Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

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.

F	or caler	ndar year 2017 or tax year beginning		, and e	ending		
_	lame of for					identification number	
٧	Villiam C	Chapman Family Foundation, Inc		- 1			
		d street (or PO box number if mail is not delivered to street address)	Room/s	suite		46-1625414	
Р	ost Offic	ce Box 1425	Ì	1	B Telephone	number (see instruction	ns)
_	City or town	n, state or province, country, and ZIP or foreign postal code					
Α	rdmore	OK	73402	- 1			
F	oreign cou	untry name Foreign province/state/county	Foreign postal	code	C If exempts	on application is pendin	g, check here
			_				_
G	Chec	k all that apply 🔲 Initial return 🔲 Initial return	of a former public ch	arıtv	D 1. Foreign	organizations check h	ere ▶ 🔲
		Final return Amended ret			2 Foreion	n organizations meeting	the 85% test
		Address change	е		•	nere and attach computa	
Ŧ	Chec	k type of organization X Section 501(c)(3) exempt pri		PY	E If private f	oundation status was te	rminated under
Г	-		able private foundation		section 50	7(b)(1)(A), check here	▶□
		narket value of all assets at J Accounting method		crual			
		f year (from Part II, col (c), Other (specify)	M Cash	Cidai		dation is in a 60-month	
\		6) ► \$ 59,206 (Part I, column (d) must be	on cash hasis \		under sec	tion 507(b)(1)(B), check	mere L
	Part I	Analysis of Revenue and Expenses (The total of	on cash basis ;				(d) Disbursements
-	arti	amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and	(b) Net	investment	(c) Adjusted net	for charitable
		equal the amounts in column (a) (see instructions))	expenses per books		come	ıncome	purposes
_	<u> 1</u>	·	8,000	\$ 4	4 "	8 8 × ×	(cash basis only)
	2	Contributions, gifts, grants, etc , received (attach schedule) Check ▶□ if the foundation is not required to attach Sch B	8,000		**************************************	· · · · · · · · · · · · · · · · · · ·	
	3	Interest on savings and temporary cash investments	*** ` * ** **	<u> </u>	<u> </u>	·	
	4	Dividends and interest from securities					* *
	5a	Gross rents					\$ 4. · · *
	b	Net rental income or (loss)	C. 3. S.	N. 1. 7. 7.		·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•		Net gain or (loss) from sale of assets not on line 10	****	77.	· · · · · · · · · · · · · · · · · · ·	** ** **	***
Revenue	b	Gross sales price for all assets on line 6a	7 No. 2 1 No. 3	* * *	1 2 2	** , **,	
9	7	Capital gain net income (from Part IV, line 2)			· · · · · ·		7.7.
ď	8	Net short-term capital gain		N.	- (Ta	**	N ()
	9	Income modifications		.15	4 %		
	10a	Gross sales less returns and allowances	3. 7. 3. 3	3.4	¥6, :		
	Ь	Less Cost of goods sold		7/1	3.8.		V.A. 4.78
	С	Gross profit or (loss) (attach schedule)	×	14	**. 1/2		[45] N/
	11	Other income (attach schedule)					*
<u> </u>	12	Total. Add lines 1 through 11	8,000		0	0	· ** ** ** **
<u> </u>	2 13	Compensation of officers, directors, trustees, etc					
N 9	14	Other employee salaries and wages					
® ₫	15	Pension plans, employee benefits					
≽ָֿ	र् 16a	Legal fees (attach schedule)			DEC	Fr. /===	
≱່ຮ	d b	Accounting fees (attach schedule)	225		1111		225
∌ફે	С	Other professional fees (attach schedule)		57			
<u> </u>	17	Interest		19	APR	13-12	
\$.0	18	Taxes (attach schedule) (see instructions)		W			
₹:	19	Depreciation (attach schedule) and depletion			Ann		
<u>ي</u>	20	Occupancy		<u>L.</u>	<u>UUUU</u>	M. III	
≱ږږ	21	Travel, conferences, and meetings					
2	22	Printing and publications					
5	23	Other expenses (attach schedule)	9				9
Ţ.	24	Total operating and administrative expenses.					
Ž	5	Add lines 13 through 23	234		0	0	234
MAY USING A Administrative Exp.	25	Contributions, gifts, grants paid	3,270			"XXXXXXX	3,270
_		Total expenses and disbursements. Add lines 24 and 25	3,504		0	0	3,504
	27	Subtract line 26 from line 12		4 Y			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	а	Excess of revenue over expenses and disbursements	4,496	A in			
	b	Net investment income (if negative, enter -0-)	34 22 22 22 A	V 10 5	0	1. 14 . 1, 24 17 18 18 18 18 18 18 18 18 18 18 18 18 18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	l c	Adjusted net income (if negative, enter -0-)	1 3 3 1 3 3 3 4 4 4		v vel	0	

5 Decreases not included in line 2 (itemize) ▶ dollar rounding

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

59,206

5

6

Part	IV Capital Gains and	Losses for Tax on Investm	ent l	ncome				
		nd(s) of property sold (for example, real esta use, or common stock, 200 shs MLC Co)	ite,		(b) How acquired P—Purchase D—Donation		Date acquired io , day, yr)	(d) Date sold (mo , day, yr)
1a								
b								
<u>c</u>								
<u>d</u>				.	<u> </u>			
e	 T	48 December allowed		(-) O4			(h) C-	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale		٠,,	n or (loss) (f) minus (g))
a								· · · · · · · · · · · · · · · · · · ·
b								
С								
<u>d</u>								
<u>e</u>	<u></u>					ļ		
	Complete only for assets sh	nowing gain in column (h) and owned	by the	foundation	on 12/31/69			(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			sofcol(ı) (ı), ıfany			t less than -0-) or from col (h))
		20 3. 12.0 1130	_			 		
a								
			_			<u> </u>		
d						l		
е								
2	Capital gain net income or	(net capital loss) If gain, a	also e	nter in Par	t I, line 7			
_		t if (loss),		r -0- ın Par	t I, line 7 ∫	2		0
3		or (loss) as defined in sections 12						
	_	line 8, column (c) See instruction	ns If (loss), ente	r-0- in }			
Part	Part I, line 8	der Section 4940(e) for Redu	ood	Toy on N	at Investment	3		0
		vate foundations subject to the sec						
(1 01 0	phional asc by domestic priv	vace loundations subject to the sec	50011-	יטייט (מ)	on het mvestme	110 1110	onne)	
If sec	tion 4940(d)(2) applies, leav	re this part blank						
		section 4942 tax on the distributab				e perio	od?	Yes X No
If "Ye		ualify under section 4940(e) Do no		-	<u>' </u>			
1		unt in each column for each year,	see t	he instructi	ons before makii	ng any	entries	
	(a) Base period years	(b)		Not value a	(c) f noncharitable-use as	anoto .	Dis	(d) stribution ratio
Cal	endar year (or tax year beginning in)			net value o			(col_(b)	divided by col (c))
	2016		2,610 2,205			5,220		0 047265
	<u>2015</u> 2014		,205	·		5,469 7,710		0 039752 0 024209
	2013		,820			7,880		0 038012
	2012		0		·	538		0 000000
-								
2	Total of line 1, column (d)						2	0 149238
3	Average distribution ratio f	or the 5-year base period—divide	the to	otal on line	2 by 5 0, or by			
	the number of years the fo	undation has been in existence if	less ti	han 5 year	s		3	0 029848
							. [
4	Enter the net value of none	charitable-use assets for 2017 fror	n Par	t X, line 5			4	53,768
_								
5	Multiply line 4 by line 3						5	1,605
6	Enter 1% of not investmen	it income (1% of Part I, line 27b)					_	O
6	Enter 176 of het investmen	it income (176 of Part I, line 27b)					6	
7	Add lines 5 and 6						7	1,605
•	with a with a						- +	
8	Enter qualifying distribution	ns from Part XII, line 4					8	3,504
		ter than line 7, check the box in Pa	art Vi,	line 1b, ar	nd complete that	part u	sing a 1% ta	x rate See the
	Part VI instructions							

Form 99	0-PF (2017) William C Chapman Family Foundation, Inc	46	6-1625414	Pa	ge 4
Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	ructio	ns)		
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	1			
	here ► 🗓 and enter 1% of Part I, line 27b		*	1	ŧ
С	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		_이	
3	Add lines 1 and 2	3			
4 5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		-	
6	Credits/Payments	3		-	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a	•`		>	,
b	Exempt foreign organizations—tax withheld at source 6b	1.	, , ,	ş. İ	
С	Tax paid with application for extension of time to file (Form 8868) 6c	`~*\ 'Y	** *	`	· 3.
d	Backup withholding erroneously withheld 6d 6d	3	72.	3 2	×.
7	Total credits and payments Add lines 6a through 6d	7		0	
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax	11		0	
Part			1%	Vaal	Na.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did in participate or intervene in any political campaign?	ıt	1a	Yes	No_X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		la la	-+	^
	Instructions for the definition				Х
	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				
С	Did the foundation file Form 1120-POL for this year?		[1c]		Χ
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				* %
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed	1, 1	! !	Ø.
	on foundation managers > \$		- <u>-</u> -\	\$.	. 1 .
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		2		<u>X</u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		*	(, %	2 *
J	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	200	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?		4b	N/A	
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		** '	* **	×
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		* * %	, l	, ``i
	By language in the governing instrument, or			1	N. \$ 1
	 By state legislation that effectively amends the governing instrument so that no mandatory directions the state between the state of th	nat	A. L.S.	ا ت	. Y's
-	conflict with the state law remain in the governing instrument?		6	X }	
7 8a	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 Gene	eral			"
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	,, u i	8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	0 5		:)
	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV			- 10 K	
	"Yes," complete Part XIV		9		<u>x</u> 2
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing t	heir			-
	names and addresses		10	X	

19 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 10 Did the foundation comply with the public inspection frequiements for its annual returns and exemption application? 10 Did the foundation comply with the public inspection frequiements for its annual returns and exemption application? 11 The books are in care of ▶ Colin Chapman Telephone no ▶ \$80,0223 3772. 12 Located at ▶ Post Office Box 1425 Ardrogro CK 13 Section 4947(a)(1) nonexempt charitable 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 15 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities or other financial account in a foreign country? 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities or other financial account in a foreign country? 16 Set the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country? 17 See the mistructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country? 18 Statements Regarding Activities for Which Form 4720 May Be Required 19 File Form 4720 if any Item is checked in the "Yee" Column, unless an exception applies. 19 Lingage in the sale or exchange, or leasing of property with a disqualified person? 19 See Ix No. (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? 19 See Ix No. (4) Flay compensation to, or pay or reimburse the expenses of, a disqualified person? 19 See Ix No. (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person. 20 File Arground or the acception of the acts fall to qualify under the exceptions described in Regulations section	Part	VII-A Statements Regarding Activities (continued)			
12 Dit the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If Yes, "fatch statements See instructions Website address ▶ N/A 13 Dot the foundation comply with the public inspection requirements for its annual returns and exemption application? ★ 13 X ★ 14 The books are in care of ▶ Colin Chapman Telephone in ▶ 580 223 9772 14 The books are in care of ▶ Colin Chapman Telephone in ▶ 580 223 9772 15 Section 437(a)(1) nonexemptic charitable 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 and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued turn, and a supplied person? 15 Statements Reparding Activities for Which Form 4720 May Be Required 16 File Form 4720 if any Item is checked in the "Yes" column, unless an exception applies. 17 Juring the year, did the foundation (either directly or indirectly) in Item and the properties of the series of the series of a disqualified person? 18 Juring the year, did the foundation of reason of property with a disqualified person? 19 Juring the year is the series or a facilities to (or accept them from) a disqualified person? 20 Juring the year is the year is the expenses of, a disqualif	11			Yes	No
person had advisory privileges? If "Yes," attach statement. See instructions 12			11		<u> </u>
13	12	·			
Website address ► N/A. The books are in care of ► Colin Chapman Located at ► Post Office Box 1429 Ardmore OK ZIP+4 ► 73402 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-evempt interest received or accrued during the year 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ► Part VIES Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 10 Long 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 No. (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No. (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No. (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception, Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) 15 If any answer is "Yes" to 14(1)-4(0), did any of the acts fall to quality under the exceptions described in Regulations section 54 494(1(0)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? 2 Taxes on f			-		<u> </u>
14 The books are in care of	13		13	Х	
Located at P Post Office Box 1425 Ardmore OK Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of fax-exempt interest received or accrued during the year and enter the amount of fax-exempt interest received or accrued during the year 15 4 any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, secunities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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) (6) Agree to pay money or property to a government official? (Exception, Check "No" if 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? 2 Taxes on failure to distribute income (section 4942(a)(3) or 49	14		0772		
Section 4947(a)1') nonexempt charitable trusts fling 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 All any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and fling requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VILS Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (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? (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) b If any answer is "Yes" to 1a(1)—(6), did any of the acts fall to quality under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster	17	*	3112		
and enter the amount of tax-exempt interest received or accrued during the year At any time during calendary year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VILBS Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 flay item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept if from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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) 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 organizations relying on a current notice regarding disaster assistance? See instructions organizations relying on a current notice regarding disaster assistance? See instructions organizations relying on a current notice regarding disaster assistance? See instructions organizations relying on a current notice regarding disaster assistance? See instructions organizations relying on a current notice regarding disaster assistance? S	15	***********************************	 -	·	<u> </u>
over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VILB. Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any Item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person?					
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VILB Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any Item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly) 10 Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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) (or make any of either available for the benefit or use of a disqualified person) (e) 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)	16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No_
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Uring 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 No disqualified person? Yes No disqualified person? Yes No (2) Borrow money from. lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No (5) Transfer any income or assets to a disqualified person (6) Transfer any income or assets to a disqualified person (7) Yes No (8) Transfer any income or assets to a disqualified person (9) Yes No (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 ferminating within 90 days) Yes No (7) Yes No (8) Yes No (9) Yes No (9) Yes No (9) Yes No (10) Ye		over a bank, securities, or other financial account in a foreign country?	16		Χ_
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation clether directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? yes No (2) Borrow money from. lend money to, or otherwise extend credit to (or accept it from) a disqualified person? yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? yes 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 No (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 peniod after termination of government service, if ferminating within 90 days) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to quality under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions 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? 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(3) (and years) 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? If "Yes," list the years ** 20		See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the		*	* ;
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chantable purpose that had not been femore and not good and the year beginning in 2011		charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		x

Form 9	90-PF (2017) William C Chapman Family Fou	ndatior	n, Inc					46-16	325414	F	age 6
Part	VII-B Statements Regarding Activities	for W	hich Form	4720 ľ	May Be Re	quire	d (contin	rued)			
5a	During the year, did the foundation pay or incur and (1) Carry on propaganda, or otherwise attempt to i			section	4945(e))?		Yes	X No			
	(2) Influence the outcome of any specific public ele- directly or indirectly, any voter registration drive		see section 4	955), oı	to carry on	١,	Yes	—	,		; •
	(3) Provide a grant to an individual for travel, study	, or oth	er sımılar pur	poses?			Yes	X No	,		,
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions	charita	able, etc , orga	anızatıo	n described	ın	☐ Yes	X No	,		i 2
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil			terary, (or education	nal	☐ Yes	X No			, , , , , , , , , , , , , , , , , , ,
b	If any answer is "Yes" to 5a(1)–(5), did any of the t Regulations section 53 4945 or in a current notice							d in	<i>s</i> 5b	N/A	
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the for because it maintained expenditure responsibility for	disast oundati r the gi	er assistance on claim exer rant?	, check nption f	here		☐ Yes	► □ No		** 	** \
6a	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any fur on a personal benefit contract?				pay premiui	ns	☐ Yes	X No			(*); (*);
b	Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870	directl	y or indirectly,	on a p	ersonal ber	efit cor	ntract?		6b	Microso	Х
7a b	At any time during the tax year, was the foundation a palf "Yes," did the foundation receive any proceeds o	r have	any net incom	e attrib	utable to th			☐ No	7b	Ŷ,	*5%
Part	VIII Information About Officers, Directo	ors, Tı	rustees, Fo	undati	ion Manag	gers, l	lighly P	aid Em	ploye	es,	
	and Contractors						:				
1	List all officers, directors, trustees, and foundat		e, and average		mpensation		Contribution				
	(a) Name and address	hou	ırs per week	i (If	not paid,	empl	oyee benefit	plans	(e) Expe	nse ac	
See A	ttached Statement	devo	ted to position	er i	ter -0-)	and det	erred compe	ensation			
			00		0						
			-								-
			00		0						
			00		0						
			00		0						
2	Compensation of five highest-paid employees (other t		cluded		see ins	structions	s). If no	ne, ent	er	
	"NONE."			_							
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	eek	(c) Comper	isation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	nse ac allowan	
NONE											
<u></u>		·									
Total	number of other employees paid over \$50,000							•			

William C Chapman Family Foundation, Inc

Form 990-PF (2017)

46-1625414

Form 990-PF (2017) William C (Chapman Family Foundation, Inc	46-162	25414 Page 7
	fficers, Directors, Trustees, Foundat	ion Managers, Highly Paid En	nployees,
and Contractors (cor	ntinued) contractors for professional services. See	instructions If none enter "NON	<u> </u>
~	person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of others receiving over \$5	0,000 for professional services	<u> </u>	
Part IX-A Summary of Direct	Charitable Activities		
	activities during the tax year. Include relevant statistical inferences convened, research papers produced, etc.	formation such as the number of	Expenses
1 NONE			
2			
3			
Part IX-B Summary of Progra	am-Related Investments (see instruct	ions)	
Describe the two largest program-related investm	ents made by the foundation during the tax year on lines	1 and 2	Amount
1 NONE			

All other program-related investments. See instructions

Total. Add lines 1 through 3

Form **990-PF** (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundatio	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes		
а	Average monthly fair market value of securities	1a	_0
b	Average of monthly cash balances	1b	54,587
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	54,587
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	54,587
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	819
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	53,768
6	Minimum investment return. Enter 5% of line 5	6	2,688
Part		tions	
1	Minimum investment return from Part X, line 6	1	2,688
2a	Tax on investment income for 2017 from Part VI, line 5	4	
b	Income tax for 2017 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,688
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,688
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2,688
Part	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	1 1a	3,504
b	Program-related investments—total from Part IX-B	1b	
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	<u> </u>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,504
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		0,004
•	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,504
~	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when the column (b) in subsequent years when calculating when the column (b) is a subsequent year.	ــــــــــــــــــــــــــــــــــــــ	
	qualifies for the section 4940(e) reduction of tax in those years		

1 Distributable amount for 2017 from Part XI, 2017 2018 2019 2019 2019 2019 2019 2019 2019 2019	rait	Ondistributed income (see instructions				
Ine 7 In		Distributed and such for 2047 from Dark VI				
2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only b Total for prior years 2 0 2 2 20 3 Excess distributions carryover, if any, to 2017 a From 2013 b From 2015 c From 2015 c From 2016 f Total of lines 3a through e Qualifying distributions for 2017 from Part XII, line 4 * \$ 3.504 Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2017 distributable amount cequired—see instructions) d Applied to 2017 distributable amount experies—see instructions) d Applied to 2017 distributable amount experies—see instructions of the same amount must be shown in column (a); b Enter the net total of each column as indicated below: a Copus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4 from line 2 a Taxable amount—see instructions f Undistributed income for 2016 Subtract line 4 from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract line 4 from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract line 4 from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract line 4 from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract line 4 from line 2 Taxable amount—see instructions f Undistributed income for 2016 Subtract line 4 from line 2 Taxable amount—see instructions f Undistributed income for 2016 Subtract line 5 distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) f Excess from 2016	1		- Corpus	Tears prior to 2010		
a Enter amount for 2016 only b Total for prory ears 20 20 20 3 Excess distributions carryover, if any, to 2017 a From 2013 c From 2013 c From 2014 d Prom 2015 e From 2016 e From 2016 f Total of lines 3a through e Qualifying distributions for 2017 from Part XII, line 4 * * * * * 3.504 a Applied to 2016, but not more than line 2a b Applied to undistributed mome of prory ears (Election required—see instructions) c Treated as distributions out of corpus for Remaining amount distributed out of corpus (Election required—see instructions) d Applied to 2017 distributable amount Remaining amount distributed out of corpus for Remaining amount distributed out of corpus for Remaining amount distributed out of corpus for Remaining amount of prory ears undistributed income for which a notice for lourning (d). Efriter the ent total of each column as indicated below: In a \$1 from line 2 to \$2 ft. Corpus Add lines 3f .4c, and 4e Subtract line 5 b Prior years undistributed income Subtract line 4 from line 2 a Issaelie amount—see instructions d Undistributed income for 2016 Subtract line 4 from line 2a Issaelie amount—see instructions c Undistributed income for 2016 Subtract line 4 from line 17 his amount must be distributed in 2018 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 1700(pt/16) or 4424(g) (2) (election may be required—see instructions Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) Excess form 2016 Excess from 2016	_	•				2,000
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(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	_			And the second		- 1 M
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a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017	40		5 1 * 8/1		* * * * * * * * * * * * * * * * * * *	
b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017		· · · · · · · · · · · · · · · · · · ·				
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Form 9	90-PF (2017) William C Chapman F	amily Foundation,	Inc	_	46-162	5414 Page 10
Part	XIV Private Operating Foundat	ions (see instru	ctions and Part	VII-A, question 9)	-	N/A
1a	If the foundation has received a ruling o					
	foundation, and the ruling is effective for	r 2017, enter the d	ate of the ruling	· •		
b	Check box to indicate whether the foundation			ribed in section	4942(j)(3) of 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year	1	Prior 3 years	/	
	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	(4)	(2) 2010	(0) 2010	(6, 2517)	0
b	85% of line 2a				/	0
_			-	_	_/	
С	Qualifying distributions from Part XII, line 4 for each year listed					0
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities		i			0
е	Qualifying distributions made directly			 		
C	for active conduct of exempt activities					
	Subtract line 2d from line 2c		1			0
_			-	/		0
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter			/		
	(1) Value of all assets			/		0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test—enter		/			
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section	/	1			
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from	/		-		<u> </u>
	an exempt organization					0
						0
Part	(4) Gross investment income	. /Camplete thi		a farmalation ba	d 65 000 as as	0
Part	Supplementary Information any time during the year—	•		ie foundation na	a \$5,000 or mor	e in assets at
1	Information Regarding Foundation M		<u> </u>			
· 	List any managers of the foundation wh	•	I more than 2% of	the total contribution	ns received by the f	oundation
u	before the close of any tax year (but only				•	oundation
34/11 -		•		, ,		
	m C Chapman Colin Chap		Belinda Mo		Scott Chapma	
b	List any managers of the foundation wh					of the
	ownership of a partnership or other entit	ty) of which the fol	indation has a 10%	% or greater interest		
none						
2	Information Regarding Contribution,					
	Check here ► X if the foundation on	ly makes contribut	ions to preselecte	d charitable organiz	ations and does no	t accept
	unsolicited requests for funds. If the fou			ndıvıduals or organı	zations under other	
	conditions, complete items 2a, b, c, and	d See instruction	S			
a	The name, address, and telephone num	ber or email addre	ess of the person t	o whom application	s should be address	sed
	,			- I- I		-
b	The form in which applications should b	e submitted and in	formation and ma	terials they should in	nclude	***
~		- sasmitted und II		-5.1aio aloy siloulu II	Totale	
с	Any submission deadlines					
C	Any Submission deadines					
d	Any restrictions or limitations on awards	s such as by geog	raphical areas cha	aritable fields kinds	of institutions or of	her
_	factors	, , , , , , , , , , , , , , , , , , , ,			J. 11.00.101101101 01	

Form 990-PF (2017)

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Du		ed for Fu	ture Payment	
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 busines	or substantial contributor	recipient		_1
a Paid during the year				
The Goddard Center 401 First Street		PC	Operating Support	270
Ardmore, OK 73401		Ì		
Salvation Army		PC	Operating Support	750
123 A Street SW			1	
Ardmore, OK 73401				
Sunshine Industries		PC	Operating Support	750
500 Park Street SE Ardmore, OK 73401				
Oak Hall Episcopal School		PC	Operating Support	750
2815 Mount Washington Rd			Special support	
Ardmore, OK 73401				-
Carter County Group Home		PC	Operating Support	750
516 Frisco Lane				
Ardmore, OK 73401		ļ		Į.
		}		
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			1	
				
b Approved for future payment		т	<u> </u>	3,270
None				
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Total		L	<u> </u>	3b 0
।०।ता			▶ 3	ומכ

(d) Related or exempt function income (See instructions)		
0 0	513, or 514 (d)	function income
0 0	mount	(See instructions)
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ee instructions)		

	rt XVI-A Analysis of Income-Producing A	<u> Activities</u>			.	
Ente	er gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt function income
_		Business code	Amount	Exclusion code	Amount	(See instructions)
1	Program service revenue			 		
	ab	-				
		-	-	 		
			-	+		
						
	e	-				L
	g Fees and contracts from government agencies	-				L
2	g Fees and contracts from government agencies Membership dues and assessments			-		
3	Interest on savings and temporary cash investments		 -	†		
4	Dividends and interest from securities				<u> </u>	
5	Net rental income or (loss) from real estate	***	*	~~	* % ,.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	a Debt-financed property	37 3 300 2	3. 3. /	3 8 8 3%		
	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					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					
	С		·-			
	d					
	е		7.0	1	-	
12	Subtotal Add columns (b), (d), and (e)		0		0	0
	Total. Add line 12, columns (b), (d), and (e)				13	0
(Se	e worksheet in line 13 instructions to verify calculatio	ns)				
Pa	rt XVI-B Relationship of Activities to the	Accomplishme	ent of Exempt	Purposes	_	
	Explain below how each activity for which inco	ome is reported in c	olumn (e) of Part)	KVI-A contributed	importantly to the	
	▼ accomplishment of the foundation's exempt p	urposes (other than	by providing fund	s for such purpos	es) (See instruction	ons)
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Form 990-PF (2017) William C Chapman Family Foundation, Inc. Page 13 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) (2) Other assets 1a(2) Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations ☐ Yes ☒ No described in section 501(c) (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule (a) Name of organization (c) Description of relationship (b) Type of organization Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below? Here See instructions X Yes N Signature of officer or trustee

Pnnt/Type preparer's name

Larry A Pulliam, CPA

PO Box 38, Springer, OK 73458

Larry A Pulliam

Firm's address

Paid

Preparer

Use Only

PTIN

P01071908

Check X if

self-employed

Firm's EIN ▶ 73-1610332

Date

2/7/2018

Phone no

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

William C Chapman Family	Foundation, Inc 46-1625414	
Organization type (check o		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(c)	covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See	
instructions		
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a entributions.	
Special Rules		
regulations under s 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line I that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	
contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ne year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III	
contributor, during t contributions totaled during the year for a	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ne year, contributions exclusively for religious, charitable, etc., purposes, but no such I more than \$1,000. If this box is checked, enter here the total contributions that were received in exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the less to this organization because it received nonexclusively religious, charitable, etc., contributions ore during the year.	
Caution: An organization th	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,	

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

3chedule B (Folili 930, 930-E.Z., 01 930-F.F.) (2017)	ı aye ı
Name of organization	Employer identification number
William C Chapman Family Foundation, Inc	46-1625414
Part I Contributors (see instructions) Use duplicate copies of Part Lif additional space	is needed

Part I	art I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	Belinda Morris 312 E Street, NW Ardmore OK 73401 Foreign State or Province Foreign Country	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

Part I, Line 16b (990-PF) - Accounting Fees

		225	0	0	225
1			<u> </u>		Disbursements
	•	Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description_	Books	Income	Income	(Cash Basis Only)
1	Larry Pulliam CPA - Form 990PF Filing	225			225

Part I, Line 23 (990-PF) - Other Expenses

	9	0	0	9
	Revenue and):	Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 Postage	9	0		9

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William C Chapman Family Foundation, Inc.

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Part VII-A, Line 10 (990-PF) - Substantial Contributors

1	Foreign Country	
	Zıp Code	73401
	State	OK 73
	Cıty	Ardmore
	Street	treet, NW
Check "X"	If Business	2
	Name	1 Belinda Morris 312 E S

William C. Chapman Family Foundation, Inc. Form 990PF

Part VIII Line 1

46-1625414

Name and Address	Title	Hrs/Week Compensation	Benefits	Exp. Acct	
William C Chapman PO Box 1425 Ardmore, OK	President Director	1	0	0	0
Colin A. Chapman PO Box 1425 Ardmore, OK	Sec./Treas Director	1	0	0	0
Belinda Chapman-Morris PO Box 1425 Ardmore, OK	V. Pres Director	1	0	0	0
Edward Scott Chapman PO Box 1425 Ardmore, OK	Director	1	0	0	0
lan B. Chapman PO Box 1425 Ardmore, OK	Director	1	0	0	0