CHANGE IN ACCOUNTING

990-PI

Return of Private Foundation

PERIOD

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

OMB No 1545-0052 2017

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. Open to Public Inspection Internal Revenue Service For calendar year 2017 or tax year beginning 07/01/17, and ending 12/31/17Name of foundation Employer identification number WOOD FAMILY FOUNDATION, 75-2806006 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 3501 FAUDREE RD 432-617-1387 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here TX 79765 **ODESSA** G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the Address change 85% test, check here and attach computation Name change Check type of organization | X | Section 501(c)(3) exempt private foundation 0 If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 38,941,056 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal . expenses per income income ourposes the amounts in column (a) (see instructions)) books (cash basis only) 2,300,000 A PROBLEM TO S PH NP DITT 1 7 1 Contributions, gifts, grants, etc., received (attach schedule) 2 If the foundation is not required to attach Sch. B. CIEVED 3 Interest on savings and temporary cash investments 290,500 290,500 113,978 113,978 4 Dividends and interest from securities NOV 5a Gross rents h Net rental income or (loss) 391,237 hà Net gain or (loss) from sale of assets not on line 10 1,528,444 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 391,237 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold C Gross profit or (loss) (attach schedule) STMT 1 609,373 609,373 11 Other income (attach schedule) 3,705,088 1,405,088 0 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc strative Expenses 30,000 30,000 14 Other employee salaries and wages 15 2,504 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) С 17 Taxes (attach schedule) (see instructions) STMT 2 1.399 415 18 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 STMT 3 77,992 60,123 17,869 Other expenses (att. sch.) 24 Total operating and administrative expenses. Add lines 13 through 23 111,895 60,538 50,373 894,333 894,333 Contributions, gifts, grants paid 1,006,228 60,538 944,706 26 Total expenses and disbursements. Add lines 24 and 25 monutaria affi, himmil hillurumining. 27 Subtract line 26 from line 12 2,698,860 1000 Excess of revenue over expenses and disbursements 1,344,550 Net investment income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions. DAA

Adjusted net income (if negative, enter -0-)

Part	Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End of	year
1 411	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		161,010	113,550	113,550
2	Savings and temporary cash investments		131,677	2,432,693	2,432,693
3	Accounts receivable ► 61 , 4	161			
	Less allowance for doubtful accounts ▶			61,461	61,461
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				
1	instructions)				
7	Other notes and loans receivable (att. schedule)				
	Less allowance for doubtful accounts ▶	0			
<u>v</u> 8	Inventories for sale or use				
Assets 9 10a	Prepaid expenses and deferred charges			1,516	1,516
& 10a	Investments – U S and state government obligations (attach schedule)				
Ь	Investments – corporate stock (attach schedule)				
c	Investments – corporate bonds (attach schedule)				
11	Investments – land, buildings, and equipment basis				
	Less accumulated depreciation (attach sch.)			1	
12	Investments – mortgage loans			·	
13	Investments – other (attach schedule) SEE STATEMENT 4		27,712,959	28,657,949	28,657,949
14	Land, buildings, and equipment basis				
	Less accumulated depreciation (attach sch.)			[
15	Other assets (describe ► SEE STATEMENT 5)	7,805,325	7,673,887	7,673,887
16	Total assets (to be completed by all filers – see the	,			
1	instructions Also, see page 1, item I)		35,810,971	38,941,056	38,941,056
17	Accounts payable and accrued expenses				
18	Grants payable				
S 19	Deferred revenue				
19 20 21 21 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons				
<u>e</u> 21	Mortgages and other notes payable (attach schedule)				
그 ₂₂	Other liabilities (describe SEE STATEMENT 6)	820	1,530	
23	Total liabilities (add lines 17 through 22)	,	820	1,530	
	Foundations that follow SFAS 117, check here	▶ □			
Ses 24	and complete lines 24 through 26 and lines 30 and 31.				
Ž 24	Unrestricted				
Net Assets or Fund Balar 25 26 27 28 30 31	Temporarily restricted				
26	Permanently restricted				
틱	Foundations that do not follow SFAS 117, check here	• X			
킨	and complete lines 27 through 31.	_			
ō 27	Capital stock, trust principal, or current funds				
28	Paid-in or capital surplus, or land, bldg, and equipment fund				
SS 29	Retained earnings, accumulated income, endowment, or other funds		35,810,151	38,939,526	
30	Total net assets or fund balances (see instructions)		35,810,151	38,939,526	
ž 31	Total liabilities and net assets/fund balances (see				
	instructions)		35,810,971	38,941,056	
Part		 es	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	al net assets or fund balances at beginning of year – Part II, column (a), line 3		st agree with		
	of-year figure reported on prior year's return)	\		1 1	35,810,151
	er amount from Part I, line 27a			2	2,698,860
	er increases not included in line 2 (itemize) SEE STATEMENT	7		3	430,515
	Ulines 1, 2, and 3			4	38,939,526
	creases not included in line 2 (itemize)			5	
	al net assets or fund balances at end of year (line 4 minus line 5) – Part II, co	lumn (t	o). line 30	6	38,939,526
	Tariff of the control		-,,		

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
	the kind(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co)		(b) How acquired P = Purchase D = Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a SEE WORKSHEET						
b .		<u></u>				
<u>c</u>						
_d			<u> </u>			
<u>e</u>						·
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,-,	other basis nse of sale		(h) Gain ((e) plus (f)	
_a						
_b						
<u>c</u>						
Complete only for accets shown	a care in column (b) and aymod by the fo	undation on 12/21/6				
Complete only for assets showing	g gain in column (h) and owned by the fo					(h) gain minus
(i) FMV as of 12/31/69	(J) Adjusted basis as of 12/31/69		s of col (i) (j), if any		k), but not i Losses (fro	ess than -0-) or m col (h))
<u>a</u>		-	_			
_ c	·					
_d						
е						
2 Capital gain net income or (net c	apital loss)					201 227
2. Not short term conital coin or (le	If (loss), enter -0- in l	_	-	2		391,237
, ,	ss) as defined in sections 1222(5) and (6 , column (c) See instructions If (loss), e	·				
Part I, line 8	, column (c) See instructions in (loss), e	niter -0- iii		3		12,547
<u> </u>	nder Section 4940(e) for Reduc	ed Tay on Net	Investment Incor			12,341
***************************************	foundations subject to the section 4940					-
	•	(4) (4) (4)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
If section 4940(d)(2) applies, leave the	ns part blank					
Was the foundation liable for the sec	tion 4942 tax on the distributable amount	of any year in the b	pase period?			Yes X No
If "Yes," the foundation does not qual	lify under section 4940(e) Do not comple	ete this part				
1 Enter the appropriate amount in	each column for each year, see the instru	ictions before makir	ng any entries			
(a) Base period years	(b)		(c)		Distri	(d) bution ratio
Calendar year (or tax year beginning in			of noncharitable-use assets			vided by col (c))
2016		,205	19,729,2	68		0.049886
2015		,259	706,9			0.424696
2014	300		1,002,4			0.299350
2013		119	1,088,6			0.024912
2012	1,800	, 633	1,142,5	83		1.575951
0. 7-4-1-6141(1)						2 274705
2 Total of line 1, column (d)	5	O.b. 5.0 b. 4b		2		2.374795
	5-year base period – divide the total on li		ie			0 474050
number of years the foundation h	as been in existence if less than 5 years			3		0.474959
4 Enter the net value of noncharital	ble-use assets for 2017 from Part X, line	5		4	3	6,856,293
5 Multiply line 4 by line 3				5	1	7,505,228
						10.440
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6		13,446
7 Add lines 5 and 6				7	1	7,518,674
· Aud littles 3 diffit 0				'-		.,,510,674
8 Enter qualifying distributions from				8		944,706
_	n line 7, check the box in Part VI, line 1b,	and complete that I	part using a 1% tax rat	e See the		
Part VI instructions						

	1 990-PF (2017) WOOD FAMILY FOUNDATION, INC. 75-2806006			P	age 4
P	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
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			26,	<u>891</u>
	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-)		_		<u> </u>
3	Add lines 1 and 2			26,	891
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-			26,	<u>891</u>
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,516				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c 38,000				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d			<u>39,</u>	<u>516</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached8	_			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			12,	<u>625</u>
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 12,625 Refunded ▶ 11				
_ <u>Pa</u>	art VII-A Statements Regarding Activities		·····	,	
1a	, , , , , , , , , , , , , , , , , , , ,			Yes	No
	participate or intervene in any political campaign?		1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	Instructions for the definition		1b		<u>X</u>
	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		<u>X</u>
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 imposed				
_	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT / B	4a	-	<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		<u>v</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u>X</u>
e	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied orthogonal forms.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the ctate law remain in the governing instrument?			v	
7	conflict with the state law remain in the governing instrument? 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	,	6	X	
7	Enter the states to which the foundation reports or with which it is registered. See instructions.	′	7	_^_	
8a	TX				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation		,,	x	
9	•		8b	^	
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tayable year beginning in 20172 See instructions for Part XIV. If "Yes "			1	\mathcal{L}
	4942(J)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV If "Yes," complete Part XIV			Ì	x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		9		
	names and addresses		10		x
	Training and addresses		orm 99	0-PF	
		F	urm JJ	U-F	(2017)

P	art VII-A Statements Regarding Activities (continued)					aye
			_		Yes	N
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement. See instructions			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	ation?		13	X	
	Website address ► N/A					
14		ohone no 🕨	432-6	517-	138	7
	3501 FAUDREE					
	Located at ▶ ODESSA TX	ZIP+4 ▶	7976	5		_
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	▶ _	15			
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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of					
	the foreign country ▶			<u> </u>		<u> </u>
P	art 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.			ļ	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	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_		l		
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Yes	X No	İ		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after		₹			
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regula	tions	37/3			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		ļ
	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		NT / 70	١.		
_	were not corrected before the first day of the tax year beginning in 2017?		N/A	1c		-
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					İ
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and					
а	6e, Part XIII) for tax year(s) beginning before 2017?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	1es	22 140			
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)		N/A	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					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
-	at any time during the year?	Yes	X No			ı
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or					ı
•	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					ı
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					
	foundation had excess business holdings in 2017)		N/A	3b	Ì	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	s?	•	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					
	charitable nurnose that had not been removed from jeonardy before the first day of the tay year beginning in 2	0172		46		X

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensate (c) Type of service (c) Type of service (c) Compensate (c) Type of service (c) Type of	; Form 990-PF (20		75-2806006	Pag	је 7
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and eddress of each person paid more than \$50,000 (b) Type of services NONE (c) Compensation (d) Type of services (c) Compensation (d) Type of services (e) Type of services (f) Compensation (g) Name and eddress of each person paid more than \$50,000 (b) Type of services (g) Name and eddress of each person paid more than \$50,000 (b) Type of services (g) Name and eddress of each person paid more than \$50,000 (b) Type of services (e) Type of services (f) Compensation (g) Name and eddress of each person paid more than \$50,000 (b) Type of services (g) Name and eddress of each person paid more than \$50,000 (b) Type of services (e) Type of services (e) Type of services (f) Compensation (e) Type of services (f) Compensation (e) Type of services (f) Compensation (e) Compensation (f) C	Part VIII		dation Managers, Highly Paid E	mployees,	
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE	3 Five high		uctions If none enter "NONE"		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chanitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiances served, conferences convened, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions	<u> </u>			(c) Compensation	
Part IX-B Summary of Program-Related Investments (see Instructions) Part IX-B Summary of Program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions	NONE .				
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chaniable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions					
Part IX-B Summary of Program-Related Investments (see Instructions) Part IX-B Summary of Program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions					
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Part IX-B Summary of Program-Related Investments (see Instructions) Part IX-B Summary of Program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions	Total number of	others receiving over \$50,000 for professional services	L		—
The state of the program-related investments and other program-related investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions					
2 Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions			such as the number of	Expenses	
Part iX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions	1 N/A				
Part iX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions					
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Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions	2				
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions					
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments. See instructions	3				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions					
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions	4				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions					
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions					
1 N/A 2 All other program-related investments See instructions			ictions)		
All other program-related investments. See instructions		gest program-related investments made by the foundation during the tax year on lines. I and 2	····	Amount	
All other program-related investments. See instructions	•				
All other program-related investments. See instructions					
	2				
3	All other program-re	elated investments. See instructions			
	3			T.	

Total. Add lines 1 through 3

Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see

Qualifying Distributions (see instructions)

Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.

instructions)

Part XII

Minimum investment return. Enter 5% of line 5

P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ▶ ☐ and do not complete this part XI	•	ons
1	Minimum investment return from Part X, line 6	1	928,981
2a	Tax on investment income for 2017 from Part VI, line 5	6,891	
b	Income tax for 2017 (This does not include the tax from Part VI)		
Ç	Add lines 2a and 2b	2c	26,891
3	Distributable amount before adjustments Subtract line 2c from line 1	3	902,090
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	902,090
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	902,090

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 944,706 Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a ь 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 Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required) За b Cash distribution test (attach the required schedule) 3b 944,706 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions 6 6 Adjusted qualifying distributions. Subtract line 5 from line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2017)

4

5

6

561,263

928,981

36,856,293

P	art XIII Undistributed Incom	e (see instructions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part	XI,	Corpus	Years prior to 2016	2016	2017
	line 7					902,090
2	Undistributed income, if any, as of the e	nd of 2017				
а	Enter amount for 2016 only					
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to					
а	From 2012	1,743,554				
b	From 2013					
С	From 2014	249,967				
d	From 2015	264,913				
е	From 2016					
f	Total of lines 3a through e		2,258,434			
4	Qualifying distributions for 2017 from Pa	art XII,				
	line 4 ▶ \$ 944,706					
а	Applied to 2016, but not more than line	2a				<u> </u>
b	Applied to undistributed income of prior	years *				
	(Election required – see instructions)			_		
C	Treated as distributions out of corpus (E	lection				
	required – see instructions)					
d	Applied to 2017 distributable amount					902,090
е	Remaining amount distributed out of coi	rpus	42,616			
5	Excess distributions carryover applied to	2017				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtra	ict line 5	2,301,050			
b	Prior years' undistributed income Subtra	act				
	line 4b from line 2b					
С	Enter the amount of prior years' undistril	buted				
	income for which a notice of deficiency h	nas				
	been issued, or on which the section 49	42(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable					
	amount – see instructions					
е	Undistributed income for 2016 Subtract	line				
	4a from line 2a Taxable amount – see					
	instructions					
t	Undistributed income for 2017 Subtract					
	4d and 5 from line 1 This amount must	be .				
_	distributed in 2018					0
7	Amounts treated as distributions out of c	·				
	to satisfy requirements imposed by sect					
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
_	required—see instructions)	3 4				
8	Excess distributions carryover from 2012		1 742 554			
0	applied on line 5 or line 7 (see instruction	•	1,743,554			
9	Excess distributions carryover to 201	ō.	E 57 400			
١.	Subtract lines 7 and 8 from line 6a		557,496			
10	Analysis of line 9	ı				
a	Excess from 2013	240 067				
b	Excess from 2014	249,967				
C C	Excess from 2015	264,913				
d	Excess from 2016	42,616				
е	Excess from 2017	1 42,010	1			1

Form	1 990-PF (2017) WOOD FAMILY	FOUNDATION	, INC.	75-28060	006	Page 1
	art XIV Private Operating Fo					
1a	If the foundation has received a ruling or					
	foundation, and the ruling is effective for	2017, enter the date of	of the ruling	•		
b	Check box to indicate whether the found	ation is a private opera	ating foundation descri	bed in section 4	942(J)(3) or 4942	(<u>)</u>)(5)
2a	Enter the lesser of the adjusted net	Tax year		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					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed			<u> </u>	/	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities		li			
	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					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3		/			
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test – enter		/			
	(1) Total support other than gross		/			
	investment income (interest,		/			
	dividends, rents, payments on	/				
	securities loans (section 512(a)(5)), or royalties)	/				
	(2) Support from general public	/				
	and 5 or more exempt	/				
	organizations as provided in	/				
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income		L		<u> </u>	
Pa	rt XV Supplementary Inform	•	•	the foundation h	ad \$5,000 or more	in assets at
	any time during the y		tions.)		 	
1	Information Regarding Foundation Ma	•				
а	List any managers of the foundation who				•	
	before the close of any tax year (but only	rif they have contribute	ed more than \$5,000)	(See section 507(d)(2))	
	NONE					
b	List any managers of the foundation who		·		e portion of the	
	ownership of a partnership or other entity	/) of which the foundat	ion has a 10% or grea	ter interest		
	NONE			.		
2	Information Regarding Contribution, C		•••			
			to preselected charitat	•	•	
	unsolicited requests for funds. If the foun		ants, etc , to individual	s or organizations und	er other conditions,	
	complete items 2a, b, c, and d See instr					·
а	The name, address, and telephone number 122 (123)		t the person to whom a	applications should be	addressed	
	DON WOOD 432-617-138					
	3501 FAUDREE ODESSA				· · · · · · · · · · · · · · · · · · ·	<u> </u>
b	The form in which applications should be	submitted and inform	ation and materials the	ey snould include		
	SEE STATEMENT 8					
С	Any submission deadlines					
	NONE	anah aa ku a		alda luada etc. etc.		
đ	Any restrictions or limitations on awards,	such as by geographi	cai areas, charitable fi	eias, kinds of institutioi	ns, or otner	
	factors NONE					
	74-74-77	_	·-·			Form 990-PF (2017
DAA						- FORM 330-17 F (2017

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN RED CROSS PO BOX 60310 NONE 501 (C) (3) MIDLAND TX 79711 HURRICANE HARVEY FUNDRAISER 100,000 EMPTY STOCKING FUND 222 E FOURTH ST NONE 501 (C) (3) ODESSA TX 79761 **OPERATIONS** 5,000 ENMU FOUNDATION 1500 S AVE K NONE 501 (C) (3) PORTALES NM 88130 ENDOWED SCHOLARSHIP 5,000 FIRST UNITED METHODIST CHURCH NONE 415 N LEE 501 (C) (3) ODESSA TX 79761 NICK WILLIAMS FAMILY LIFE CENTER 250,000 LIBERTY INSTITUTE NONE 2001 W PARKWAY, STE 1600 501 (C) (3) **PLANO TX 75075 OPERATIONS** 10,000 MD ANDERSON CANCER CENTER PO BOX 4464 501 (C) (3) NONE HOUSTON TX 77210 ANNUAL FUND 5,000 THE ODESSA CRISIS CENTER 910-B S GRANT NONE 501 (C) (3) ODESSA TX 79761 **OPERATIONS** 31,000 THE ODESSA CRISIS CENTER 910-B S GRANT NONE 501 (C) (3) ODESSA TX 79761 LOUISE WOOD ANGEL HOUSE SHELTER 333,333 ODESSA COLLEGE 201 W UNIVERSITY NONE 501 (C) (3) ODESSA TX 79764 WOOD MATH & SCIENCE BUILDING 150,000 WEST TEXAS FOOD BANK 411 S PAGEWOOD AVE NONE 501 (C) (3) ODESSA TX 79761 **OPERATIONS** 5,000 Total 894,333 **b** Approved for future payment SEE STATEMENT 9 2,083,334 Total ▶ 3b 2,083,334

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
с					
d	_				
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					<u> </u>
3 Interest on savings and temporary cash investments			14	290,500	
4 Dividends and interest from securities			14	113,978	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					·
6 Net rental income or (loss) from personal property					
7 Other investment income			14	609,373	
8 Gain or (loss) from sales of assets other than inventory			18	391,237	
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					
12 Subtotal Add columns (b), (d), and (e)		. (1,405,088	0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		_ t	13	1,405,088
See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to the	Accomplishme	nt of Exempt P	urposes		
Line No. Explain below how each activity for which incom	-				
▼ accomplishment of the foundation's exempt pur					ns)
	<u>· </u>			poddo) (odd mondono	110 /
N/A	·		·	(Coo mondono	
N/A					
N/A			-		
N/A			-		
N/A					

		II) WOOD IIII					00000			ray	C 11
Pa		Information Reg Exempt Organiz		ransfers To a	and Transa	actions and Rela	ationships W	ith Nonchai	itabl	9	
-		enization directly or in		rage in any of the	following with	any other organizat	ion desembed			Yes	No
	_	01(c) (other than sec			-	•				163	140
	organization		, (C)	(3) Olganizations)	or in section	327, relating to politi	Jai				
	-		adation to a	nanchardahla av	omat omaniza	tion of] 4		
		om the reporting four							4-(4)		v
	(1) Cash .								1a(1)		$\frac{\mathbf{x}}{\mathbf{x}}$
	Other trans	ssets						• • • • • • • • • • • • • • • • • • • •	1a(2)		≙
			4-1-1	- 4					41.44		37
		f assets to a nonchar							1b(1)		X
		ses of assets from a							1b(2)		X
	(3) Rental (of facilities, equipmer	it, or other a	issets					1b(3)		X
	(4) Reimbu	rsement arrangemen							1b(4)		X
	(5) Loans o	r loan guarantees							1b(5)		X
		ance of services or r							1b(6)		X
		acılıties, equipment, i							1c		X
		er to any of the above									
		goods, other assets,									
		transaction or sham									
<u>_</u>) Line no.	(b) Amount involved	(c) Nam	e of noncharitable exer	mpt organization	(d) Descripti	on of transfers, transa	ctions, and sharing a	rrangem	ents	
N/Z	7						<u> </u>				
								•			
	·										
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		lation directly or indire	-				ızatıons		_	,	
		n section 501(c) (othe		on 501(c)(3)) or i	n section 527	?			Y€	es X	No
b	If "Yes," cor	nplete the following s	chedule			.,					
) Name of organization		(b) Type of	organization		(c) Description	of relationship			
7	I/A			ļ							
								<u> </u>			
		nalties of perjury. I declare						of my knowledge an	d helief,	it is this	<u>-</u> ,
	correct, a	nd complete Declaration of	f preparer (oth	er than taxpayer) is ba	ased on all inform	ation of which preparer has	s any knowledge.	May the IRS disc	uss this	return	
Sign								with the prepare			_
Here		4				. 1		See instructions	X	Yes	No
ICIC		1 als	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	Mac		//-/3-/8	י סידמם	SEC-TREA	9		
	Sign	ature of officer or trustee		11000		rate	Title	JEC-TKER	<u></u>		
	-' -				1		1105				
	Print/Ty	pe preparer's name			Preparers sig			Date		Check	∐ if
aid					Y sooan	them i	184	1111	18	self-em	ployed
orep:	PEGG	Y J. DEAN							لــــــــــــــــــــــــــــــــــــــ		
·-P	Firm's	ame ► JOHN:	SON. M	IILLER &	CO. OF	A'S, PC	p-	ги РО :	1244	120!	5

2626 JBS PKWY STE A-200

ODESSA, TX 79761

Firm's EIN ▶ 85-0214336

Firm's address 🕨

Schedule B (Form 990, 990-EZ, or 990-PF Department of the Treasury

Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Name of the organization

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

WOOD FAMILY FOUNDATION, 75-2806006 INC Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See **General Rule** |X| For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that 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

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

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)

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

Name of organization

Employer identification number WOOD FAMILY FOUNDATION, INC. 75-2806006 Part I Contributors (see instructions). Use duplicate copies of Part Lif additional space is needed.

1 01			-	
(a) No.	Name, ad	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF CLAY 3501 FAUDREE ODESSA	WOOD TX 79765	\$ 2,300,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name, ad	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name, ad	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name, ad	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name, ad	(b) dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name, ad	(b) · dress, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Capital Gains and Losses for Tax on Investment Income

Form **990-PF**

For calendar year 2017, or tax year beginning

07/01/17 , and ending 12/31/17

2017

Name

Employer Identification Number

WOOD FAMILY FOUNDATION, INC.		<u> 75-2806</u>	006
(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co	(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) SEE ATTACHED GOLDMAN SACHS	P		
(2) SEE ATTACHED GOLDMAN SACHS	P		
(3) SEE ATTACHED GOLDMAN SACHS	P		
(4) SEE ATTACHED GOLDMAN SACHS	P		
(5) DESERT PARTNERS III	P		_
(6) DESERT PARTNERS IV	P		
(7) DESERT PARTNERS V	P		
(8) GOLDMAN SACHS			
(9)			
(10)			
(11)			
(12)			_
(13)			
(14)			
(15)			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
(1) 829,788		817,360	12,428
(2) 225,000		224,881	119
(3) 113,906		94,966	18,940
(4) 56			56
(5) 15,604			15,604
(6) 106,135			106,135
(7) 98,055			98,055
(8) 139,900			139,900
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

Complete only for assets show			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) Of Losses (from col. (h))
(1)			12,428
(2)			119
(3)			18,940
(4)			56
(5)			15,604
(6)			106,135
(7)			98,055
(8)			139,900
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

75-2806006	Federal 9	Federal Statements			
State	Statement 1 - Form 990-PF,	, Part I, Line 11 - Other Income	rincome	`	
Description		Revenue per Books	Net Investment Income	Adjusted Net Income	
DP III LEASE BONUS & OTHER IN DP IV LEASE BONUS & OTHER INC DP V LEASE BONUS & OTHER INC DP III - ROYALTY INCOME DP III - ROYALTY EXPENSE DP IV - ROYALTY INCOME DP IV - ROYALTY INCOME DP IV - ROYALTY EXPENSE DP V - ROYALTY EXPENSE		\$ 4,200 60,738 340,608 37,738 -38,390 314,089 -175,043 196,256 -130,823	\$ 4,200 60,738 340,608 37,738 -38,390 314,089 -175,043 196,256 -130,823 \$ 609,373		
(A)	Statement 2 - Form 990	- Form 990-PF, Part I, Line 18 - T	- Taxes		ĺ
Description	Total	Net Investment	Adjusted Net	Charitable Purpose	
DESERT PARTNERS III STAT ETAXES DESERT PARTNERS IV STATE TAXES DESERT PARTNERS V STATE TAXES FEDERAL INCOME TAX	\$ 329 53 984	\$ 329 53	w	S	
TOTAL	\$ 1,399	\$ 415	\$	\$	
Statement	3 - Form 990-PF,	Part I, Line 23 - Other	Other Expenses		
Description	Total	Net Investment	Adjusted Net	Charitable Purpose	
EXPENSES OFFICE SUPPLIES FOREIGN TAX EXPENSE INVESTMENT MANAGEMENT FEES	16,769 2,085 58,038	2,085	>	16,769	
SPONSORSHIPS TOTAL	\$ 77,992		8	\$ 17,869	
				1-3	

75-2806006

Federal Statements

Statement 5 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year		End of Year	 Fair Market Value
INVESTMENT - DESERT PARTNERS III INVESTMENT - DESERT PARTNERS IV INVESTMENT - DESERT PARTNERS V	\$ 615,623 2,915,447 4,274,255	\$	598,930 2,901,741 4,173,216	\$ 598,930 2,901,741 4,173,216
TOTAL	\$ 7,805,325	\$_	7,673,887	\$ 7,673,887

Statement 6 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	ginning f Year	 End of Year		
PAYROLL LIABILITIES	\$ 820	\$ 1,530		
TOTAL	\$ 820	\$ 1,530		

Statement 7 - Form 990-PF, Part III, Line 3 - Other Increases

Description		Amount
UNREALIZED GAINS	\$_	430,515
TOTAL	\$	430,515

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	Amount
NONE	\$
TOTAL	\$ 0

Form 990-PF, Part XV, Line 1b - Managers Who Own 10% or More Stock

Name of Manager	Amount	
NONE	\$ <u></u>	
TOTAL	, \$	0

Statement 8 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

ALL ORGANIZATIONS WILL BE REQUIRED TO FURNISH THE FOUNDATION WITH CURRENT FINANCIAL REPORTS, BUDGETS, LISTS OF THE OFFICERS AND DIRECTORS, AND PROOF THAT THE ORGANIZATION IS CURRENTLY QUALIFIED UNDER INTERNAL REVENUE CODE, SECTION 501(C)(3).

75-2806006	Federal Statements
	Form 990-PF, Part XV, Line 2c - Submission Deadlines
	Description
NONE	Description
	Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations
	Description
NONE	•

Statement 9 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt

Name		Address		
Address	Relationship	p Status	Purpose	Amount
FIRST UNITED METHODIST CHURCH	415 N	LEE		
ODESSA TX 79761	NONE	501(C)(3)	NICK WILLIAMS FAMILY LIFE CENTER	250,000
THE ODESSA CRISIS CENTER	910-B	S GRANT		
ODESSA TX 79761	NONE	501(C)(3)	LOUISE WOOD ANGEL HOUSE SHELTER	333,334
ODESSA COLLEGE	201 W	UNIVERSITY		
ODESSA TX 79764	NONE	501 (C) (3)	WOOD MATH & SCIENCE BUILDING	900.000
MEDICAL CENTER HEALTH SYSTEM FOUNDA P.O. BOX 7335	OUNDA P.O. B	OX 7335		
ODESSA TX 79760	NONE	501 (C) (3)	FOR SUPPORT OF THE CHARITABLE PROGRA	000,009
TOTAL				2,083,334

WOOD FAMILY FOUNDATION, INC. 75-2806006 FORM 990-PF ESTIMATES

Form	990-W		OMB No 1545-0976				
Depa	Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations) Partment of the Treasury Partment						2018
1	Unrelated business taxable inco	ome expected	ın the tax year			1	
2	Tax on the amount on line 1. See	instructions for t	ax computation			2	
3	Alternative minimum tax for trus	sts See instruc	ctions			3	
4	Total Add lines 2 and 3					4	
5	Estimated tax credits See instri	uctions				5	
6	Subtract line 5 from line 4					6	
7	Other taxes See instructions					7	
8	Total Add lines 6 and 7					8	
9	Credit for federal tax paid on fue	els See instruc	ctions			9	
10a b	Subtract line 9 from line 8 Note not required to make estimated instructions LIABII Enter the tax shown on the 2017 zero or the tax year was for less enter the amount from line 10a 2018 Estimated Tax. Enter the skip line 10b, enter the amount	tax payments LITY AD 7 return See in 5 than 12 monti on line 10c smaller of line	Private foundations, see JUSTMENT Instructions Caution: If this, skip this line and Interval of the org	3,097 10a 10b anization is required to	29,988	10c	29,988
	Skip line 105, error the amount	TOTAL INTE TODAY	(a)	(b)	(c)	100	(d)
11	Installment due dates. See instructions	11	05/15/18	06/15/18	09/17/18		12/17/18
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "larg organization" 2017 Overpayment. See instructions						30,000 12,625
14	Payment due (Subtract line 13 from line 12)	14					17,375

	990-PF	Underdistribution and Ex	2017			
Form	330-77	For calendar year 2017, or tax year beginning	07/01/17	, ending	12/31/17	2017
Name						
WOO	D FAMILY	FOINDATION INC			75-280	entification Number

Undistributed Income Carryovers Form 990-PF, Part XIII

Tax Year	Prior Undistributed Income				Next Year Carryover	
	Nontaxable or Previously Taxed	Taxable in 2017	Total per Year	Current Year Decreases	Nontaxable or Previously Taxed	Taxable in 2018
Years prior						
20 13						··
20 14						
20 15						
2016						
2017 902,090				902,090		
al Carryover to Next Year						

^{*} Carryover amount includes 4942(a) amounts

Excess Distribution Carryovers Form 990-PF, Part XIII

Current Year Next Year Preceding Tax Year Excess Distributions Decreases Carryover 1,743,554 1,743,554 2012 2013 249,967 249,967 2014 264,913 264,913 2015 2016 42,616 Current Year Excess Distribution Generated (2017) 557,496 Total Carryover to Next Year