Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service ▶ 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.

Open to Public Inspection

For	calen	dar year 2017 or tax year beginning	, 201	7, and	ending		, 20
		undation				r Identification numbe	r
The	Jurren	s Family Foundation				46-4567267	
		d street (or P.O. box number if mail is not delivered to street address)	Room	/surte	B Telephon	e number (see instructi	ons)
123	16-A N	orth May Avenue	Sul	te 120		(405) 706 - 348	6
		n, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pendi	
Okl	ahoma	City, OK 73120				ion application to portal	
			of a former public	charity	D 1 Foreign	n organizations, check l	here ▶ 🗍
_		☐ Final return ☐ Amended r	•]	•	
		☐ Address change ☐ Name char				n organizations meeting here and attach compu	
H	Check	type of organization: Section 501(c)(3) exempt pi		PCV		foundation status was	
		n 4947(a)(1) nonexempt charitable trust			section 5	07(b)(1)(A), check here	▶□
		narket value of all assets at J Accounting method					
		f year (from Part II, col. (c),	. E Odsii E A	ooi da		ndation is in a 60-mont ction 507(b)(1)(B), check	
	line 16		on cash basis)		"		
_	art I	100,010	Off Gabit Educity	Γ	J	· · · · · · · · ·	(d) Disbursements
	JI C 1	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		tinvestment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	i	ncome	ıncome	purposes (cash basis only)
	1		00.000	 			
03	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check ▶ ☐ if the foundation is not required to attach Sch. B	38,000	 			
111	3	·					
77	4	Interest on savings and temporary cash investments Dividends and interest from securities			4 646	*	
	l -		1,846	 	1,846		
~	5a	Gross rents	····	 			
:=	Ь	Net rental income or (loss)		 			<u> </u>
∑ ≅	6a	Net gain or (loss) from sale of assets not on line 10		 			
Revenue 7017	_b	Gross sales price for all assets on line 6a		ļ			
- <u>Ş</u>	7	Capital gain net income (from Part IV, line 2)		 	1,667		
	8	Net short-term capital gain					
<u>.</u>	9	Income modifications		ļ			
r	10a	Gross sales less returns and allowances			<u>,</u>		
•	l p	Less: Cost of goods sold		-			
•	C	Gross profit or (loss) (attach schedule)		<u> </u>			
	11	Other income (attach scheaule)					
		亞otal. (Ado lines) 12的的ugh 引	39,846	<u> </u>	3,513		
	13	Compensation of officers, directors, trustees, etc.				<u> </u>	
benses	14	Other employee salaries and wages		 			
ĕ	15	Pension plans, employee benefits		 		· · · · · · · · · · · · · · · · · · ·	
	16a	Legal fees (attach schedule)		_		· · · · · · · · · · · · · · · · · · ·	
ē	b	Accounting fees (attach schedule)	<u> </u>	├			
Ę	С	Other professional fees (attach schedule)		<u> </u>			
Operating and Administrative Ex	17	Interest		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
ais	18	Taxes (attach schedule) (see instructions)	308	斗	308		
Ē	19	Depreciation (attach schedule) and depletion		+-			
₫	20	Occupancy	137	4			137
70	21	Travel, conferences, and meetings		<u> </u>			
a	22	Printing and publications	15	<u> </u>			15
Ð	23	Other expenses (attach schedule)	365	<u> </u>	340		25
¥tir	24	Total operating and administrative expenses.	S-7/-	1	648		
era		Add lines 13 through 23	४%	ļ	9 40		177
Č	25	Contributions, gifts, grants paid	3,450	<u> </u>			3,450
_	26	Total expenses and disbursements. Add lines 24 and 25	4,27	<u> </u>	648		3,627
	27	Subtract line 26 from line 12:		1			
	a	Excess of revenue over expenses and disbursements	35,57	<u> </u>			
	b	Net investment income (if negative, enter -0-) .		<u> </u>	2,865		
	c	Adjusted net income (if negative, enter -0-)					



Рa	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	70,937	35,099	35,099
	2	Savings and temporary cash investments	25		
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		-	
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
Se	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)	•		
,	b	Investments - corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			 -
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		73,102	74,476
	14	I and building and anti-count back back			
	• •	Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) ►			
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	70,962	108,201	109,575
一	17	Accounts payable and accrued expenses	70,302	100,201	100,070
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)	<u> </u>		
=	22				
1	23	Other liabilities (describe Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here			
es.		and complete lines 24 through 26, and lines 30 and 31.			,
Š	24	Unrestricted			ļ
Net Assets or Fund Balances	25	Temporarily restricted			
m '	26	_ `			
5	20	Foundations that do not follow SFAS 117, check here ▶ ✓			
Ī		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	70.060	100 001	
Š		Paid-in or capital surplus, or land, bldg., and equipment fund	70,962	108,201	
Se	28 29	Retained earnings, accumulated income, endowment, or other funds		 	
As	30	Total net assets or fund balances (see instructions)	70.000	400.004	
et'	31	Total liabilities and net assets/fund balances (see	70,962	108,201	
Ž	"	instructions)	70.000	100 001	
Pα	rt III	Analysis of Changes in Net Assets or Fund Balances	70,962	108,201	
		I net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (mus	t agree with	
•		of year figure reported on prior year's return)			70.000
9		er amount from Part I, line 27a			70,962
3		er amount from Part 1, tine 2/a			35,571
4		lines 1, 2, and 3			1,668
5		reases not included in line 2 (itemize) ▶		5	108,201
S A	Tota	reases not included in line 2 (itemize) ► If net assets or fund balances at end of year (line 4 minus line 5)—	Part II column (h) lir	ne 30 6	400.000
_	TOTA	a not assorts of fully balances at GIO of year (into 4 fillinus line 5)—	. а.с.п, «минин (D), III	10 JU 0	108,201

Part	V Capital Gains and	d Losses for Tax on Investme	nt Income				
		ind(s) of property sold (for example, real estatuse; or common stock, 200 shs. MLC Co.)	te,	(b) How acquired P—Purchase D—Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a	Pasethrough K-1 ST Capita	al Gain		P			
ь	Passtrhough K-1 LT Capita	al Gain		Р			
<u>C</u>							
<u>d</u>							
Θ		r			ļ		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss)) minus (g))
<u>a</u>	2,618	· · · · · · · · · · · · · · · · · · ·	· · - · ·		 		2,618
<u>b</u> _	951		···			 ,	-951
c d							
— <u>-u</u>			 				
	Complete only for assets she	owing gain in column (h) and owned by	the foundation	on 12/31/69.		I) Gains (Col	. (h) gain mınus
	(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69	, ,	s of col. (i) . (i), ıf any		i. (k), but not	less than -0-) or rom col. (h))
а	*						
<u>b</u>							
<u>c</u>							
<u>d</u>				· · · · · · · · · · · · · · · · · · ·	 	 -	
θ_		(If gain als	so enter in Pa	rt Lline 7			. <u></u>
2	Capital gain net income of	NY (DAT CONTOLINGE) (* *	nter -0- in Pa	,	2		1,667
3	If gain, also enter in Parl	in or (loss) as defined in sections 1: t I, line 8, column (c). See instructi	ions. If (loss)	, enter -0- in (3		
Part		der Section 4940(e) for Reduc				<u> </u>	
Was t		ve this part blank. e section 4942 tax on the distributal qualify under section 4940(e). Do n			base per	iod?	☐ Yes 🗹 No
1	Enter the appropriate am	ount in each column for each year;	see the instr	uctions before m	aking an	y entries.	
Cale	(a) Base period years andar year (or tax year beginning ii	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a	ıssets		(d) tribution ratio divided by col. (c))
	2016	1,1	953	3	33,923		0575716
	2015		743	2	26,748	:	0277778
	2014	1,1	037		3,450		3057971
	2013						
	2012						****
2	Total of line 1, column (d	l)			. 2	<u>:</u>	.3911465
•		foundation has been in existence if			·)	;	.1303822
4	Enter the net value of no	ncharitable-use assets for 2017 from	m Part X, line	5	. 4	1	72,699
5	Multiply line 4 by line 3				. 5	<u>i</u>	9,479
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)			. 6	-	2
7	Add lines 5 and 6				. 7	<u>, </u>	9,508
8		ons from Part XII, line 4			. 8		3,627
	Part VI instructions.	ator dialiting 1, Chock the DOX III r	au vi, III 15 II	o, and complete	ulat palt	uoniy a l	v lax rate. See the

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-	-see in	structio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	4 1	10				
	Date of ruling or determination letter: 2014/01/08 (attach copy of letter if necessary—see instructions)						
b							
	here ▶ ☐ and enter 1% of Part I, line 27b						
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		o			
3	Add lines 1 and 2	;	5	7			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	,		0			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5	;	5	7			
6	Credits/Payments:						
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a		Orna Si	1			
Ь	Exempt foreign organizations—tax withheld at source 6b						
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c	W. 100	4				
_d	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d			0			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			<u> </u>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		5	_			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be: Credited to 2018 estimated tax 0 Refunded 11			0			
	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ 0 Refunded ▶ 11 VII-A Statements Regarding Activities	<u> </u>		0			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	did it	Ye	No			
	participate or intervene in any political campaign?	<u> </u>	1a	1			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Se instructions for the definition	e the	1b				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material published or distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?		1c	~			
d							
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$						
Ө	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important on foundation managers. ▶ \$	osed					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	✓ ×			
	If "Yes," attach a detailed description of the activities.	7					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	cles of	3				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	卜	4a	~			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	「	4b	~			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	[5	V			
	If "Yes," attach the statement required by General Instruction T.			C.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1					
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory direction conflict with the state law remain in the governing instrument?	s that	6 2				
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 III, col. (c), and part	art XV	7 /				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	9					
	Oklahoma						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge (or designate) of each state as required by General Instruction G? If "No," attach explanation	J***	8b 🗸				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j						
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "complete Part XIV		9				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	g their					
	names and addresses	!	10 /	ı			

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		~
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		,
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	
	Website address ▶ http://www.jurrensff.org		_	
14	The books are in care of ▶ Sam Jurrens Telephone no. ▶ (40)	5)706	3486	
	Located at ► 12316-A N May Ave, Suite 120, Oklahoma City, OK ZIP+4 ►	7312	0	<u></u>
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-exempt 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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	<u> </u>	~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_		I NI -
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V 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 		į	
	(4) Pay compensation to, or pay of reinfiburse the expenses 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 fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	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		~
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)):			
a	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?			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20, 20, 20, 20, 20, 20, 20, 20, 20, 20			
3a				
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.)	3b		
4a		4a		~
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		/

_	c
Page	C

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 N	May Be Re	equire	d (contir	nued)		
5a		e year, did the foundation pay or incur a	ny amo	ount to:						Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No (2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
•	directly or indirectly, any voter registration drive?										
	(3) Provid	de a grant to an individual for travel, stud	dy, or o	ther similar p	ourpose	s?		Yes	✓ No		
	(4) Provid	de a grant to an organization other than	a char	itable, etc., o	organiza	ation descr	ibed in	Yes	☑ No		
	(5) Provid	de for any purpose other than religious,	charita	ıble, scientifi	c, litera	ry, or educ	ational				
_		ses, or for the prevention of cruelty to o						☐Yes		1	
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions											
	•	tions relying on a current notice regardin	•	•						5b	
С	_	swer is "Yes" to question 5a(4), does the	-						- L		
•		it maintained expenditure responsibility						Yes	□No		
	If "Yes,"	attach the statement required by Regula	itions s	ection 53.49	45-5(d).	•					
6a		oundation, during the year, receive any					miums	_			
_	•							☐ Yes	_ ☑ No		
b		oundation, during the year, pay premium o 6b, file Form 8870.	ns, dired	ctly or indired	ctly, on	a personal	benefit	contract	?.	6b	
	At any tim	e during the tax year, was the foundation a						Yes	✓ No	j	
		did the foundation receive any proceeds								7b	<u>l</u>
Par		Information About Officers, Direction and Contractors	tors, T	rustees, F	oundat	ion Mana	agers,	Hignly I	ald E	mpioyees,	'
1	List all o	fficers, directors, trustees, and found	ation n	nanagers ar			ation. S	ee instr	uctions		
		(a) Name and address	hour	e, and average rs per week and to position	``(lf n	npensation ot paid, ter -0-)	emplo	Contribution yee benefit erred comp	plans	(e) Expense a other allows	
Sam J	urrens										
		ve, Ste 120 Oklahoma City, OK 73120	Chairm	an (2)		0					
	Jurrens				ŀ	i					
12316	A N May A	ve, Ste 120 Oklahoma City, OK 73120	Vice-Ch	nairman (1)		0					
				-,							
2	Compen "NONE."	sation of five highest-paid employed	es (oth	er than tho	se inclu	uded on li	ne 1—:	see instr	uction	s). If none,	enter
				(b) Title, and a				(d) Contrib employee	utions to	(e) Expense a	ccount
	(a) Name and	d address of each employee paid more than \$50,00	Ю	hours per v devoted to p	veek	(c) Comper	nsation	plans and compen	deferred	other allows	
NONE											
								<u> </u>		<u> </u>	
Total	number o	f other employees paid over \$50,000 .		<u> </u>		L		<u> </u>	. •		

	nformation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors <i>(continued)</i>	ployees,
	nest-paid independent contractors for professional services. See instructions. If none, enter "NONI	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE		

		ļ

otal number o	f others receiving over \$50,000 for professional services	<u> </u>
		L
Part IX-A	Summary of Direct Charitable Activities	
	ion's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of id other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1		
]
2		
3		
		1
		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	J
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
		<u> </u>
	m-related investments. See instructions.	1
3		ļ
		1
otal Add line	s 1 through 3	
otal. Add lifte		Form 990-PF (201
		HOME STATE FOR

Part		gn foun	dations,
	see instructions.)		
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	71,805
b	Average of monthly cash balances	1b	2,001
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	73,806
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	73,806
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,107
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	72,699
6	Minimum investment return. Enter 5% of line 5	6	3,635
Part		oundati	ons
1	Minimum investment return from Part X, line 6	1	3,635
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b 0		
C	Add lines 2a and 2b	2c	57
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,578
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	3,578
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	3,578
Part			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	10	2.22
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a 1b	3,627
ь	Program-related investments—total from Part IX-B	10	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		_
_	• •	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	20	
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,627
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	ااا	
_	Enter 1% of Part I, line 27b. See instructions	5	29
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,598
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g wheth	er the foundation

art	Undistributed Income (see instruction	ns)		· · · · · · · · · · · · · · · · · · ·	
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
_	line 7				3,578
2	Undistributed income, if any, as of the end of 2017:				· ·
a	Enter amount for 2016 only			0	
Ь	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				•
b	From 2013				
С	From 2014		i		,
d	From 2015	i			1
е	From 2016 844				
f	Total of lines 3a through e	844			
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$ 3,627				i
а	Applied to 2016, but not more than line 2a .				
b	Applied to undistributed income of prior years			,	
	(Election required—see instructions)		a		
С	Treated as distributions out of corpus (Election				
_	required—see instructions)	o			1
d	Applied to 2017 distributable amount	· · · · · · · · · · · · · · · · · · ·			2,734
9	Remaining amount distributed out of corpus	893			2,704
5	Excess distributions carryover applied to 2017	844			844
3	(If an amount appears in column (d), the same	044			044
	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	893			
D	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		 		
	amount - see instructions		0		
	Undistributed income for 2016. Subtract line		<u> </u>		
•	4a from line 2a. Taxable amount—see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines			-	
•	4d and 5 from line 1. This amount must be				
	distributed in 2018				_
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 not				
	applied on line 5 or line 7 (see instructions) .	0	1	<u> </u>	
9	Excess distributions carryover to 2018.	<u> </u>			
•	Subtract lines 7 and 8 from line 6a	893			
10	Analysis of line 9:	593		 	
	Excess from 2013				}
a	Excess from 2014			i	
b					
C	Excess from 2015				
d	Excess from 2016				
е	Excess from 2017 893			I	

Part	XIV Private Operating Founda	tions (see instru	ctions and Part V	/II-A, question 9)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	r 2017, enter the da	te of the ruling			2
b	Check box to indicate whether the four	ndation is a private	operating foundati	on described in se	ction 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(6) lotal
	each year listed					•
b	85% of line 2a					
С	Qualifying distributions from Part XII,				مو	
	line 4 for each year listed				ي م	
d	Amounts included in line 2c not used directly				7	
	for active conduct of exempt activities				y"	}
е	Qualifying distributions made directly			,	/	
	for active conduct of exempt activities.			<i>f</i>		
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets			1	· · · · · · · · · · · · · · · · · · ·	
	(2) Value of assets qualifying under	:	j	/		
	section 4942(j)(3)(B)(i)					ļ
D	"Endowment" alternative test—enter 2/3 of minimum investment return shown in		f			
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter:					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					1
	securities loans (section					
	512(a)(5)), or royalties)		/			
	(2) Support from general public and 5 or more exempt					
	organizations as provided in	/				
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization	/				
Part	(4) Gross investment income XV Supplementary Information	n (Complete th	io nort only if th	o foundation b	ad &E 000 as m	ore in eccets at
rait	any time during the year-			e louridation n	au \$5,000 or m	ore in assets at
1	Information Regarding Foundation		3.1			
-	List any managers of the foundation		ted more than 2%	of the total contr	ihutions received	by the foundation
_	before the close of any tax year (but o					by the logituation
Sam aı	nd Betsy Jurrens	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	List any managers of the foundation	who own 10% or	more of the stock	k of a corporation	n (or an equally la	rge portion of the
	ownership of a partnership or other er					- 9 - p
NA				,		
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, et	c., Programs:		
	Check here ▶ ☑ if the foundation	only makes contri	butions to presele	ected charitable	organizations and	does not accept
	unsolicited requests for funds. If the fo					
	complete items 2a, b, c, and d. See in	structions.				
а	The name, address, and telephone nu	ımber or email add	ress of the person	to whom applica	tions should be a	ddressed:
			•			
b	The form in which applications should	be submitted and	l information and r	naterials they sho	uld include:	_ -
					- <u> </u>	
C	Any submission deadlines:					
						·
d	Any restrictions or limitations on aw	vards, such as by	geographical are	eas, charitable fie	elds, kinds of ins	titutions, or other
	factors:					

Form 990-PF (2017)				Page 11
Part XV Supplementary Information (con				
3 Grants and Contributions Paid During		1		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose or grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
Frontline Church 1104 N Robinson Ave Oklahoma City, OK 73103	NA	501(c)3	Religious	1,200
Positive Tomorrows P.O. Box 61190 Oklahoma City, OK 73146	NA	501(c)3	Community Support	1,250
Hearts for Hearing 11500 N. Portland Ave Oklahoma City, OK 73120	NA	501(c)3	Community Support	1,000
Total			<u>, ▶</u>	3a 3,450
b Approved for future payment				
Total	<u></u>			26

Pai	t XVI	-A Analysis of Income-Producing Ac	UVIUOS				
nte	r gross	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt function income
			Business code	Amount	Exclusion code	Amount	(See instructions.)
1	-	am service revenue:					
	. —						
	D _						
	ິ –						
	<u> </u>				ļ		
					 	<u> </u>	<u> </u>
	' =				 	<u> </u>	
•	-	ses and contracts from government agencies					
_		bership dues and assessments					
3		st on savings and temporary cash investments ends and interest from securities			14	1 046	· · · · · · · · · · · · · · · · · · ·
4 5		ends and interest from securities			14	1,846	
3		ebt-financed property	<u> </u>		<u> </u>		
		ot debt-financed property			-		
Æ		ental income or (loss) from personal property				 	
7		rinvestment income			 	 	<u> </u>
8		or (loss) from sales of assets other than inventory			 	-	
9		ncome or (loss) from special events	-				
10		s profit or (loss) from sales of inventory					
		revenue: a					
•	b				 		
			 				
	ď				1		
	e _						
12	Subto	otal. Add columns (b), (d), and (e)				1,846	
							
13	Total					. 13	1,846
See	works	sheet in line 13 instructions to verify calculation	ns.)			. 13	1,846
See Pa	works	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works	sheet in line 13 instructions to verify calculation	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
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See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
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See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
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See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
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See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
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See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		
See Pa	works rt XVI e No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	ns.) \ccomplishm	ent of Exemp	t Purposes		

		Oi gai ii zau	0113											
1	in s		firectly or indirectly ther than section										Yes	No
а	Tran	sfers from the rep	porting foundation t	o a nonch	aritable exen	npt orga	ınization	of:						
	(1)	Cash										1a(1)		>
	(2)	Other assets .										1a(2)		
b	Othe	er transactions:												
			a noncharitable ex						•			1b(1)		~
			ets from a noncharit		ıpt organizat	ion			•			1b(2)		~
	(3) F	Rental of facilities	, equipment, or oth	er assets								1b(3)		~
		Reimbursement a	-									1b(4)		~
		oans or loan gua										1b(5)		~
			ervices or members		_				•			1b(6)		~
C		-	quipment, mailing l		_	_	-		•			1c	ليبيا	~
d			of the above is "Ye											
			ther assets, or serv											
			on or sharing arrang	-										
(a) Line	no.	(b) Amount involved	(c) Name of none	chantable exe	mpt organizatio	n	(d) Descri	ption of transfe	rs, tran	sactions	s, and sh	aring arr	angeme	ents
	_													
							 							
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					·			 						
			<u> </u>		~									
			<u> </u>											
2a b	desc	cribed in section	I ectly or indirectly a 501(c) (other than s e following schedule	ection 501	•					-		☐ Yes	; V	No
		(a) Name of organ	nization	T	(b) Type of orga	ınızation			(c) Des	cnption	of relati	onship		
								····						
-				-							•			
			,											
		$\overline{}$	•									-		
			declare that I have examin								ny knowl	edge and	belief, it	is true,
Sign	con	/ /\/ h	laration of preparer (other t	nan taxpayen	is based on all inf	ormation o	rwnicn prep	arer nas any kno	w1өадө.	• [May the	IRS disc	uss this	retum
Here	_	nature of officer or tru			3/22/2018 Date	Chai Title	rman & T	reasurer		— [with the See instr	preparer : uctions.	shown b ∐ Yes	xelow? □No
Paid Prep	arer	Print/Type pyepare	r's name	Preparer	s signature			Date		Check self-en	if if inployed	PTIN		
Use									Firm's	s EIN ▶				
	 J	I rimin addison							Ohan					

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

Section:						
Coations						
Section:						
501(c)() (enter number) organization						
4947(a)(1) nonexempt charitable trust not treated as a priv	ate foundation					
☐ 527 political organization						
✓ 501(c)(3) exempt private foundation						
4947(a)(1) nonexempt charitable trust treated as a private	foundation					
- cortogo, asasso private isancatasi						
(7), (8), or (10) organization can check boxes for both the General	l Rule and a Special Rule. See					
n filing Form 990, 990-EZ, or 990-PF that received, during the yea or property) from any one contributor. Complete Parts I and II. S contributions.						
n described in section 501(c)(3) filing Form 990 or 990-EZ that me sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (f nd that received from any one contributor, during the year, total c of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-E	Form 990 or 990-EZ), Part II, line contributions of the greater of (1)					
n described in section 501(c)(7), (8), or (10) filing Form 990 or 990- the year, total contributions of more than \$1,000 exclusively for reconal purposes, or for the prevention of cruelty to children or animal	eligious, charitable, scientific,					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	□ 4947(a)(1) nonexempt charitable trust not treated as a private □ 527 political organization □ 501(c)(3) exempt private foundation □ 4947(a)(1) nonexempt charitable trust treated as a private □ 501(c)(3) taxable private foundation □ 601(c)(6) taxable private foundation □ 701(c)(7) taxable					

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).

Name of organization
The Jurrene Family Foundation

Employer identification number 46-4567267

Part 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	Sam and Betsy Jurrens 12316-A N. May Ave, Suite 120 Oklahoma City, OK 73120	\$	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				
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 3 Name of organization **Employer identification number** The Jurrens Family Foundation 46-4567267 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) FMV (or estimate) (d) from Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Date received Description of noncash property given Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.)

Name of organization

	ganization s Family Foundation	· · · · · · · · · · · · · · · · · · ·			Employer identification number 46-4567267		
art III	(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the list duplicate conjugate of Port III if additional contributions of \$1,000 or less for the list duplicate conjugate of Port III if additional conjugate conj	the year from any one completing Par year. (Enter this in	one contributor. (t III, enter the tota formation once. S	Complete of the control of the contr	columns (a) through (e) and vely religious, charitable, etc.,		
a) No.	Use duplicate copies of Part III if addi						
from Part I	(b) Purpose of gift (c) Use of gift			(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and	1 ZIP + 4	Relation	ship of tra	nsferor to transferee		
a) No. from	(A) D	(-) II		(A Day			
Part I	(b) Purpose of gift	(c) Use o		(d) Description of how gift is he			
·							
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Des	scription of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relatio				nsferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			

-	(e) Transfer of gift						
	Transferee's name, address, and	Relation	ship of tra	nsferor to transferee			
				Schedule	B (Form 990, 990-EZ, or 990-PF) (20		