# 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

Fo	r cálen	dar year 2017 or tax year beginning	, 2	017, and	ending		, 20
	ame of for				A Employe	r identification number	er
J	EROME	B MILLER FAMILY FOUNDATION			73-14	138698	,
N	umber and	d street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephon	e number (see instruct	ions)
D	о вох	x 278			(405)	260-0339	
		n, state or province, country, and ZIP or foreign postal code				ion application is pend	ng check here ▶
	•	E OK 73044			O in exempt	ion application is pone	g, 000
-			n of a former put	olic charity	D 1 Foreign	organizations, check	here 🏲 🗀
G	Cileck	Final return Amended	•	ond onancy	i. Toreign	r organizations, check	niere
		Address change Name cha				organizations meeting	
	Oh a ala	type of organization: X Section 501(c)(3) exempt p		n 17 V		here and attach compu foundation status was	
H		· · · · · · · · · · · · · · · · · · ·			section 5	07(b)(1)(A), check here	▶□
<u> </u>		n 4947(a)(1) nonexempt charitable trust Other ta			-		
ı		parket value of all assets at J Accounting method	J. A Casii	Accruai		ndation is in a 60-mont stion 507(b)(1)(B), chec	
		year (from Part II, col. (c), Other (specify)			under sec	stion 507 (b)(1)(b), chec	Killere P
	line 16	· · · · · · · · · · · · · · · · · · ·	e on cash basis.)		<u> </u>		
L	Part I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		ncome	income	purposes (cash basis only)
_		the amounts in column (a) (see instructions) )	ļ	rabition or a		and the first of the property of the contract	(Cash Dasis Only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	50,291	L.			
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B	Mark Mark State	is Mark		Here you prove that the	
)	3	Interest on savings and temporary cash investments	15		15.	15.	
	4	Dividends and interest from securities	2,960	).	2,960-		
	5a	Gross rents				RECEIVE	
<u>a</u>	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10			1444118		HOPELS
Revenue	b	Gross sales price for all assets on line 6a					
Ž	7	Capital gain net income (from Part IV, line 2)	Address.	led.	529.	CACIDENTIAT	
à	8	Net short-term capital gain					
	9	Income modifications	38675762468	7 <b>7.</b> 7.		•	Brahilling Ka
	10a	Gross sales less returns and allowances	BEAT ACTION			THE CANADA THE CANADA THE	A CONTRACTOR
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					NEW YORK
	12	Total. Add lines 1 through 11	53,266	5.	3,504.	15.	76-17 (66-1) (46
	13	Compensation of officers, directors, trustees, etc.					
ğ	14	Other employee salaries and wages					
Sesueux	15	Pension plans, employee benefits					
		Legal fees (attach schedule)					
Ú	il h	Accounting fees (attach schedule)	1,235	5.	1,235.	1,235.	
2	С	Other professional fees (attach schedule)		1	<del>*-</del> <del>-</del>		
ţ	17	Interest		1			
Ţ,	18	Taxes (attach schedule) (see instructions)					
2	19	Depreciation (attach schedule) and depletion					
È	20	Occupancy				· · · · · · · · · · · · · · · · · · ·	
4	21	Travel, conferences, and meetings					
Onerating and Administrative	22	Printing and publications				· 1·	
- 7	23	Other expenses (attach schedule) See Stmt.	506	5.	506.	506.	
<u> </u>	24	Total operating and administrative expenses.	- 500				
7	!   - '	Add lines 13 through 23	1,741		1,741.	1,741.	
. 6	25	Contributions, gifts, grants paid	12,795				
ع ز	26	Total expenses and disbursements. Add lines 24 and 25	14,536		1,741.	1,741.	
<u> -</u>	27	Subtract line 26 from line 12:	14,55				
2	a a	Excess of revenue over expenses and disbursements	38,730	100000000000000000000000000000000000000	1 35 1 6 25		
	b	Net investment income (if negative, enter -0-) .	38,730		1 762		
ัก	C	Adjusted net income (if negative, enter -0-)			1,763.		
	, .		] 中国中央共和国国际共享的	100 Car 100 Ca	A 100 State 100		A CONTRACTOR OF THE PARTY OF

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

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Part II		Balance Sheets Attach	hed schedules and amounts in the description column	Beginning of year		ס מר	r year	
			d be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value	
	1		ng	35,975.	27,950	٥.	27,950.	
	Ż	Savings and temporary ca	ash investments					
	3	Accounts receivable ▶					17.1 × 17.1	
		Less: allowance for doubt	tful accounts >					
	4	Pledges receivable ▶	tful accounts ▶					
		Less, allowance for doubt	tful accounts ▶					
	5							
	6		fficers, directors, trustees, and other					
		disqualified persons (attac	ch schedule) (see instructions)					
	7	Other notes and loans receiva	able (attach schedule) ▶					
			accounts >					
S	8		· · · · · · · · · · · · · · ·					
Assets	9	Prepaid expenses and de	eferred charges					
As	10a	•	government obligations (attach schedule)					
•	b		stock (attach schedule)	60,706.	72,65	3.	164,756.	
	C	•	bonds (attach schedule)				•	
	11		and equipment: basis ▶					
			n (attach schedule) ▶					
	12		oans					
	13		ch schedule)					
	14		nent basis ▶					
		Less: accumulated depreciat	tion (attach schedule) ▶					
	15		•	l				
	16	Total assets (to be	completed by all filers—see the					
		instructions. Also, see pag	ge 1, item l)	96,681.	100,60	3.	192,706.	
	17		crued expenses					
	18	, ,						
ē	19							
Ħ	20		rs, trustees, and other disqualified persons					
Liabilities	21		es payable (attach schedule)					
	22	Other liabilities (describe						
	23	Total liabilities (add lines	s 17 through 22)					
			SFAS 117, check here ▶ □					
alances		and complete lines 24 th	hrough 26, and lines 30 and 31.					
2	24							
曺	25	Tomporarily rootrioted						
Ä	26	Permanently restricted .						
Net Assets or Fund B		•	t follow SFAS 117, check here ► 🗵	,				
Ţ		and complete lines 27 th	hrough 31.					
ō	27	Capital stock, trust princip	pal, or current funds	96,681.	100,603	3.		
ţ	28		, or land, bldg., and equipment fund		•			
Se	29		lated income, endowment, or other funds				· ·	
¥	30	•	balances (see instructions)	96,681.	100,603	3.		
et	31		net assets/fund balances (see					
Z		instructions)	<u></u>	96,681.	100,603	3.		
Pa	rt III		s in Net Assets or Fund Balances	• • • • • • • • • • • • • • • • • • • •				
			ices at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with		***	
			prior year's return)		-	1	96,681.	
2		r amount from Part I, line 2			<u> </u>	2	38,730.	
3			n line 2 (itemize) ► DIFFERENCE IN BAS	SIS AND FMV OF CON	_	3	-34,808.	
4				<del></del>		4	100,603.	
_			0.00			5		
6	Tota	I net assets or fund balanc	2 (itemize) ► ces at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30	6	100,603.	
			<del> </del>				222 5=	

Part	IV Capital Gains and	Losses for Tax on Investm	ent Income			
				(c) Date acquire (mo., day, yr)		
1a	LONG-TERM CAPITAL	GAIN DISTRIBUTIONS		P	07/01/201	6 12/31/2017
<u>b</u>						
<u>c</u>	<del></del>					
d						
e			····	<u> </u>	···	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		) Gain or (loss) blus (f) minus (g))
a	529.			0.		529.
<u>b</u>						
<u>c</u>					<del>- · · - · - · - · - · - · - · - · -</del>	<del></del>
<u>d</u>			<del></del>			
е	Complete only for assets sho	I Dwing gain in column (h) and owned l	ny the foundation	on 12/31/69		(0-1-0-)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col (k), bu	(Col. (h) gain minus at not less than -0-) <b>or</b> ses (from col. (h))
a						529.
b						
С						
d						
е						
2	Capital gain net income o		also enter in Pa enter -0- in Pa		2	529.
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instruc	ctions. If (loss)	, enter -0- ın )		
					3	
Par		ler Section 4940(e) for Reduvate foundations subject to the				
Was		e this part blank. section 4942 tax on the distribut qualify under section 4940(e). Do			ease period?	☐ Yes 🗷 No
1		ount in each column for each year			king any entri	
<u> </u>	(a)	(b)	1, 300 the mone	<del></del>	lang any char	(d)
Cal	Base period years endar year (or tax year beginning in	Administration of the same distributions	Net value of	(c) f noncharitable-use as	sets (col	Distribution ratio (b) divided by col (c))
	2016	1,305,51	11	48,6		26.838068
	2015	706,07		53,0		13.315041
	2014	115,99		1,995,3		0.058132
	2013	277,47		1,812,1		0.153120
	2012	22,17		1,827,2		0.012136
		22/11		1,021,2	<del></del>	0.012130
2	Total of line 1, column (d)				. 2	_ 40.376497
3		for the 5-year base period-divi				
	_	oundation has been in existence		•	, i i	8.075299
4	Enter the net value of non	charitable-use assets for 2017 fr	om Part X, line	5	. 4	31,484.
5	Multiply line 4 by line 3				. 5	254,243.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. 6	18.
7	Add lines 5 and 6				. 7	254,261.
8		ns from Part XII, line 4				12,795. a 1% tax rate. See the

Part					TO - 3	SCC II	13410	CUO	113)
1a	Exempt operating foundations described in section 4940(d)(2), check here Date of ruling or determination letter (attach copy of letter if n						N/	A C	
ь`	Date of ruling or determination letter (attach copy of letter if n Domestic foundations that meet the section 4940(e) requirements in Pa			"	1				ALX:
	here ▶ 🖾 and enter 1% of Part I, line 27b		. <b>.</b>	. []				a de la	语语
С	AND								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found	dations	only; others, enter	-0-)	2				<u> </u>
3	Add lines 1 and 2				3			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found			· -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero of	or less	, enter -U	• •	5	ALCON:	List Var.	<b>0.</b> जनसम्ब	1960si./5
6	Credits/Payments: 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	7,400.	ı	#×			41.12	
a b	Exempt foreign organizations—tax withheld at source	6b	7,400.	$\vdash$					
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.	$\vdash$					
ď	Backup withholding erroneously withheld	6d			J.		il.		
7	Total credits and payments. Add lines 6a through 6d				7		7,4	00.	
8	Enter any penalty for underpayment of estimated tax. Check here 🗌 if	f Form	2220 is attached		8				Ī
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount			. ▶ [	9			_	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the		int overpaid	. ▶	10		7,4		ļ
11		000.	Refunded	<b>&gt;</b>	11		6,4	00.	L
-	VII-A Statements Regarding Activities		tota or local logic	lation	or di	id it	<b>1</b>	Voc	No
, 1a	During the tax year, did the foundation attempt to influence any national participate or intervene in any political campaign?	ла, s 	tate, or local legis	ialion	or a		1a	162	X
b	Did it spend more than \$100 during the year (either directly or indir	ectly)	for political purpo	oses?	See	the			<del></del>
	instructions for the definition		. <b></b> .				1b		×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the published or distributed by the foundation in connection with the activities.		ities and copies of	f any i	mater	rials			
С	Did the foundation file Form 1120-POL for this year?						1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955)  (1) On the foundation. ▶ \$	anage	rs. ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year on foundation managers. ▶ \$	for po	olitical expenditure	tax in	npose	ed			
2	Has the foundation engaged in any activities that have not previously b	een re	ported to the IRS1	7.			2	in and and	X
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS incorporation, or bylaws, or other similar instruments? If "Yes," attach a continuous continu	onforn	ed copy of the cha		inicie:	s or	3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or		• •	• •	• •		4a		×
ь 5	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?			• •	•	•	4b		×
5	If "Yes," attach the statement required by General Instruction T.	lion di	ing the year: .	• •	•	•	28921	Million	TANK AND THE
6	Are the requirements of section 508(e) (relating to sections 4941 through	h 494	5) satisfied either:						
•	By language in the governing instrument, or		-,					瓣	
	• By state legislation that effectively amends the governing instrumen		nat no mandatory		ions t	that	6	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	
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	d Part	xv	7	×	
8a	Enter the states to which the foundation reports or with which it is regis	tered	See instructions.	<b>•</b>		l		1133	
b	OK If the answer is "Yes" to line 7, has the foundation furnished a copy of (or designate) of each state as required by <i>General Instruction G?</i> If "No			•					
9	Is the foundation claiming status as a private operating foundation with 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See	nin the	meaning of section	on 494	£2(j)(3	or (	8b	×	
	complete Part XIV						9		×
10	Did any persons become substantial contributors during the tax year? names and addresses	lf "Ye					10		×
									<u> </u>

Pan	VII-A Statements Regarding Activities (continued)	Francis a		,
		<b>新</b> 斯	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
_	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	<u> </u>	<u>×</u>
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	<u> </u>	×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	<u></u>
	Website address ► N/A			
14	The books are in care of ► FOUNDATION Telephone no. ► (405)	260-	0339	<del>}</del> 
	Located at ► P O BOX 278 GUTHRIE OK ZIP+4 ► 73044			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		٠	▶∟
46	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		Yes	No
16	over a bank, securities, or other financial account in a foreign country?	46	res	<del></del>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	<b>网络教育</b>	3 15 play
	the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	¥1 62 \$41.00	drigging.	Jan Jan Jan Salah
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ALTO.	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	#3#.Y		1 (1A)
	(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?			20
	(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)?			45
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			E,
	foundation agreed to make a grant to or to employ the official for a period after	-57		
	termination of government service, if terminating within 90 days.)			Silver Simble
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	*###K<	MINT *
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	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?			PERMIT
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c	a liber and see	×
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	S. T.		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			1.4
	(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		×
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	77		193.8
	<b>▶</b> 20 , 20 , 20 , 20		, " H	
<b>3</b> a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			•
	at any time during the year?			
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		<b>.</b>	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		5 (C)	19.
4 -	foundation had excess business holdings in 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ا عملون ا	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?			7.2
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	ļ	X

Pari	VII-B Statements Regarding Activitie	S TOF V	vnich Form	4/20	may be r	requir	ea (contir	iuea)			
5a	During the year, did the foundation pay or incur	any an	nount to.							Yes	No
	(1) Carry on propaganda, or otherwise attempt		-	•	•			⊠ No			
,	(2) Influence the outcome of any specific publi		ion (see sect	ion 49	55); or to c	arry on	,				
	directly or indirectly, any voter registration d	rıve?					☐ Yes	X No	<b>,</b>		
	(3) Provide a grant to an individual for travel, sti	udy, or	other sımilar	purpos	es?		☐ Yes	⊠ No	,		
	(4) Provide a grant to an organization other that	n a cha	aritable, etc.,	organiz	zation desc	ribed ir	1				
	section 4945(d)(4)(A)? See instructions .						☐ Yes	X No	,   22		
	(5) Provide for any purpose other than religious	, charit	table, scientif	ic, liter	ary, or edu	cationa	1.				
	purposes, or for the prevention of cruelty to	childre	n or anımals?	٠			□Yes	X No	, 1		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	e trans	actions fail to	qualify	under the	except	ions descri	bed ir	۱ 💮		
Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions							5b				
	Organizations relying on a current notice regard	ıng disa	aster assistar	ice, ch	eck here			▶□			ALC:
C	If the answer is "Yes" to question 5a(4), does	the fou	ndation clain	n exem	ption from	the tax	(		1		
	because it maintained expenditure responsibility	for the	e grant? .				☐ Yes	□No			
	If "Yes," attach the statement required by Regul	ations	section 53.49	45-5(d	).						
6a	Did the foundation, during the year, receive any	funds,	directly or in	directly	, to pay pro	emiums	\$				
	on a personal benefit contract?						☐ Yes	⊠ No			
b	Did the foundation, during the year, pay premiur	ns, dire	ectly or indire	ctly, or	a persona	benefi	t contract?	· .	6b		×
	If "Yes" to 6b, file Form 8870.								2017		
7a	At any time during the tax year, was the foundation	a party	to a prohibited	d tax sh	elter transac	ction?	☐ Yes	<b>⊠</b> No			
b									7b		
Part	VIII Information About Officers, Direct	ctors,	Trustees, F	ounda	tion Man	agers,	Highly P	aid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found								S.		
	(a) Name and address		e, and average irs per week		mpensation not paid,		Contributions byee benefit p		(e) Expe		
			ted to position		nter -0-)	and def	erred comper	nsation	other	allowan	ces
	DME B MILLER	PRES									
	BOX 278 GUTHRIE OK 73044		10.00	ļ	0.			0.			0.
	P ROBINSON	VP/D						_			_
	BOX 278 GUTHRIE OK 73044		1.00	<b> </b>	0.	ļ		0.			0.
	DRES K MOSLEY	DIRE						_			_
0	BOX 278 GUTHRIE OK 73044	<u> </u>	10.00		0.			0.			0.
2	Compensation of five highest-paid employe	oo (oth	or than tha	o incl	udod on li		ana landari		a) 16 m		
2	"NONE."	es (ou	er man mos	se inci	uaea on II	ne ı —	see instru	ction	s). IT no	one, e	ente
					T		(d) Contains				
	a) Name and address of each employee paid more than \$50,0	20	(b) Title, and a hours per v	verage veek	(c) Comper	sation	(d) Contribut employee b	enefit	(e) Expe	nse acc	ount,
·	,		devoted to po		(0,00		plans and de compensa		other a	llowan	ces
ONE				_			· · · · · ·				
			i								
				<del></del>		<del></del>					
			ļ								
		<u> </u>	·							<del></del>	
			1								
		<b>-</b>									
							<del></del>		<del></del>		
		·	İ								
tal r	number of other employees paid over \$50,000 .					<del></del>		<b>•</b>	0		
									orm <b>99</b> (	)_PE	2017
BAA		8E\	/ 01/03/18 PRO					,	ついい マゴし	/-rr	(201/)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
•	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total numb	per of others receiving over \$50,000 for professional services	]0
Part IX-A	Summary of Direct Charitable Activities	
	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of one and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
	REDULE ATTACHED	<del> </del>
1 201	IEDODE ATTACHED	
		12,795.
2		127,33.
		ł
		Ĭ
3		<u> </u>
		}
4		
		<u> </u>
Part IX-E	<del></del>	-
Describe t	ne two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
		1
2		}
All other n	rogram-related investments. See instructions.	
•	ogram-related investments See instructions,	1
3		}
Total Add	lines 1 through 3	<del> </del>
701411 /144		Form <b>990-PF</b> (2017)

Part	Minimum Investment Heturn (All domestic foundations must complete this part. Fore see instructions.)	ign tou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	` purposes.	2.62	
a	Average monthly fair market value of securities	1a	21 062
b	Average of monthly cash balances	1b	31,963.
C	Fair market value of all other assets (see instructions)	1c	21 062
ď	Total (add lines 1a, b, and c)	1d	31,963.
е	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	31,963.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	<del>  </del>	
	instructions)	4	479.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	31,484.
6	Minimum investment return. Enter 5% of line 5	6	1,574.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		ions
	and certain foreign organizations, check here ▶ □ and do not complete this part.)	1 - 1	
1	Minimum investment return from Part X, line 6	1	1,574.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 0.		
ь	Income tax for 2017. (This does not include the tax from Part VI.)		_
С	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,574.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,574.
6	Deduction from distributable amount (see instructions)	6	<del></del>
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,574.
Part	XII Qualifying Distributions (see instructions)	1 1	
		L. Zinasay.	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	12,795.
р	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	1 _ 1	
_		2	
3_	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4 5	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	4	12,795.
J	, ,	_	• •
e	Enter 1% of Part I, line 27b. See instructions	5	18.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,777.
	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
			000 DE

Part	Undistributed Income (see instruction	ons)		····	
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
,	line 7	7.5%			1,574.
2	Undistributed income, if any, as of the end of 2017.				
а	Enter amount for 2016 only	1.5 mm 1.		0.	
b	Total for prior years: 20 ,20,20	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
3	Excess distributions carryover, if any, to 2017:				
a	From 2012 12,795.				
b	From 2013				
c	From 2014		,		
d	From 2015				,
e	From 2016 1, 305, 511.			-	,
f	Total of lines 3a through e	2,236,561.	_		,
4	Qualifying distributions for 2017 from Part XII,	AVID-13 BC			1
7	line 4. ► \$ 12,795.		;		31
_	Applied to 2016, but not more than line 2a.	ALA MAL		-	,"
a b	Applied to undistributed income of prior years				, , , , , , , , , , , , , , , , , , , ,
D	(Election required—see instructions)				
_	Treated as distributions out of corpus (Election	Cara Million Copy to 18	4 9 ,		
C	required—see instructions)			, ,	and a way
	·	CHEROSES A.	11.5		
d	Applied to 2017 distributable amount	200000000000000000000000000000000000000	A. Jan		Carpet Con market & Basin
_e	Remaining amount distributed out of corpus	12,795.	30.		· ! w! ( i . 1 !
5	Excess distributions carryover applied to 2017	- 100 Carlot Car	1,2,49- A-68' 24.5	دس <u>د</u>	# \$40. a. t = 440
	(If an amount appears in column (d), the same		The state of		
_	amount must be shown in column (a).)			2 Carrier 1	
6	Enter the net total of each column as				
	indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,249,356.	1 1 2 4 3 7 1	, 7677,	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Prior years' undistributed income. Subtract			, , , , , , , , ,	
	line 4b from line 2b		0.		1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has	25 4 1 62	1_		
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0.		
d	Subtract line 6c from line 6b. Taxable			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
	amount – see instructions		0.		2,000
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount—see			_	
	instructions		3	0.	3 - 2 - 3 - 3
f	Undistributed income for 2017. Subtract lines		1	,	
	4d and 5 from line 1. This amount must be	19 Feb. 1	25	-	
	distributed in 2018		****\display \display \displine \display \display \display \display \display \display \displa		1,574.
7	Amounts treated as distributions out of corpus	}			
	to satisfy requirements imposed by section		Control of the Control	, ,	3
	170(b)(1)(F) or 4942(g)(3) (Election may be	<b>}</b>	199	. ,	
_	required—see instructions)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,
8	Excess distributions carryover from 2012 not		عود را ا		4
_	applied on line 5 or line 7 (see instructions) .	12,795.	, ,,,,		· · · · · · · · · · · · · · · · · · ·
9	Excess distributions carryover to 2018.	1			•
	Subtract lines 7 and 8 from line 6a	2,236,561.	- **		1
10	Analysis of line 9:		* /* *, * ;		, , ,
а	Excess from 2013 187, 525.		· · · · · ·	,	• ,
b	Excess from 2014 17,592.		, -* • <del>-</del>	•	
C	Excess from 2015				- 1 × 1 × 1 × 1 × 1 × 1
d	Excess from 2016 1,305,511.	*			The state of
е	Excess from 2017 12,795.			<u> </u>	'/

Page	1	(

roint 99	U-F1 (2017)					rage 10
Part :					9)	N/A
1a	If the foundation has received a ruling			private operating		/
	foundation, and the ruling is effective fo			•		
	Check box to indicate whether the four		operating founda		ection	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(e) Total
_	income from Part I or the minimum investment return from Part X for	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	(-, · · · · · · · · · · · · · · · · · · ·
•	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities				<u> </u>	
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test-enter:		/	1		
	(1) Value of all assets	Ĺ	_/		_	
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in	İ				
	Part X, line 6 for each year listed		/			
C	"Support" alternative test—enter:		/			
	(1) Total support other than gross		<b>!</b>			
	investment income (interest, dividends, rents, payments on	/				
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt		i		}	
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part				he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-	-see instructior	ns.)			
1	Information Regarding Foundation	_				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	ian \$5,000). (See s	section 507(d)(2).)	-
	JEROME B MILLER					
b	List any managers of the foundation					ge portion of the
	ownership of a partnership or other er	ntity) of which the	toundation has a	10% or greater int	erest.	
	NONE					
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation					
	unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See in		girts, grants, etc.,	to individuals or o	rganizations under	other conditions,
			dun no no deben no no no			<del> </del>
а	The name, address, and telephone nu	imper or email add	aress of the perso	n to wnom applica	itions snould be ad	aressea:
	Coo Cupplementary Informat	ion Statemen	<b>.</b>			
	See Supplementary Informat The form in which applications should			materials they sho	uld includo:	
	The form in which applications should	i be submitted and	a information and	materials triey sno	ala iliciaae.	
С	Any submission deadlines:					
	A				<del></del>	
d	Any restrictions or limitations on aw	ards, such as by	geographical ar	eas, charitable fi	elds, kinds of insti	tutions, or other
	factors:					

Part XV Supplementary Information (continued)  3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual.							
	show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient						
a Paid during the year SEE ATTACHED SCHEDULE	N/A	501C3	EDUCATIONAL					
SEE SCHEDULE ATTACHED GUTHRIE OK 73044		501C3		12,795.				
				}				
		}						
		}						
Total	<u> </u>							
b Approved for future payment	<u> </u>		<u> ▶ 3</u> a	12,795.				
NONE	,							
t.	]							
•								
		ĺ						
				}				
			0					
				]				
Total			▶ 3b					
				l 0.				

		VI-A Analysis of Income-Producing Ac	tivities				
Ente	r gro	oss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1	Pro	gram service revenue.					(000 #1011001101101
	а	NONE					
	b						·
	С						
	d						
	е						
	f				ļ		
	_	Fees and contracts from government agencies					
2		mbership dues and assessments					
3		erest on savings and temporary cash investments			ļ <del> </del>	·	 
4		idends and interest from securities	wastern, americans	No. of Attachment has well to see	Appendix and a second second second second	COMPANIENT AND A TOTAL	econocio april Visioni in calla la la la
5		t rental income or (loss) from real estate:				and the second	
		Debt-financed property					
_		Not debt-financed property					
6		t rental income or (loss) from personal property					
7	-	ner investment income			<del></del>		
8		n or (loss) from sales of assets other than inventory				<del></del>	
9		t income or (loss) from special events	<b></b>	· · · · · · · · · · · · · · · · · · ·	-		
10 11		oss profit or (loss) from sales of inventory ner revenue: a					
• • •	b	<del></del>					
	C						
	d		ļ —		<del> </del>		
	e		<u> </u>		<del> </del>	· · · · · · · · · · · · · · · · · · ·	
12		btotal. Add columns (b), (d), and (e)					
						13	0.
		rksheet in line 13 instructions to verify calculation					<del></del>
Pa	rt X	VI-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
Lin	a No						
			income is repo	orted in column	(e) of Part XV	l-A contributed in	nportantly to the
	<b>V</b>		income is reported that	orted in column n by providing fun	(e) of Part XVI ds for such purp	I-A contributed in oses). (See instruc	nportantly to the tions.)
1			income is report poses (other that	orted in column n by providing fun	(e) of Part XVI ds for such purp	-A contributed in oses). (See instruc	nportantly to the tions.)
1 NON	<b>V</b>		income is report poses (other that	orted in column n by providing fun	(e) of Part XVI ds for such purp	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		income is reporposes (other that	orted in column n by providing fun	(e) of Part XVI ds for such purp	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		income is reporposes (other that	orted in column n by providing fun	(e) of Part XVI ds for such purp	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI ds for such purp	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		income is repr poses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		Income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		Income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		Income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		Income is reproses (other tha	orted in column n by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the
	<b>V</b>		Income is reproses (other tha	orted in column by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		Income is reproses (other tha	orted in column by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		Income is reproposes (other tha	orted in column by providing fun	(e) of Part XVI	l-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		Income is reproses (other tha	orted in column by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the tions.)
	<b>V</b>		Income is reproses (other tha	orted in column by providing fun	(e) of Part XVI	-A contributed in oses). (See instruc	nportantly to the tions.)

		Organizatio	วทร								
	ın se	ne organization d ection 501(c) (o nizations?								Yes	No
а	Trans	sfers from the rep	orting found	ation to a noncha	arıtable exemp	ot organizatio	n of:		Ĭ		
	(1) C	ash							1	a(1)	×
	•								<u> </u>	a(2)	×
b	<b>.</b> , -	r transactions.	• • • •			• • • •					
D				hin avamet area							
		ales of assets to							-	b(1)	<u> </u>
		urchases of asse							<u> </u>	b(2)	×_
	(3) R	ental of facilities,	, equipment,	or other assets					<u>[11</u>	b(3)	×
	(4) R	eimbursement ar	rrangements						[1]	b(4)	×
	(5) L	oans or loan gua	rantees .			<i>.</i> .			11	b(5)	×
	(6) P	erformance of se	rvices or me	mbership or fund	Iraising solicita	ations			11	b(6)	×
С	•	ng of facilities, e		•	_					1c	×
		answer to any		_	,						
~		of the goods, of									
		in any transaction									
( ) )							cription of transfe				
(a) Line	no (	(b) Amount involved	(c) Name	of nonchantable exe	rnpt organization	(a) Des	cription of transfe	ers, transaction	ns, and snaring	arrangen	ients
			ļ <del></del>								
			<del></del> -		<del></del> -		<del></del>				
			<del> </del>				<del></del>		<del></del>		
			<del></del>								
			ļ <u>. —</u>		<del></del> _						
								·			
	T										
							·				
						<del></del>					
		e foundation dire									<del></del>
	desci	ribed in section 5	01(c) (other t	han section 501(	c)(3)) or in sec	tion 527? .			🗆 ,	Yes 🔀	No
b	If "Ye	s," complete the	following sc	hedule.							
		(a) Name of organi	zation		b) Type of organiz	ation	T	(c) Descriptio	n of relationshi		
							1	<u>``</u>		<u> </u>	
		<del></del> _	<del></del>	<del></del>	_ <del>_</del>		<del> </del>				
		<del></del>		<del>}</del> -	<del></del>	<del></del>	<b>├</b> ──-				
			<del></del>				<b></b>	·			
	Unde	r penalties of perjury, I	declare that I have	examined this return,	including accompai	nying schedules ar	nd statements, and	to the best of	my knowledge a	and belief, if	t is true,
Sign	L.	ct, and complete. Decla	iration of preparer	(other than taxpayer) is	based on all inform	nation of which pre	parer has any knov	Medge.	May the IRS of	liscuss this	return
Here	X	1 2.000	7///	<u> </u>	KLB9/1	DIRECTOR	<b>1</b>		with the prepa	rer shown b	selow?
	<u> </u>	ature of officer or trus	itee		Date	Title	<del></del>		See instruction	s Yes	□No
	L	Print/Type preparer			signature		Date	<del></del>	PTIN		===
Paid		,, ,		100	Yuans	cAl	6.1.18	Check			_
Prepa	irer		IER, CPA	THE A	3. / 300	<u> </u>	107.18		mployed P0(		5
Use C		Firm's name ▶		BARRUS, INC	<u></u>				73-1479		
		Firm's address ▶		156TH ST				Phone no. (	405) 359		
BAA			EDMOND			OK 73013	3-2101		Form	990-PF	(2017)

JEROME B MILLER FAMILY FOUNDATION
Form 990-PF: Return of Private Foundation
Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Part XV, Line 2: Supplementary Information Regarding	ing Contribution, Grant, Gift, Loan, Scholarship, etc.		Continuation Statement
Name and Address Information	Form Information	Submission Information	Restrictions
JEROME B MILLER 5818 NW 50th STREET OKLAHOMA CITY, OK 73122	WRITTEN REQUEST	NONE	SEE ATTACHED
405-260-0339			
JEROME B MILLER FAMILY FOUNDATION P O BOX 279 GUTHRIE, OK 73044	WRITTEN REQUEST	NONE	SEE ATTACHED
405-615-9300			

# Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

**Other Expenses** 

**Continuation Statement** 

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
BANK FEES	441.	441.	441.	
FILING FEES	65.	65.	65.	
Total	506.	506.	506.	

## 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

**Employer identification number** 

JERO	ME B MILLER FA	MILY FOUNDAT	ION	73-1438698
Organi	zation type (check or	ne):		
Filers o	of:	Section:		
Form 9	90 or 990-EZ	☐ 501(c)(	) (enter number) organization	
		☐ 4947(a)(1) no	onexempt charitable trust <b>not</b> treated as a private fou	ındation
		☐ 527 political	organization	
Form 990-PF		★ 501(c)(3) exercises	empt private foundation	
		4947(a)(1) no	onexempt charitable trust treated as a private founda	tion
		☐ 501(c)(3) taxa	able private foundation	
Check	f your organization is	covered by the G	eneral Rule or a Special Rule.	
Note: Construct		'), (8), or (10) orgar	nization can check boxes for both the General Rule a	nd a Special Rule. See
Genera	I Rule			
X	For an organization or more (in money o contributor's total co	or property) from a	90-EZ, or 990-PF that received, during the year, cont ny one contributor. Complete Parts I and II. See instr	ributions totaling \$5,000 uctions for determining a
Specia	Rules			
	regulations under se 13, 16a, or 16b, and	ections 509(a)(1) ar I that received fror	on 501(c)(3) filing Form 990 or 990-EZ that met the 33nd 170(b)(1)(A)(vi), that checked Schedule A (Form 99m any one contributor, during the year, total contributors form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	00 or 990-EZ), Part II, line tions of the greater of (1)
	contributor, during th	he year, total contr	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ributions of more than \$1,000 exclusively for religious, r the prevention of cruelty to children or animals. Com	, charitable, scientific,
	contributor, during the contributions totaled during the year for a General Rule applie	he year, contribution  I more than \$1,000  In exclusively religion  In this organizat	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ons exclusively for religious, charitable, etc., purpose 0. If this box is checked, enter here the total contributious, charitable, etc., purpose. Don't complete any of the city is in the contribution because it received nonexclusively religious, chair	es, but no such tions that were received the parts unless the
990-EZ,	or 990-PF), but it mu	i <b>st</b> answer "No" or	the General Rule and/or the Special Rules doesn't file n Part IV, line 2, of its Form 990; or check the box on sn't meet the filing requirements of Schedule B (Form	line H of its Form 990-EZ or on its

Name of organization

JEROME B MILLER FAMILY FOUNDATION

Employer identification number

73-1438698

Part I	Contributors (see instructions). Use auplicate copies	s of Part I if additional space is	neeaea.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEROME B MILLER P O BOX 278  GUTHRIE OK 73044	\$ 50,291.	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

#### JEROME B MILLER FAMILY FOUNDATION

#### 2017

## **ATTACHMENT TO FORM 990-PF**

### PAGE 1 PART I LINE 1 – CONTRIBUTIONS, GIFTS, GRANTS RECEIVED

\$50,291

### PAGE 4, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

JEROME B MILLER P O BOX 278 GUTHRIE, OK 73044

#### PAGE 10, PART XV, LINE 2d – RESTRICTIONS AND LIMITATIONS

THIS FOUNDATION OFFERS EDUCATIONAL ASSISTANCE AWARDS AND GRANTS MADE IN ACCORDANCE WITH PROCEDURES ESTABLISHED BY THE FOUNDATION UNDER IRC 4945(g)(1) AND IRC 117(a) WITH CONDITIONS AND LIMITATIONS OUTLINED IN IRS APPROVAL LETTER DATED 3-24-94 TO THE FOUNDATION. NO AWARDS OR GRANTS WERE MADE TO SUCH APPLICANTS IN 2008.

#### PAGE 1, PART I, LINE 16b - ACCOUNTANT FEES

MEIER & BARRUS, INC.

\$ 1,235

# JEROME B MILLER FAMILY FOUNDATION 2017

# **ATTACHMENT TO FORM 990-PF**

TOTAL

CONTRIBUTIONS PAID DURING 2017 PAGE 7, PART IX-A PAGE 11, PART XV

2/5/2017	PC NORTH BASEBALL BOOSTERS 11800 N ROCKWELL OKLAHOMA CITY, OK 73162	\$35
3/5/2017	UNIVERSITY OF OKLAHOMA OU FOUNDATION 100 TIMBERDELL DRIVE NORMAN, OK 73069	5,000
3/5/2017	UNIVERSITY OF OKLAHOMA OU FOUNDATION 100 TIMBERDELL DRIVE NORMAN, OK 73069	5,000
6/23/2017	HEALTY SMILES HEALTHY CHILDREN 211 E CHICAGO AVENUE, SUITE 1650 CHICAGO, IL 60611	2,700
7/17/2017	SPECIAL OPERATIONS WARRIORS FONDATION P O BOX 89367 TAMPA, FL 33689	60

\$12,795