	tion	(b) Typ	e of organization		(c)	Description of relat	ionship		
	· · · · · · · · · · · · · · · · · · ·									
										
			1							
Sign Here	enalises of perjury, I peca and complete Decision	of preparer (other that	an taxpayer) is based	ig accompanying screedly	•	s, and to the bes y knowledge cd Chair		May the this retur preparer (see inst	n with the shown b	elow
Signa	ture of officer or trastee			Date	Title				Yes	No
	Print/Type preparers n	ame	Prepa	The Con	Date	7-15	Check X if	PTIN		
Paid	Bruce Comp	ton	Bruce	e Compton	199 6	-7-17	self-employed	P01343	3603	
Preparer	Firm's name	Bruce Com	oton CPA				Firm's EIN - 44-4	625476		
Use Only	Firm's address	4101 Hughe								
		Norman			K 73072		Phone no (405) 473-	7415	
BAA								Form 99		2016)

Schedule-B

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

Schedule of Contributors

Department of the Treasury Internal Revenue Service Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

2016

OMB No 1545-0047

Name of the organization		Employer Identification number			
French Family Charitable Foundation 73-1546685					
Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt chantable trust not treated	l as a private foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt chantable trust treated as	a private foundation			
		a private roundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Gene	eral Rule or a Special Rule.				
Note. Only a section 501(c)(7), (8), or (10) organize	zation can check boxes for both the General Rule and	a Special Rule See instructions			
General Rule					
X For an organization filing Form 990, 990-EZ, o	or 990-PF that received, during the year, contributions t	otaling \$5,000 or more (in money or			
property) from any one contributor. Complete	Parts I and II See instructions for determining a contrib	outor's total contributions.			
Special Rules					
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% su	upport test of the regulations			
under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 15b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i)					
Form 990, Part VIII, line 1h, or (ii) Form 990-E	Z, line 1. Complete Parts I and II	,			
Description described in section 501/	o//7) (9) or (40) fling Farm 000 or 000 F7 that are over	d frame and an analysis and			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational					
purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than					
\$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because					
it received nonexclusively religious, charitable	, etc., contributions totaling \$5,000 or more during the y	/ear · · · · · · ▶ ^Ş			
990-PF), but it must answer 'No' on Part IV, line 2	e General Rule and/or the Special Rules doesn't file Sch 2, of its Form 990, or check the box on line H of its Form	n 990-EZ or on its Form 990-PF.			
Part I, line 2, to certify that it doesn't meet the filing	g requirements of Schedule B (Form 990, 990-EZ, or 9	90-PF).			
BAA For Paperwork Reduction Act Notice, see the Instru	uctions for Form 990, 990-EZ, or 990-PF. Sche	edule B (Form 990, 990-EZ, or 990-PF) (2016)			

	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	1 of 1 of Part I
Name of org			r Identification number
	Family Charitable Foundation		546685
Partil	Contributors (see instructions). Use duplicate copies of Part I if additional space	e is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Hal French PO Box 1265 Edmond OK 73083	\$1,100,000.	Person X Payroll Noncash (Complete Part II for
	Edmond OK 73083	1	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 Occash 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 Oncash Complete Part II for noncash contributions)
BAA	TFFA0702 08/09/16	Schedule B (Form 9	90. 990-FZ or 990-PF) (2016)

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story bnck warehouse; or common stock, 200 shs. MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
Prescott Group Small Cap LP	P	01/02/15	12/31/16
SPDR	P	01/02/15	05/01/16

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (e) thru (h)

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
157,778.		0.	157,778.	
899,877.		1,015,129.	-115,252.	

Total 1,015,129. 42,526.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (i) thru (I)

Complete only for asset by the foundation on 12	(I) Gains (Column (h)		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	gain minus column (k), but not less than -0-) or losses (from column (h))
			157,778. -115,252.

Total <u>42,526.</u>

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Name and	Recipient		If recipient is an individual, show any	_ Foun dation status	Purpose of _ grant or contribution	Person₋or Business Checkbox	
(home or	business	·····	relationship to any foundation manager or substantial contributor	of re- cipient	44	Amount	
a Paid during the y Edmond Mobile 25 W 3rd Edmond		73003		 501 (c) 3	Social Services	Person or X Business 10,000.	

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foun- dation status of re-	Purpose of grant or contribution	Person or Business Checkbox
	any foundation manager or substantial contributor	cipient		Amount
a Paid during the year Edmond Public Schools Foundation 1001 W. Danforth Road			Education	Person or X Business
Edmond OK 73003 Fine Arts Institute of Edmond		501(c)3	Arts	40,000. Person or X
PO Box 311 Edmond OK 73083		501(c)3		Business 5,000.
Fostering Sweet Dreams Foundation 529 West Edmond Rd			Foster Care	Person or X Business
Edmond OK 73003		501(c)3		21,000.
Good Sheperd Clinic 222 NW 12th St.			Health Services	Person or X Business
Oklahoma City OK 73103 Hope is Alive		501(c)3	Addiction & Recovery	1,000. Person or X
3009 Brookhollow Rd Oklahoma City OK 73120		501(c)3		Business
Jim Riley Outreach		501(0)3	Ministry	100,000. Person or X
2201 Cardinal Drive Edmond OK 73013		501 (c) 3		Business
Johns Hopkins University & Medicine			Medical Research	Person or X
733 N. Broadway Baltimore MD 21205		501(c)		Business
Juliette Fowler Communities 1234 Abrams Road			Social Services	Person or X Business
Dallas TX 75214 Maine Street Foundation		501(c)3	Addiction and Recovery	5,000.
701 West Maine Street Enid OK 73701		501(c)3		Business 10,000.
MD Anderson Center PO Box 301439			Medical Research	Person or X Business
Houston TX 77230 Oklahoma Medical Research Foundation		501(c)3	Medical Research	1,000. Person or X
825 NE 13th Street Oklahoma City OK 73104		 501(c)3		Business
Oklahoma Project Women			Social Services	5,000. Person or
PO Box 14026 Tulsa OK 74159		501(c)3		Business
Peaceful Family Solutions 7405 S. Douglas Ave			Addiction and Recovery	Person or Business
Oklahoma City OK 73139 Parents Helping Parents		501(c)3	Social Services	25,000. Person or
3416 S. Boulevard				Business
Edmond OK 73013 Russell Dougherty Elementary PTO		501(c)3	Education	5,000. Person or
19 N. Blvd St Edmond OK 73034		501(c)3		Business

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year Soncatchers Mentoring			Ministry	Person or
3905 N. Bryant OK 73034		501(c)3	_	Business
St. Joseph's Peruvian Mission Fund 8008 Lakehurst Drive			Social Services	Person or Business
Oklahoma City OK 73120		501(c)3		1,000.
Wes Welker Foundation PO Box 20777			Education	Person or Business
Oklahoma City OK 73156 Youth Services for Oklahoma County		501(c)3	Youth Services	5,000. Person or
201 NE 50th St Oklahoma City OK 73105		501(c)3		Business5,000.
YMCA Oklahoma City 2640 NW 39th Street			Social Services	Person or Business
Edmond OK 73083		501(c)3		1,000.
Logan County Livestock 3919 S. Broadway			FAA	Person or Business
Edmond OK 73013		501(c)3	ļ	2,500.
Predisan Health Ministries PO Box 72618			Ministries	Person or Business
Marietta GA 30007	L	501(c)3	l	5,000.

Tota!

288,500.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
Prescott Group Aggressive Small Cap L.P.	2,393,100.	3,166,467.	
Prescott Group Aggressive Mid Cap LP	1,261,476.	1,660,647.	
Vanguard- Stocks	7,086,877.	8,006,973.	

Total

10,741,453. 12,834,087.