

Form 990-PF
Department of the Treasury
Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2018
Return of Private Foundation

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

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

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

For calendar year 2017 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
CARMICHAEL FOUNDATION		_	20-6744052	
Number and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
2121 S. COLUMBIA, SUITE 65	0		918-743-43	00
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
TULSA, OK 74114			1	
G Check all that apply. Initial return		ormer public charity	D 1. Foreign organizations	s, check here
Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
Address change	Name change		check here and attach co	mputation
H Check type of organization: X Section 501(c)(3) ex	kempt private foundation Other taxable private founda	9Y	E If private foundation sta	
Section 4947(a)(1) nonexempt charitable trust I Fair market value of all assets at end of year J Accounts		Accrual	under section 507(b)(1)	
	ther (specify)	Accidai	F If the foundation is in a under section 507(b)(1)	
\$ 2,071,493. (Part I, colur		s.)	under section sor(b)(1)	(tb), check liefe
Part I Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	150,102.		N/A	
2 Check I If the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				<u> </u>
4 Dividends and interest from securities	26,428.	26,428.		STATEMENT 1
5a Gross rents				
Net rental income or (loss)	444		<u></u>	
63 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	141,462.			550/55
b assets on line 6a 443,720.		141 462	RE RE	CEIVED L'
b Gross sales price for all 443,720. Capital gain net income (from Part IV line 2) Alet object form goodfal gain	1-	141,462.	0	2 0
6 Net Short-term capital gain		* *	<u> ĕ 140</u> /	<u>12°3) ₹018</u>
9 Income modifications Gross sales less returns				121
10a and allowances b Less Cost of goods sold			00	DENI LIT
c Gross profit or (loss)			1 00	2514, U1
11 Other income		- 		
12 Total Add lines 1 through 11	317,992.	167,890.		1
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees STMT 2 c Other professional fees	2,400.	0.		0.
c Other professional fees				
17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	1,160.	251.		0.
in 18 Taxes STMT 3	1,160.	251.	 	, , ,
19 Depreciation and depletion 20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 4	6,000.	6,000.		0.
Printing and publications Other expenses STMT 4 Total operating and administrative expenses. Add lines 13 through 23 Contributions rules grants paid				
expenses. Add lines 13 through 23	9,560.	6,251.		0.
25 Contributions, gifts, grants paid	109,000.	•		109,000.
26 Total expenses and disbursements.				
Add lines 24 and 25	118,560.	6,251.		109,000.
27 Subtract line 26 from line 12	100 420	ş	7,	3 2 3
2 Excess of revenue over expenses and disbursements	199,432.	161 630		10 mg + 18, 148 y
b Net investment income (if negative, enter -0-)	<u> </u>	161,639.	N/A	(A) 4 14
c Adjusted net income (if negative, enter -0-)			TA/ W	1

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2017)

_	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
_	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	445,296.	309,104.	309,104.		
	2	Savings and temporary cash investments					
	3	Accounts receivable ► 33.					
		Less allowance for doubtful accounts		33.	33.		
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts					
	5	Grants receivable	~				
	6	Receivables due from officers, directors, trustees, and other					
	l	disqualified persons		•	<u> </u>		
	7	Other notes and loans receivable					
		Less allowance for doubtful accounts					
şţ	1	Inventories for sale or use			 		
Assets	•	Prepaid expenses and deferred charges					
•	ŧ	Investments - U.S. and state government obligations	1 002 220	1 414 050	1 671 405		
	1	Investments - corporate stock STMT 5	1,082,220.	1,414,858.	1,671,485.		
		Investments - corporate bonds		 	-		
	11	Investments - land, buildings, and equipment basis					
	۱.,	Less accumulated depreciation					
		Investments - mortgage loans Investments - other STMT 6	73,854.	76,807.	90,871.		
	13	Investments - other STMT 6	73,034.	70,007.	30,011.		
	'4	Land, buildings, and equipment, basis					
	15	Other assets (describe					
		Total assets (to be completed by all filers - see the		· · · · · · · · · · · · · · · · · · ·			
	'`	instructions. Also, see page 1, item I)	1,601,370.	1,800,802.	2,071,493.		
	17	Accounts payable and accrued expenses					
1	18	Grants payable					
s	19	Deferred revenue			1		
abilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable					
_	22	Other liabilities (describe)			}		
				•			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	:		
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26, and lines 30 and 31.					
S		Unrestricted			1		
alances		Temporarily restricted	· · · · · · · · · · · · · · · · · · ·				
9	20	Permanently restricted Foundations that do not follow SFAS 117, check here					
or Fund		and complete lines 27 through 31.			,		
5	27	Capital stock, trust principal, or current funds	0.	0.			
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.			
ş	29	Retained earnings, accumulated income, endowment, or other funds	1,601,370.	1,800,802.			
Net		Total net assets or fund balances	1,601,370.	1,800,802.	,		
_							
	31	Total liabilities and net assets/fund balances	1,601,370.	1,800,802.			
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances				
_	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30				
		t agree with end-of-year figure reported on prior year's return)		1	1,601,370.		
		amount from Part I, line 27a		2	199,432.		
3	Othe	increases not included in line 2 (itemize)		3	0.		
١.	Add I	ines 1, 2, and 3		4	1,800,802.		
	Dacre	acac not included in line 2 (itemize)		-	0		

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	MICHAEL FOUR and Losses for Ta		Income	CER 1	mma OIII		0-674		Page 3
					ATTACHI		TATEME		to cold
	the kind(s) of property so arehouse, or common stoo		ite,	(b) How (P - Pur D - Do	chase		acquired lay, yr.)		te sold lay, yr)
1a									
b									
С									
d									
_e									
(e) Gross sales price	(f) Depreciation allo (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (
_a									
<u>b</u>									
С									
<u>d</u>								444	460
<u>e</u> 443,720.			302,258	8.					,462.
Complete only for assets showing	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					ol. (h) gain i not less than		
(1) FMV as of 12/31/69	(j) Adjusted basi as of 12/31/69		ccess of col. (i) col. (j), if any			Losses	(from col. (f	-0-) ui 	
<u>a</u>									
<u>b</u>			_						
<u>c</u>				-					
_d								1 4 1	462
<u>e</u>				$\overline{}$,			141	<u>,462.</u>
2 Capital gain net income or (net ca	pital loss) { If gain	, also enter in Part I, line s), enter -0- in Part I, line	7 : 7	} 2	ļ			141	,462.
3 Net short-term capital gain or (los	ss) as defined in sections	1222(5) and (6).							
If gain, also enter in Part I, line 8,	column (c).								
If (loss), enter -0- in Part I, line 8		Val Za - Dadisa - d	Towar Net I	<u> </u>	l ln a a		N/A		
Part V Qualification U				-	ient inco	nie .			
(For optional use by domestic private	foundations subject to th	c section 4940(a) tax on	nct investment inc	ome.)					
If section 4940(d)(2) applies, leave th	nis part blank								
	•								⊡
Was the foundation liable for the sect			•	og,				Yes	X No
If "Yes," the foundation doesn't qualif 1 Enter the appropriate amount in e				tries					
(a)	acii coluliii loi eacii year		ore making any en			7		(d)	
Base periód years	Adjusted qua	(b) alifying distributions	Net value of nor	(c) ncharitable	-use assets		Distrib	(d) ution ratio	(c)\
Calendar year (or tax year beginning	ig in) Trajusted qui	76,000.	1101 14140 01 1101		4,025	 	(col. (b) dıvı		47087
2016		58,000.	 		5,325	+			37777
2015	 	48,000.		1 36	1,549	†—			35254
2014 2013		71,500.			0,338				64395
		31,000.			1,226				42982
2012		31,000.	<u> </u>		1,220	†			12702
2 Total of line 1, column (d)						2	i	.2	27495
3 Average distribution ratio for the state the foundation has been in exister		e uie totai on line 2 by 5.0	o, or by the number	i oi years		3		. 0	45499
4 Enter the net value of noncharitab	le-use assets for 2017 fro	m Part X, line 5				4	1	L,946	,747.
5 Multiply line 4 by line 3						5		88	,575.
6 Enter 1% of net investment incom	ue (1% of Part L line 27h)					6		1	,616.
	(. / v v · i ait i i iiio 2/0)								
7 Add lines 5 and 6						7			<u>,191.</u>
8 Enter qualifying distributions from	Part XII, line 4					8		109	<u>,000.</u>
If line 8 is equal to or greater than	line 7, check the box in P	art VI, line 1b, and comp	lete that part using) a 1% tax	rate.				
See the Part VI instructions.									DE
723521 01-03-18							Fo	orm 990-	PF (2017)

723521 01-03-18

Form 990-PF (2017) CARMICHAEL FOUNDATION / Rart VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	20-67440 4948 - see ins	
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	1,616.
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 foundations only, others, enter -0-)	2	0.
3 Add lines 1 and 2	3	1,616.
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	1,616.
6 Credits/Payments		
a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 3:	_	!
B Example for eight organizations tax training at course	<u>0.</u>	
c Tax paid with application for extension of time to file (Form 8868) 6c 3,50		
d Backup withholding erroneously withheld	<u> </u>	
7 Total credits and payments. Add lines 6a through 6d	7	3,531.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8	49.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	1 066
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,866.
11 Enter the amount of line 10 to be Credited to 2018 estimated tax 1,866. Refunded	<u> </u>	
Part VII-A Statements Regarding Activities		Yes No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	rene in	
any political campaign?	lafiantian	
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the diff the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	Ellindon	1b X
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	}*	1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		" "
	o.	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
managers. > \$ 0.		
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 incorporatio	n, or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 X
If "Yes," attach the statement required by General Instruction T	į	
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 s 	tate 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
_		
8a Enter the states to which the foundation reports or with which it is registered. See instructions.		
OK		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	}-	8b X
of each state as required by General Instruction G? If "No," attach explanation	- Januar	8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for or year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	Jaielluai .	$\frac{1}{9}$
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If Yes, complete Part XIV 10 Did any persons become substantial contributors during the tax year? If Yes, attach a schedule listing their names and addresses	ŀ	10 X
TO ONG ANY POLICOLOGIC CONCINENTIAL CONTRIBUTIONS CURING THE LAX YEAR? IT THES, BELIEVED B SCHROUND INSHING THEIR BARD B GGP 85505	Form	990-PF (2017)

L'.	Statements Regarding Activities (continued)			
		<u></u>	Yes	No
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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X_	L
	Website address ► N/A	2 4	200	
14	The books are in care of THE FOUNDATION Telephone no. > 918-74	111	300	
	Located at ► 2121 S. COLUMBIA, SUITE 650, TULSA, OK ZIP+4 ► 74	114		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	NT	/A	النا •
40	and enter the amount of tax-exempt interest received or accrued during the year Association and enter the amount of tax-exempt interest received or accrued during the year	- 14	Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	16	163	X
	securities, or other financial account in a foreign country?	10		^
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Pa	foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Ц		<u></u>
ت	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
12	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?			}
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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.)			ĺĺ
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 N/A	1b		
	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 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))	1		
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes X No			lì
	——————————————————————————————————————			
	If "Yes," list the years \(\)			
U	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.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•	The provisions of section 4-3-2(a)(2) are being applied to any of the years fisted in 2a, fist the years fisted.			
3a	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 2017 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 2017.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			}
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		m 990)-PF	(2017)

Form 990-PF (20		FOUNDATION			20-67440	52	F	Page 6
Part VII-B	Statements Regarding	Activities for Which	Form 4720 May Be R	equired (contin	ued)			
6a During the	year, did the foundation pay or incui	r any amount to			Ĺ		Yes	No
(1) Carry	on propaganda, or otherwise attemp	t to influence legislation (section	on 4945(e))?	Y	es X No			
(2) Influer	ice the outcome of any specific publ	ic election (see section 4955),	or to carry on, directly or indire			J		. !
any vo	ter registration drive?			Y	es X No			
(3) Provid	e a grant to an individual for travel, s	study, or other similar purpose	\$?	Y	es X No			.]
(4) Provid	e a grant to an organization other the	an a charitable, etc., organizatio	on described in section					. 1
4945(d)(4)(A)? See instructions			Y	es X No			. [
(5) Provid	e for any purpose other than religiou	ıs, charitable, scientific, literary	, or educational purposes, or f	or	ı	ł	ł	• }
the pre	evention of cruelty to children or anii	nals?		Y	es X No			
b If any answ	er is "Yes" to 5a(1)-(5), did any of th	ne transactions fail to qualify ur	nder the exceptions described i	n Regulations	.	.		
section 53.	4945 or in a current notice regarding	g disaster assistance? See instr	ructions		N/A	5b		
Organizatio	ns relying on a current notice regard	ling disaster assistance, check	here			ļ	ļ	ł
c If the answ	er is "Yes" to question 5a(4), does th	e foundation claim exemption	from the tax because it maintai	ned				- 1
expenditure	responsibility for the grant?		D.	I/A 🔲 Y	es 🔲 No			
If "Yes," atta	ach the statement required by Regula	ations section 53.4945-5(d).						- 1
6a Did the fou	ndation, during the year, receive any	funds, directly or indirectly, to	pay premiums on					
a personal	benefit contract?			Ye	es 🗓 No 📙			
b Did the fou	ndation, during the year, pay premiu	ms, directly or indirectly, on a	personal benefit contract?		Ļ	6b		<u> </u>
If "Yes" to 6	b, file Form 8870.							l
7a At any time	during the tax year, was the founda	tion a party to a prohibited tax	shelter transaction?	Y	es X No			
	the foundation receive any proceed				N/A	7b		
Part VIII	Information About Office		ees, Foundation Mar	nagers, Highly				
	Paid Employees, and C							
LIST ALL OTH	ers, directors, trustees, and fo	Sundation managers and t		(c) Compensation	(d) Contributions to	Τ.,	a) Evo	
	(a) Name and address	.	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	ac	e) Expe count,	other
		·	to position	enter-0-)	compensation	 _ a	llowan	ices
MICHAEL		_ 	DIRECTOR		1			
	CHMOND ROAD		-	0.	0.			0.
EDMOND,	OK 73013 WILSON		0.00 DIRECTOR	· ·		├		<u> </u>
	CHMOND ROAD		DIRECTOR		ļ	ł		
	OK 73013		0.00	0.	0.	ł		0.
SDMOND,	OK 73013		0.00	· · ·	<u>.</u>	╁		••
			-					
			-			1		
	-			 		t		
			1					
			1					
Compensa	tion of five highest-paid emplo	yees (other than those inc	cluded on line 1). If none,	enter "NONE."				_
4 3 No.			(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	(6	e) Expe	ense
(a) Nan	ne and address of each employee pa	ia more than \$50,000	devoted to position	(c) Compensation	and deterred compensation	act	illowan	ices
NO)NE							
			1					
l						<u> </u>		
								_
			<u></u>	<u> </u>		<u> </u>		
]]		
				ļ		<u> </u>		
			_					

Total number of other employees paid over \$50,000

Form 990-PF (2017)

Total. Add lines 1 through 3

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
-	Average monthly fair market value of securities	1a	1,647,314.
	Average of monthly cash balances	1b	1,647,314. 329,079.
	Fair market value of all other assets	1c	·
-	Total (add lines 1a, b, and c)	1d	1,976,393.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,976,393.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	29,646.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,946,747.
6	Minimum investment return. Enter 5% of line 5	6	97,337.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	97,337.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 1,616.		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	<u>1,616.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	95,721.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	95,721.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	95,721.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	109,000.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	109,000.
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	5	1,616.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	107,384.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				95,721.
line 7				<u> </u>
2 Undistributed income, if any, as of the end of 2017			0.	
a Enter amount for 2016 only b Total for prior years:				
g rotal for prior years		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013 17,522.				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	17,522.			
4 Qualifying distributions for 2017 from	17,3221			
Part XII, line 4 ► \$ 109,000.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
· '				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)			,	95,721.
d Applied to 2017 distributable amount	13,279.			7577221
e Remaining amount distributed out of corpus	0.	·		0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	30,801.	~w		<u></u>
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		0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line			_	
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2018				٧.
, 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)	0.			
8 Excess distributions carryover from 2012	0.			
not applied on line 5 or line 7		<u> </u>		
9 Excess distributions carryover to 2018.	20 001			
Subtract lines 7 and 8 from line 6a	30,801.			
10 Analysis of line 9				
a Excess from 2013 17,522.				'
b Excess from 2014				, '
c Excess from 2015	•			
d Excess from 2016				
e Excess from 2017 13,279.			<u> </u>	1 000 DE (0047)

	AEL FOUNDAT			20-67	44052 Page 10
Part XIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling or		•	.]		
foundation, and the ruling is effective for	•	•	. ▶ ∟	1 10 10 (1/0)	
b Check box to indicate whether the founda		g foundation described in		4942(j)(3) or 49	42(<u>J)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year	(L) 001C	Prior 3 years	1 (4) 2024	(a) Takal
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed				 /	
b 85% of line 2a				V	
c Qualifying distributions from Part XII,			/	1	
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	i			1	
for active conduct of exempt activities.					
Subtract line 2d from line 2c			<i></i>	-	
3 Complete 3a, b, or c for the alternative test relied upon;		1	1		
a "Assets" alternative test - enter]	
(1) Value of all assets				 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return				}	
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter		-/		 	
(1) Total support other than gross					
investment income (interest,	ļ]	
dividends, rents, payments on		/			
securities loans (section	A	,			
512(a)(5)), or royalties)	/				
(2) Support from general public and 5 or more exempt	/				
organizations as provided in	/				
section 4942(j)(3)(B)(iii)				 	
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		 ,		 	
Part XV Supplementary Infor	mation (Complet	e this part only if	the foundation	had \$5.000 or more	e in assets
at any time during th				,	
1 Information Regarding Foundation	Managers:		···		
a List any managers of the foundation who	•	han 2% of the total contri	butions received by the	foundation before the close	of any tax
year (but only if they have contributed mo			•		•
SEE STATEMENT 7					
b List any managers of the foundation who	own 10% or more of the	stock of a corporation (c	or an equally large portion	n of the ownership of a par	tnership or
other entity) of which the foundation has	a 10% or greater interest	t.			
NONE					
2 Information Regarding Contributio					
Check here 🕨 🗶 if the foundation on					sts for funds. If
the foundation makes gifts, grants, etc., to	o individuals or organizat	ions under other condition	ons, complete items 2a,	b, c, and d.	-
a The name, address, and telephone number	er or email address of the	person to whom applica	tions should be address	ed	
h The form of the soul of the soul					
b The form in which applications should be	submitted and informati	on and materials they sh	onia iucinae		
c Any submission deadlines		· · · · · · · · · · · · · · · · · · ·			
City Submission deadines					
d Any restrictions or limitations on awards,	such as by geographical	areas, charitable fields, l	ands of institutions, or o	other factors:	

3 Grants and Contributions Paid During the		Pavment Pavment		
Recipient	If recipient is an individual,	T	T	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
FUREVER FRIENDS FUND	NONE	501(C)3	ASSISTANCE	
112 N JACKSON		ORGANIZATION		
ENID, OK 73701	 -			2,000
DOCTORS WITHOUT BORDERS	NONE	501(C)3	ASSISTANCE	
333 SEVENTH AVE., 2ND FLOOR		DRGANIZATION		
NEW YORK, NY 10001				5,000
EDMOND MOBILE MEALS	NONE	501(C)3	ASSISTANCE	
25 w 3RD ST		ORGANIZATION		
EDMOND, OK 73003			 	5,000
EMERSON ELEMENTARY PTA	NONE	501(C)3	ASSISTANCE	
909 N BOSTON AVE.		ORGANIZATION		
TULSA, OK 74106				5,000
FIGURE SKATING IN HARLEM	NONE	501(C)3	ASSISTANCE	
361 WEST 125TH ST., 4TH FLOOR		ORGANIZATION		
NEW YORK, NY 10027		.]		1,000
Total SEE CC	NTINUATION SHEE	T(S)	► 3a	109,000
b Approved for future payment				
NONE				
			1	
Total			▶ 3b	0

Part XVI-A	A I i-	s of Income	Draditaina	A ativitia a
Part XVI-A	Anaivei	s of income	-Producina	ACTIVITIES
, a	/ WILLIAM SIN	, 01 111001110		

	Unrolata	d huganaa maama	F	dudburantura 640, 640, ex 644	
Enter gross amounts unless otherwise indicated.	(a) Business	d business income (b) Amount	(C) Exclu- sion code	ded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		COUR		
a					
b	-		<u> </u>		
c					
d					
e					
f	L				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments		·	<u> </u>		
4 Dividends and interest from securities			14	26,428.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	141,462.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					<u></u>
•••	1 1				
a					
c					
					, <u>.</u>
e		0.	 	167,890.	0.
13 Total. Add line 12, columns (b), (d), and (e)	1				167,890.
(See worksheet in line 13 instructions to verify calculations.)					
• • • • • • • • • • • • • • • • • • • •					
Part XVI-B Relationship of Activities to	o the Acco	mplishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which inco	me is reported in	n column (e) of Part XVI-A	contrib	uted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than					
				,	
				······································	
				· · · · · · · · · · · · · · · · · · ·	
	··-				
					<u> </u>
	-				-
					
				*	
					
					
					
-					
					

Form 990-PF (2017)

Form 990-PF (2017) CARMICHAEL FOUNDATION 20-6744052

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable 20-6744052

		Exempt Organ	nizations							
1	Did the o	rganization directly or indi	rectly engage in any	of the following	ng with any other organizati	on described in secti	on 501(c)		Yes	No
	(other th	an section 501(c)(3) organ	nizations) or in secti	on 527, relatin	g to political organizations?					
а	Transfers	s from the reporting found	lation to a noncharita	able exempt or	ganization of					
	(1) Cash	1						1a(1)		X
	(2) Othe	er assets						1a(2)		<u> </u>
b	Other tra	nsactions:								
	(1) Sale	s of assets to a noncharita	able exempt organiza	ition				1b(1)		<u> </u>
	(2) Puro	chases of assets from a no	ncharitable exempt	organization				16(2)	<u> </u>	X
	(3) Rent	tal of facilities, equipment,	or other assets					1b(3)		<u> </u>
	(4) Rein	nbursement arrangements	;					1b(4)		X
	(5) Loan	is or loan guarantees						1b(5)		<u> </u>
	(6) Perfe	ormance of services or me	embership or fundra	ising solicitatio	ons			1b(6)		<u>X</u>
C	Sharing o	of facilities, equipment, ma	ailing lists, other ass	ets, or paid em	ployees			<u>1c</u>		X_
d	If the ans	wer to any of the above is	"Yes," complete the	following sche	edule. Column (b) should al	ways show the fair r	narket value of the go	ods, other ass	ets,	
					ed less than fair market vali	ue in any transaction	or sharing arrangem	ent, show in		
		d) the value of the goods,				 .				
(a)Li	ne no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions	and sharing arra	angemen	its
				N/A						
			 			<u> </u>				
			 							
					·· -					——
			 			 		_		——
								<u></u>		——
										
_										
						-				
							_			——
			 							
										—
										—
22	Le the fou	andation directly or indirect	the officered with or	related to one	or more toy-exempt ergen	rations described	 			
		ndation directly of indirect i 501(c) (other than sectio			or more tax-exempt organi	izations described		Yes	X	No
		omplete the following sch		SCHOII 327 *				163		טאו ב
U	<u>11</u> 165, C	(a) Name of org			(b) Type of organization		(c) Description of rela	ntionship		
		N/A			(b) type or organization		(0) 2000	олотр		
					.,	-	· · · · ·			
		<u> </u>						· · · <u>-</u>		
						· · · · · ·	·	•		
						· ·		_		
					accompanying schedules and si			May the IRS of	iecues t	nis
Sig	in and b	elief, it is trate, correct, and con-	polete Declaration of pre	eparer (other than	taxpayer) is based on all informa	tion of which preparer ha	as any knowledge	return with the	prepare	er e
He	re 🕨	* (PISS . D	U MADU		<i>" " 1,10 X</i>	DIRECT	OR	X Yes		οN
	Sigi	nature of officer or trustee	;		Date	Title				لـــــــ
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check If F	PTIN		
				J Q	Ч		self- employed			
Pai	d	BRET LITTL	E	Dru	x ws	1119/18		P00168		
	parer	Firm's name ► HOG		LLP			Firm's EIN ► 73			
Us	e Only									
		Firm's address ► 22	22 SOUTH	UTICA	PL, SUITE 20	0				
		וזית	IT.SA OK 7	4114			Phone no 918	-745-2	222	

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of th	e organization	Employer identification number				
	CA	RMICHAEL FOUNDATION	20-6744052			
Organizatio	on type (check or					
Filers of:		Section:				
Form 990 o	r 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990-P	F	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation					
-	a section 501(c)(7	covered by the General Rule or a Special Rule. /), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions			
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	•			
Special Rul	les					
sec any	ctions 509(a)(1) ar y one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to a 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, c, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amoundine 1 Complete Parts I and II	or 16b, and that received from			
yea	ar, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III				
yea is c pui	ar, contributions of checked, enter he rpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled mo ere the total contributions that were received during the year for an exclusively religious plete any of the parts unless the General Rule applies to this organization because it re- etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc.,			
but it must a	answer "No" on F	t isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

CARMICHAEL	DOINID A MITON
CAKMICHARD	LOUNDATION

CARMI	CHAEL FOUNDATION)-6 <u>74405</u> 2
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MICHAEL R. & CAROL B. WILSON 3901 COACHMAN ROAD EDMOND, OK 73013	\$\$_	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occupiete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

CARMICHAEL FOUNDATION

20-6744052

	CHAEL FOUNDATION		0/44032
Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	1000 SH EXACTECH INC.		
1		 \$\$	12/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	40 SH ADVANSIX		
1			12/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	93 SH COMMERCEHUB SERIES A STOCK		
1			
		\$\$	12/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	500 SH DR PEPPER SNAPPLE GROUP		
<u>1</u>		_	
		s16,315.	12/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	187 SH COMMERCEHUB INC C		
		\$\$	12/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	561 SH LIBERTY INTERACTIVE CORP		
1		_	
		s31,169.	12/19/17
723453 11-01	17		90 990-FZ or 990-PE) (2017)

Name of organization

Employer identification number

CARMICHAEL FOUNDATION

20-6744052

art II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	500 SH TIME WARNER		
_1			
		\$\$.	12/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
arti			
_			
	17	\$	90, 990-EZ, or 990-PF) (2

P	а	a	e	•

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Part IV Capital Gains and Lo	sses for Tax on Investment Income			<u>-</u>
	d describe the kind(s) of property solutions warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a 531 SH CITIGRO	UP	1		06/27/1601/03/17
	SUNSHINE PRO			04/25/1706/02/17
c 2223 SH NATURE	S SUNSHINE PRO		_ 1	01/01/1706/07/17
d 750 SH NEWELL	BRANDS			10/13/1604/05/17
e 750 SH NEWELL	BRANDS			10/13/1608/31/17
f 277 SH WALGREE				06/27/1601/17/17
	DIGITAL			03/09/1704/28/17
	DIGITAL			<u>03/09/1705/30/17</u>
	DIGITAL			03/09/1707/13/17
_ 200 SH CITIGRO				06/27/1607/03/17
	L COMPANY			06/27/1607/03/17
	LL DOWNS			01/08/06 12/18/17
m 750 SH WATTS W				12/03/9901/03/17
n 1759 SH CENTUR				12/18/1212/18/17
0 CAPITAL GAINS	T			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)
a 32,096.		20,616.		11,480.
b 3,003.		2,315.	<u> </u>	688.
c 29,338.		22,522.		6,816.
d 36,162.		38,536.		-2,374.
e 36,103.		34,266.	·	1,837.
f 23,318.		22,059.		1,259.
g 45,422.		37,939.		7,483.
h 22,828.	<u> </u>	18,559.		4,269.
23,505. 13,665.		18,559. 7,765.		5,900.
k 31,962.		24,691.		7,271.
$\frac{k}{1}$ 34,064.		14,207.		19,857.
40 242		40,224.		9,119.
m 49,343.				61,724.
$\frac{1}{0}$ 1,187.				1,187.
	ng gain in column (h) and owned by t	he foundation on 12/31/69	(I) Los:	ses (from col. (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	Gains (excess o	f col. (h) gain over col. (k), ot less than "-0-")
a				11,480.
b				688.
С				6,816.
d				-2,374.
е				1,837.
1				1,259.
9				7,483.
<u>h</u>				4,269.
<u> </u>				4,946.
<u></u>				5,900.
k			- <u></u>	7,271.
1				19,857.
<u>m</u>				9,119.
n	ļ			61,724.
0		Death Inc. 7		1,187.
2 Capital gain net income or (net ca	• • • • • • • • • • • • • • • • • • •	١ ١	2	141,462.
If gain, also enter in Part I, line 8,		1 (6)		N / N
If (loss), enter "-0-" in Part I, line			3	N/A

CARMICHAEL FOUNDATION

Part XV | Supplementary Information

Part XV Supplementary Informatio				-
3. Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
FREE TO LIVE, INC.	NONE	501(C)3	ANIMAL SANCTUARY	
P O BOX 5884		ORGANIZATION		
EDMOND, OK 73083				9,000
		1		
ALL HANDS VOLUNTEERS	NONE	501(C)3	ASSISTANCE	
6 COUNTY ROAD, SUITE 6		ORGANIZATION		
MATTAPOISETT, MA 02739	<u> </u>	 		10,000
		1		
HOPE CENTER OF EDMOND	NONE	501(C)3	ASSISTANCE	
P O BOX 2915		ORGANIZATION		
EDMOND, OK 73083	 	ļ	 	2,000
NEADS	NONE	501(c)3	ASSISTANCE	
P O BOX 1100		ORGANIZATION		
PRINCETON, MA 01541				5,000
HOUSTON FOOD BANK	NONE	501(C)3	ASSISTANCE	
535 PORTWALL		ORGANIZATION		
HOUSTON, TX 77029				5,000
OKLAHOMA MEDICAL RESEARCH FOUNDATION	NONE	501(C)3	ASSISTANCE	
825 NE 13TH ST.		ORGANIZATION		
OKLAHOMA CITY, OK 73104			 	2,000
OKLAHOMA MUSUEMS ASSOCIATIONS	none	501(C)3	ASSISTANCE	
2100 NE 52ND ST.		ORGANIZATION		
OKLAHOMA CITY, OK 73111				3,000
			1	
PEPPERS RANCH	NONE	501(C)3	ASSISTANCE	
P ,O BOX 3814		ORGANIZATION		
EDMOND, OK 73083		 	 	3,000
FISHER HOUSE FOUNDAQTION	NONE	501(C)3	ASSISTANCE	
12300 TWINBROOK PKWY, SUITE 410		ORGANIZATION		
ROCKVILLE, MD 20852	 			5,000
POSITIVE TOMORROWS	NONE	501(C)3	ASSISTANCE	
P.O. BOX 61190	1	ORGANIZATION	1	,
OKLAHOMA CITY, OK 73146		<u> </u>	<u> </u>	2,000
Total from continuation sheets		_ 		91,000

CARMICHAEL FOUNDATION

Part XV Supplementary Information

Name and address (home or business) any foun	ation) It is an individual, relationship to dation manager initial contributor 501(C)3 DRGANIZAT:	of contribution	Amount 5,000.
Name and address (home or business) REGIONAL FOOD BANK OF OKLAHOMA 3355 S. PURDUE OKLAHOMA CITY, OK 73137 RONALD MCDONALD HOUSE OF OKC 1301 NE 14TH STREET OKLAHOMA CITY, OK 73117 SMILE TRAIN, INC. 41 MADISON AVE., 28TH FLOOR NEW YORK, NY 10010 ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	relationship to dation manager nitial contributor Foundat status recipie	of contribution and	
REGIONAL FOOD BANK OF OKLAHOMA 3355 S. PURDUE OKLAHOMA CITY, OK 73137 RONALD MCDONALD HOUSE OF OKC 1301 NE 14TH STREET OKLAHOMA CITY, OK 73117 SMILE TRAIN, INC. 41 MADISON AVE., 28TH FLOOR NEW YORK, NY 10010 ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	ntial contributor recipie 501(C)3 ORGANIZAT:	FOOD BANK	5,000.
3355 S. PURDUE OKLAHOMA CITY, OK 73137 RONALD MCDONALD HOUSE OF OKC 1301 NE 14TH STREET OKLAHOMA CITY, OK 73117 SMILE TRAIN, INC. 41 MADISON AVE., 28TH FLOOR NEW YORK, NY 10010 ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	ORGANIZAT:		5,000.
1301 NE 14TH STREET OKLAHOMA CITY, OK 73117 SMILE TRAIN, INC. 41 MADISON AVE., 28TH FLOOR NEW YORK, NY 10010 ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	501(C)3		
41 MADISON AVE., 28TH FLOOR NEW YORK, NY 10010 ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	DRGANIZAT:	ASSISTANCE ION	3,000.
HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	501(C)3 ORGANIZAT:	ASSISTANCE	2,000.
THE CHILDRENS CENTER INC 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008 THE FISTULA FOUNDATION 1922 THE ALAMEDA, SUITE 302	501(C)3 prganizat:	ASSISTANCE	2,000.
1922 THE ALAMEDA, SUITE 302	501(C)3 ORGANIZAT:	ASSISTANCE ION	5,000.
	501(C)3 ORGANIZAT:	ASSISTANCE ION	2,000.
HOUSTON SPCA NONE 7007 OLD KATY ROAD HOUSTON, TX 77024	501(C)3 ORGANIZAT:	ASSISTANCE	5,000.
TULSA DEBATE LEAGUE, INC. NONE 5225 S. HARVARD, APT. D TULSA, OK 74135	501(C)3 ORGANIZAT:	ASSISTANCE	3,000.
DIRECT RELIEF NONE 6100 WALLACE BECKNELL ROAD SANTA BARBARA, CA 93117	501(C)3 ORGANIZAT	ASSISTANCE ION	5,000.
EXCHANGE CLUB CENTER NONE 2180 UNION AVE. MEMPHIS, TN 38104	501(C)3 DRGANIZAT:	ASSISTANCE	10,000.

CARMICHAEL FOUNDATION

Part XV Supplementary Information 3. Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient PAWS FOR LIFE, INC. NONE 501(C)3 ASSISTANCE P O BOX 3211 ORGANIZATION EDMOND, OK 73083 3,000. Total from continuation sheets

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FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECU	RITIES S'	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB &	27,615.	1,18	7. 26,428	. 26,428.	
TO PART I, LINE 4 =	27,615.	1,18	7. 26,428	26,428.	
FORM 990-PF		ACCOUNTI	NG FEES	S	гатемент 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING SERVICES		2,400.	0.		0.
TO FORM 990-PF, PG 1	, LN 16B	2,400.	0.	<u> </u>	0.
FORM 990-PF		TAX	ES	S	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES WITHHE FEDERAL INCOME TAXES		251. 909.	251.		0.
TO FORM 990-PF, PG 1	, LN 18	1,160.	251.		0.
FORM 990-PF		OTHER E	XPENSES	Si	PATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT OVERHEAD	FEES -	6,000.	6,000.		0.
TO FORM 990-PF, PG 1	, LN 23	6,000.	6,000.	········	0.
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FORM 990-PF CORPORATE S'	TOCK	STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
1000 SHARES CBS CORPORATION CL A NEW	34,026.	59,340.
1050 SHARES FLOWSERVE CORP	35,284.	44,237.
750 SH WATTS WATER TECH	40,225.	56,963.
500 SH IAC/INTERACTIVE	20,945.	61,140.
800 SH LIBERTY MEDIA	47,405.	31,728.
1000 SH DISH NETWORK CORP	35,790.	47,750.
166 SH MADISON SQUARE GARDEN	20,427.	35,001.
1236 SH LIBERTY GLOBAL CORP C	33,003.	41,826.
812 SH LIBERTY GLOBAL, INC.	13,935.	29,102.
900 SH ARCHER - DANIELS	47,016.	36,072.
200 SH CHURCHILL DOWNS INC	18,522.	46,540.
1600 SH AT&T	48,178.	62,208.
1443 SH DISCOVERY COMM SER C	13,487.	30,548.
731 SH CISCO SYSTEMS INC	19,628.	27,997.
612 SH WALT DISNEY CO	59,045.	65,796.
421 SH ALLERGAN	88,801.	68,867.
59 SH ALPHABET, INC.	40,129.	62,151.
710 SH BRISTOL MYERS	39,967.	43,509.
300 SH CITIGROUP	11,648.	22,323.
1272 SH COMCAST	40,616.	50,944.
617SH DOW CHEMICAL	30,470.	43,943.
500 SH DR. PEPPER SNAPPLE	38,918.	48,530.
366 SH FACEBOOK	40,031.	64,584.
1355 SH GENL ELECTRIC	40,007.	23,645.
531 SH TJX COMPANIES	40,603.	40,600.
226 SH WALGREENS	17,997.	16,412.
800 SH WESTAR ENERGY	36,173.	42,240.
40 SH ADVANSIX	1,686.	1,683.
1497 SH APACHE CORP	72,617.	63,203.
93 SH COMMERCEHUB	2,092.	2,045.
187 SH COMMERCEHUB	3,850.	3,850.
480 SH DANAHER CORP	39,974.	44,554. 41,216.
488 SH ELI LILLY & COMPANY	39,577.	
1000 SH EXACTECH INC	49,700. 31,169.	49,450. 30,429.
561 SH LIBERTY INTERACTIV	24,438.	28,887.
2501 SH NATURES SUNSHINE	50,443.	42,444.
13736 SH SERVICE COURCE INTL	45,290.	45,735.
500 SH TIME WARNER	1,074.	1,090.
57.5343 SH POWERSHARES FUNDAME H	4,318.	4,975.
178.0625 SH SCHWAB EMERGING MARKETS	17,323.	19,704.
578.3248 SH SCHWAB INTERNATIONAL	10,706.	10,756.
206.6865 SH SCHWAB US AGGREGATE BOND 864.9566 SH SCHWAB US LARGE CAP ETF	48,177.	55,167.
259.6708 SH SCHWAB US SMALL CAP ETF	15,949.	18,109.
56.8521 SH SCHWAB US TIPS ETF	3,159.	3,151.
19.1502 SH VANGUARD TOTAL	1,040.	1,041.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,414,858.	1,671,485.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AMERICAN CENTURY ONE	COST	76,807.	90,871.
TOTAL TO FORM 990-PF, PART II, LINE	13	76,807.	90,871.

		
FORM 990-PF	PART XV - LINE 1A	STATEMENT 7
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

MICHAEL R. WILSON CAROL B. WILSON