$2\,9\,\mathbf{4}\,\mathbf{9}\,\mathbf{1}\,\mathbf{3}\,\mathbf{3}\,\mathbf{5}\,\mathbf{1}\,\mathbf{6}\,\mathbf{0}\,\mathbf{1}\,\mathbf{7}_{\text{OMB No}\ 1545-0052}$

2017

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information

	Departme	er&of the Treasury Revenue Service	► Go to w	nter soc ww.irs.	gov/Form990PF for inst	n this form as it ma ructions and the la	test		Open to Public Inspection	
	For cal	lendar year 2017 or	tax year beginnin	g	, 2017	, and ending		·		
	THE ROBIN Y. AND FRANK M. SEMPLE FAMILY					A	Employer Identification 82-6616612	number		
	FOUNDATION						В	Telephone number (see		
		SOUTH EVANS SA, OK 74136	ron circle				303-809-8089			
)	1013	A, OK /4130					c	If exemption application	ı ıs pending, check here. 🕨 🛛	
ノ , .	G Che	eck all that apply:	X Initial return		Initial return of a form	ner public charity	D	1 Foreign organizations, o	check here	
	,		Final return Address char	nne	Amended return Name change			2 Foreign organizations m	neeting the 85% test, check	
	H Che	eck type of organiza		•	1(c)(3) exempt private for	oundation()	1	here and attach comput	tation	
	[Section 4947(a)(1) nonexempt cha	ritable t	rust Other taxable p	private foundation	E	If private foundation sta under section 507(b)(1)		
		r market value of all assets om Part II, column (c), line		J Acc	counting method XC	ash Accrual	_	,,,,	. "	
	► \$, , , , , , , , , , , , , , , , , , , ,	9,804.	(Part I	Other (specify) , column (d) must be on	cash basis)	F	If the foundation is in a under section 507(b)(1)		
	Part	I Analysis of R	evenue and		(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements	
		columns (b), (c),	e total of amount and (d) may not	s in neces-	expenses per books	income		income	for charitable purposes	
		sarily equal the a (see instructions)	amounts in colum	n (a)					(cash basis only)	
		1 Contributions, gifts, gra	ants, etc., received (attach sch	edule).	50,755.	·				
		2 Check ► of the fo	oundation is not required to atta	ech Sch B					, ,	
2019			temporary cash investments		6.		6.	N,	/A	
		4 Dividends and interest 5 a Gross rents	from securities .		82.		82.			
2 7		b Net rental income or (loss)			-			W a		
	R	6 a Net gain or (loss) from b Gross sales price	sale of assets not on line 10		-1,039.	-				
FEB	E V	assets on line 6a	come (from Part IV, In	717.			0.			
	E N	8 Net short term can	oital gain	-,						
끶	U E	9 Income modification 10 a Gross sates less	ons 							
SCANNED		allowances								
S		b Less Cost of goods sold	<u> </u>		-	(a)		,,		
ഗ്		C Gross profit or (loss) (a				, ,	•		n 1 ft	
									1 0	
		12 Total Add lines 13 Compensation of a	1 through 11 officers, directors, trust	es etc	49,804.		88.			
		1	alaries and wages							
		15 Pension plans, en								
	A D M	16 a Legal fees (attach b Accounting fees	schedule)							
	- 1	C Other protessional fees								
	OFS	17 Interest 3	MAN. 20 2018	8	-					
	RR	18 Taxes (attack shedule 19 Depreciation (attac	ch	RS-OSC					8	
	1 1	schedule) and der	GDEN LIT						g '	
	G E	20 Occupancy 21 Travel, conference	<u> </u>	بـــا						
	A E	22 Printing and public								
	D P	23 Other expenses (a	illacii schedule)							
	EXPENSES	24 Total operating ar								
	š	expenses. Add lin 25 Contributions, gifts, gra						2		
		26 Total expenses ar			_	,	^			
		Add lines 24 and 2			0.		0.	ļ ,	0.	
		a Excess of revenue	e over expenses		40.004			,	.	
		and disbursemen	ts . come (if negative, ente	r 0)	49,804.	,	88.	8	<u> </u>	
			me (if negative, enter			e 15				

Page 2

Par	ыы	Balance Sheets	Attached schedules and amounts in the description column should be for end of-year amounts only	Beginning of year	End	of year
		Daidilloc Olicets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing		49,804	. 49,804.
	2	Savings and tempor	ary cash investments			
	3	Accounts receivable	• •			1 3 7 7 7
		Less, allowance for	doubtful accounts	-		
	4	Pledges receivable	·	1 1 1 1 1	C 159 Hrs	1.55 (200) 1 (200)
		Less allowance for	doubtful accounts ►	_		
	5	Grants receivable				
	_		1.			
	6	disqualified persons (attai	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	,	w 1 1 .	V 17 1,7 1,5	इ.स. १३ १ १५ १ स
Α	′	Less. allowance for	`	- `	1,1	
S		Inventories for sale				
A S E T	8					
Ţ	9	Prepaid expenses a	· ·			
S	10a	i Investments – US obligations (attach s	and state government			
	۱ ,	Investments — corporate				-
	l	: Investments — corporate	•			
	l	•	· ·	7 2 1	7 10 7 2	
	11	Investments - land, equipment: basis	buildings, and			
		Less accumulated deprec				*-\
		(attach schedule)	>			
	12	Investments - morte	gage loans			
	13	Investments - other	(attach schedule) .			
	-14	Land, buildings, and	equipment: basis >	1	4 14	3 3 3
	١.	Less: accumulated deprec			<u>-</u> :	
		(attach schedule)	. •			
	15	Other assets (descri)		
	16	Total assets (to be	completed by all filers – Also, see page 1, item I)	0.	49,804	. 49,804.
	17		nd accrued expenses	0.	43,004	49,004
์		Grants payable an	iu accided expenses			
A B	18	Deferred revenue	•			
Ĭ	19		to the first of the description of the second			- `
Ļ	20	•	tors, trustees, & other disqualified persons			
÷	,21	* *	s payable (attach schedule)			
Ì	22	Other liabilities (des	cribe •))		_
E S	23	Total liabilities (add	lines 17 through 22).	0.	l o	
			llow SFAS 117, check here			ii 등 1
		and complete lines	24 through 26, and lines 30 and 31.			
N F	24	Unrestricted			49,804	
ΕU	25	Temporarily restricte	ad		43,604	⊣ .:::: .
	l	Permanently restrict				-
A D	26	•				
A B A L A		and complete lines	o not follow SFAS 117, check here PU			
SĀ		•	•			
ŦĀ	27		orincipal, or current funds			⊣. ', '
S N C	28	• •	, or land, bldg , and equipment fund			
O E	29		ulated income, endowment, or other funds			
RS	30		fund balances (see instructions)	0.	49,804	· · · · · · · · · · · · · · · · · · ·
	31	(see instructions)	net assets/fund balances	0.	49,804	
Par	t III Z	(iges in Net Assets or Fund Baland		137001	
ч			alances at beginning of year - Part II, colu	* *	aree with	
•	end-d	of-year figure reported	d on prior year's return)	(), (0;	. 1	<u> </u>
2	Enter	r amount from Part I,	line 27a		2	49,804.
3	Other	increases not included in li	ne 2 (Itemize)		3	
4	Add I	ines 1, 2, and 3			. 4	49,804.
5	Decrea	ases not included in line 2 ((itemize)		5	
6			alances at end of year (line 4 minus line 5)) – Part II, column (b), li	ne 30 6	49,804.
BAA			TEEA0302L	08/24/17		Form 990-PF (2017)

Mai	Tilvas Capital Gains and I	Losses for Tax on Investme	nt income			
	(a) List and describe 2-story brick wareh	the kind(s) of property sold (for exouse; or common stock, 200 shares	ample, real estate, MLC Company)	(b) How acq P — Purcha D — Donat	ase (mo , dav, vr)	
1 8	101 ADOBE SYS INC.			D	VARIOUS	11/14/17
b 84 ABBVIE INC D					9/01/09	
	8 AMERICAN TOWER CO	DRPORATION		D	6/25/10	11/14/17
	51 APPLE INC			D	4/01/09	11/14/17
	79 APPLE INC			D D	VARIOUS	11/14/17
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain ((e) plus (f)	
				8,616.		-313.
t	.,,500.			8,035.		<u>-97.</u>
				1,224.		-32.
	0,1221			8,976.		-234.
	10/0121	the second secon		3,905.		-363.
	· · · · · · · · · · · · · · · · · · ·	ing gain in column (h) and owned b			(I) Gains (Co gain minus col (k),	
	(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		than -0-) or Losses (from col. (h))
			<u> </u>			-313.
t						<u>-97.</u>
						-32.
						-234.
	•				<u> </u>	-363.
2	Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	-	2	-1,039.
3	Net short-term capital gain or ((loss) as defined in sections 1222(5) and (6):			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c). See instructions. If	(loss), enter -0-	-	3	0.
Pai	t V Qualification Unde	r Section 4940(e) for Reduc	ed Tax on Net Investr	nent Inco	me	
(For	optional use by domestic private	e foundations subject to the section	4940(a) tax on net investr	nent income) N/A	
lf se	ction 4940(d)(2) applies, leave t	his nart hlank				
		·				
		ction 4942 tax on the distributable a	• •	ase period?	∐Yes	∐No
If 'Ye		fy under section 4940(e) Do not con				
		n each column for each year, see t		ng any entr		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets	(d) Distributio (col. (b) divide	on ratio
	2016					
	2015					
	2014					
	2013					
	2012					
2	Total of line 1, column (d)				2	
3		ne 5-year base period - divide the t n has been in existence if less than		the	3	
4	Enter the net value of nonchar	itable-use assets for 2017 from Par	t X, line 5		4	
5	Multiply line 4 by line 3			_	5	
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6	
7	Add lines 5 and 6				7	
8	Enter qualifying distributions fr	om Part XII, line 4			8	
	If line 8 is equal to or greater the Part VI instructions.	han line 7, check the box in Part VI	, line 1b, and complete tha	t part using	a 1% tax rate. Se	e the

Form 990-PF (2017) THE ROBIN Y. AND FRANK M. SEMPLE FAMILY	82-6616612		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see instruction	15)	
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	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,	- · 1		2.
check here. ▶ ☐ and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	J 		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
foundations only; others, enter -0-)	. 2		0.
3 Add lines 1 and 2	3		2.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2.
6 Credits/Payments:			
a 2017 estimated tax pmts and 2016 overpayment credited to 2017 . 6a			
b Exempt foreign organizations — tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 c			
d Backup withholding erroneously withheld 6d			
7 Total credits and payments. Add lines 6a through 6d	 		0.
8 Enter any penalty for underpayment of estimated tax. Check here form 2220 is attached	8		<u> </u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9		2.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10		
11 Enter the amount of line 10 to be Credited to 2018 estimated tax Refunded	► 11		
Part VII-A Statements Regarding Activities			
		Yes	s No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or diparticipate or intervene in any political campaign?		1 a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1 b	x
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materi or distributed by the foundation in connection with the activities.	als published		
c Did the foundation file Form 1120-POL for this year?		1 c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation	0		
(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp	0.	-	
foundation managers. >\$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	X
If 'Yes,' attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	articles		
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the chang	es	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X
If 'Yes,' attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
 By language in the governing instrument, or 		1	
 By state legislation that effectively amends the governing instrument so that no mandatory directions with the state law remain in the governing instrument? 	that conflict	6	$\frac{1}{x}$
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV		7 X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions	· •	^ ^	+-1
OK			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G ² If 'No,' attach explanation		8 b X	+/_
	\/3\ or 4042/\/E\	T A	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes,' cor	mplete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing and addresses. SEE STATI	EMENT 1	10 X	
BAA	Fo	orm 990-PF	" (2017)

Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person advisory privileges? If 'Yes,' attach statement. See instructions	had 12	2	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	η ^ρ . 1	3 X	
1.0	Website address • N/A			
14	The books are in care of ► FRANK_M. SEMPLE Located at ► 6685 SOUTH EVANSTON CIRCLE TULSA OK ZIP + 4 ► 7413	<u>303-809</u> -	-8089	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here.		/Ā	- [
	and enter the amount of tax-exempt interest received or accrued during the year .	5		N/A
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority overbank, securities, or other financial account in a foreign country?	ra 1 6	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ▶			
Pai	rt 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.		Yes	No
1 a	a 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?	X No		}
		X No		
		X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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	XNo		
	(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		
t	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		lb N	/A
	Organizations relying on a current notice regarding disaster assistance, check here.			
C	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?		l c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	XNo		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20	_		
t	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)	- 2	2b N	/A
c	c 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	İ	ŀ	
3 a	a 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		
t	b If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017)			/3
_	,		3b N	/A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4	la	X
t	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			ļ
BAA	the tax year beginning in 2017?		1 b 990-PF	(2017)
~~4		COLU	コンリ・ピア	/)

Form 990-PF (2017) THE ROBIN Y. AND F Part VII-B Statements Regarding Activiti	RANK M. SEMPLE	FAMILY	82-661	6612	Pa	age 6
5a During the year, did the foundation pay or incu		14/20 May be Neu	uned (continued)		Yes	No
(1) Carry on propaganda, or otherwise attemp	•	(section 4945(e))?	Yes X	No -	res	NO
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	ic election (see section tion drive?	4955); or to carry	Yes X	No		1
(3) Provide a grant to an individual for travel,	,	•	Yes X	No		
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? See instructions	an a charıtable, etc , or	ganization described	. Yes X	No		
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No		
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in See instructions	the transactions fail to a current notice regard	qualify under the excep ing disaster assistance:	tions ?	5 b	N	/ ħ
Organizations relying on a current notice regar	ding disaster assistance	e, check here	► 🗆	35	147	Λ
c If the answer is 'Yes' to question 5a(4), does that because it maintained expenditure responsif 'Yes,' attach the statement required by Regulation.	ibility for the grant?		N/A Yes	No		
6a Did the foundation, during the year, receive an on a personal benefit contract?			∏Yes X	No		
b Did the foundation, during the year, pay premit If 'Yes' to 6b, file Form 8870	ums, directly or indirect	ly, on a personal benef		6 b		Х
7a At any time during the tax year, was the found	ation a party to a probit	oited tax shelter transac	ction? . Yes X	No		
b If 'Yes,' did the foundation receive any proceed	· •				 	•
Part VIII Information About Officers, D				.,	 i.	
and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		g,gg		,	
1 List all officers, directors, trustees, and found	ation managers and th	eir compensation. See	instructions.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other all		
ROBIN Y. SEMPLE 6685 SOUTH EVANSTON CIRCLE	TRUSTEE 0	0.	0.			0 .
TULSA, OK 74136	TOIICTEE		0.		· -	
FRANK M. SEMPLE 6685 SOUTH EVANSTON CIRCLE TULSA, OK 74136	TRUSTEE 1.00	0.	0.			0 .
		· · · · · · · · · · · · · · · · · · ·				
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 — see ir	structions) If none er	ter 'NONE '		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	acco owan	ount, ces
NONE						•
		,				
Total number of other employees paid over \$50,000	TEEA0306L 0	3/24/17	-	Form 990	.PF (2	0 (2017

Form 990-PF (2017)

Form 990-PF (2017) THE ROBIN Y. AND FRANK M. SEMPLE FAMILY 82-6616612 Page 7 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) Compensation NONE Total number of others receiving over \$50,000 for professional services 0 Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant atatistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses N/A 3 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 N/A All other program-related investments. See instructions.

Total. Add lines 1 through 3

BAA

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see, instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; a Average monthly fair market value of securities 1 a b Average of monthly cash balances 1 b 6,225 c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 6,225 e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5 6 307 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) Minimum investment return from Part X, line 6 1 307. 2a Tax on investment income for 2017 from Part VI, line 5 2 a 2 b Income tax for 2017. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2 c 3 Distributable amount before adjustments Subtract line 2c from line 1 3 305 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 5 305 Deduction from distributable amount (see instructions). 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 305 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 261 a b Program-related investments - total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required). 3 a **b** Cash distribution test (attach the required schedule) 3 h 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4 4 0. 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 5 Adjusted qualifying distributions. Subtract line 5 from line 4 0. 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

BAA

Form 990-PF (2017)

Part XIII Undistributed Income (see instructions)

(a) (b) (c) Corpus Years prior to 2016 2016	2017
1 Distributable amount for 2017 from Part XI, line 7	305.
2 Undistributed income, if any, as of the end of 2017.	000.
a Enter amount for 2016 only	
b Total for prior years: 20 , 20 , 20 O.	
3 Excess distributions carryover, if any, to 2017	
a From 2012	
b From 2013	•
c From 2014	• '
d From 2015	
e From 2016	
f Total of lines 3a through e	-5
4 Qualifying distributions for 2017 from Part	•
XII, line 4· ► \$	'
a Applied to 2016, but not more than line 2a	
b Applied to undistributed income of prior years (Election required – see instructions) 0.	
c Treated as distributions out of corpus (Election required – see instructions)	
d Applied to 2017 distributable amount	0.
e Remaining amount distributed out of corpus	
5 Excess distributions carryover applied to 2017 0.	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	
same amount must be shown in column (a).)	
6 Enter the net total of each column as	Í
indicated below:	٠ .
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income Subtract line 4b from line 2b	
c Enter the amount of prior years' undistributed	_
income for which a notice of deficiency has been issued, or on which the section 4942(a)	·
tax has been previously assessed 0.]
d Subtract line 6c from line 6b. Taxable	
amount – see instructions.	
e Undistributed income for 2016 Subtract line 4a from	
line 2a. Taxable amount — see instructions 0.	
f Undistributed income for 2017. Subtract lines	
4d and 5 from line 1. This amount must be distributed in 2018.	305
7 Amounts treated as distributions out of	305.
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required – see instructions)	
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) 0.	
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a . 0	•
10 Analysis of line 9:	
a Excess from 2013	
b Excess from 2014	
c Excess from 2015	-
d Excess from 2016	
e Excess from 2017	

Form 990-PF (2017) THE ROBIN Y. ANI			1) (1) (1)	82-661661	
Part XIV Private Operating Founda				 '	N/A
1 a If the foundation has received a ruling or is effective for 2017, enter the date of the	ruling.			., •	4040()(5)
b Check box to indicate whether the founda		erating toundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(h) 2016	Prior 3 years (c) 2015	(d)-2014	(e) Total
investment return from Part X for each year listed	(a) 2017	(b) 2016	(6) 2015	(6)2014	
b 85% of line 2a					
 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					
 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.					
a '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.					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royafties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during t	n (Complete this	s part only if the	foundation ha	d \$5,000 or more	e in
1 Information Regarding Foundation Mana					
a List any managers of the foundation who close of any tax year (but only if they have		ore than 2% of the t	otal contributions re	eceived by the found	ation before the
close of any tax year (but only if they have ROBIN Y. SEMPLE	e contributed more	than \$5,000) (See	section 507(d)(2))		
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	f the stock of a corp 0% or greater intere	poration (or an equa est.	illy large portion of t	ne ownership of
2 Information Regarding Contribution, Grace Check here X if the foundation only requests for funds. If the foundation make 2a, b, c, and d See instructions.	makes contributions	to preselected char	ritable organizations		
a The name, address, and telephone numb	er or email address	of the person to wh	om applications sho	ould be addressed.	
b The form in which applications should be	submitted and infor	mation and material	ls they should includ	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charitat	ble fields, kinds of i	nstitutions, or other	factors:
					000 PE (0017)
BAA	TE	EEA0310L 09/14/17		F	orm 990-PF (2017)

Page 11

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	Foundation status of	Purpose of grant or contribution	N/A Amount	
Name and address (home or business)	or substantial contributor	recipient	Contribution		
a Paid during the year					
	•				
Total		T	► 3a		
b Approved for future payment					
Total			► 3b		
17161				<u> </u>	

	VI-A Alialysis of income-Producing		<u> </u>	Terri	. 510 510 514	
Enter gi	ross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
1 Pi	rogram service revenue:	0000		code		(500 mstractions)
a		1		_		
b						
°.—		 		 		
d		ļ				
e		-				
' -		<u> </u>		 		
-	ees and contracts from government agencies			 		
	embership dues and assessments					
	erest on savings and temporary cash investments			14	6.	
	vidends and interest from securities			14	82.	·
	et rental income or (loss) from real estate:			-		
	ebt-financed property					
	ot debt-financed property			 		
	t rental income or (loss) from personal property			 		
	ther investment income			 		
	in or (loss) from sales of assets other than inventory			18	-1,039.	
	et income or (loss) from special events					
	ross profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
	ther revenue:					
a				-		
b _		+		+		
_	· · · · · · · · · · · · · · · · · · ·			 		
_ d						
. e_	ubtotal. Add columns (b), (d), and (e)	 		 	0.54	
ים פו		t l		ii	-951.	
					12	0=1
13 To	otal. Add line 12, columns (b), (d), and (e)	000)			13	-951
13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculate		hmont of Evenir	t Durnos	•	-951
13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation. (VI-B Relationship of Activities to the	e Accomplis			es .	
13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation. (VI-B Relationship of Activities to the	e Accomplis			es .	
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Form 990-PF (2017) THE ROBIN Y. AND FRANK M. SEMPLE FAMILY 82-6616612 [Rart XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did	the organization direct	ly or indirectly e	engage in any of the following w	th any oth	ner organization			Yes	No
des	scribed in section 501(c) of the Code (o	ther than section 501(c)(3) orga	nizations)	or in section 52	27,		·	ĺ
	ating to political organizations for the reports		a noncharitable exempt organiz	ation of					
	Cash	ig louridation to	a nonchantable exempt organiz	ation or.			. 1 a (1)		Х
٠.	Other assets		•		·		1 a (2)		X
b Oth	ner transactions.								
(1)	Sales of assets to a n	oncharitable exe	empt organization				1 b (1)		Х
(2)	Purchases of assets for	om a noncharita	able exempt organization				1 b (2)		X
(3)	Rental of facilities, eq	uipment, or othe	r assets				1 b (3)		Х
(4)	Reimbursement arrang	gements					1 b (4)		Х
(5)	Loans or loan guarant	ees					1 b (5)		Х
(6)	Performance of service	es or membersh	ip or fundraising solicitations				1 b (6)		Х
c Sh	aring of facilities, equip	ment, mailing lis	sts, other assets, or paid employ	/ees	•		1 c		Χ
				0.1	45 1 11 1	1 . 41 . 6		,	
d if the any	ne answer to any of the goods, other assets, o transaction or sharing	r above is 'Yes,' r services given arrangement, s	complete the following schedule by the reporting foundation. If t how in column (d) the value of the	e. Column he foundat he goods,	tion received les other assets, o	iys snow the fair ss than fair mark ir services receiv	market value ket value in red.	e or	
(a) Line n	o (b) Amount involved	(c) Name	of noncharitable exempt organization	(d)	Description of trans	sfers, transactions, a	nd sharing arran	gements	s
N/A									
				_					
									
									
				_					
				-					
				-					
	<u> </u>								
									
				-					
							· ··		
des	he foundation directly of scribed in section 501 (of Yes,' complete the follo) of the Code (o	ated with, or related to, one or i ther than section 501(c)(3)) or i	nore tax-e n section s	exempt organiza 527?	ations	Yes	X	No
	(a) Name of organiz		(b) Type of organizatio	n T	(c) Description of	relationship		
N/A	(4)		(2) 3)		<u> </u>	, ,			
,									
							· · · · · · · · · · · · · · · · · · ·		
	Inder penalties of perjury, I de	clare that I have exan	nined this return, including accompanying	schedules an	d statements, and to	the best of my knowl	edge and belief,	t is true	
Sign	orrect, and complete Declarat	ion of preparer (other	than taxpayer) is based on all information	i or writeri pre	parer rias arry KriOWI	eade	May the	RS disc	uss
Here	b Guara		1//18	,	noriempp.		this retur	n with th	ne
-	Signature of officer or trustee	2	7//5/70 Date		TRUSTEE		See mstr	uctions	\neg
	Print/Type preparer's		Preparer's signature	·	Date	Chast	DTIN	Yes	No
D-11			1 ans	18	1. 1.0110	Check self-employed	'	706	
Paid	REBECCA DO		REBECCA DOZIER		711/14/10		P01038	190	
Prepar			DOZIER & HELLAND, P.	<u> </u>		Firm's EIN 26	<u>-1109909</u>		
Use Or	Firm's address			900		Phone no 01	0_607_00	06	
BAA	<u> </u>	TULSA, OK	74135			Phone no 91	8-627-22		2017
BAA							Form 99	U•PF ((/۱۷ع,

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

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

Name of the organization THE ROBIN Y. AN	D FRANK M SEMPLE FAMILY	Employer identification number
FOUNDATION		82-6616612
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated	as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
FORM 990-PF		
	4947(a)(1) nonexempt charitable trust treated as a	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) o	rganization can check boxes for both the General Rule an	id a Special Rule. See instructions.
General Rule X For an organization filing Form 990, 990-property) from any one contributor. Com	-EZ, or 990-PF that received, during the year, contribution plete Parts I and II See instructions for determining a cor	s totaling \$5,000 or more (in money or ntributor's total contributions.
Special Rules	•	
under sections 509(a)(1) and 170(b)(1)(A	501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% A)(vi), that checked Schedule A (Form 990 or 990-EZ), Paig the year, total contributions of the greater of (1) \$5,000 990-EZ, line 1. Complete Parts I and II.	rt II. line 13, 16a, or 16b, and that
during the year, total contributions of mo	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece ore than \$1,000 <i>exclusively</i> for religious, charitable, scienti to children or animals. Complete Parts I, II, and III.	ived from any one contributor, fic, literary, or educational
during the year, contributions exclusively \$1,000 If this box is checked, enter here charitable, etc., purpose. Don't complete	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece or for religious, charitable, etc., purposes, but no such context the total contributions that were received during the year any of the parts unless the General Rule applies to this catable, etc., contributions totaling \$5,000 or more during the	ributions totaled more than for an <i>exclusively</i> religious, organization because
990-PF), but it must answer 'No' on Part IV.	by the General Rule and/or the Special Rules doesn't file S line 2, of its Form 990, or check the box on line H of its F he filing requirements of Schedule B (Form 990, 990-EZ, o	form 990-EZ or on its Form 990-PF.

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

(b) Name, address, and ZIP + 4

(a) Number

BAA

(Complete Part II for noncash contributions.)

Person Payroll Noncash

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

(d) Type of contribution

(c) Total contributions

			
	 		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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Page

1 to

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

1 of Part II

Name of organization

BAA

THE ROBIN Y. AND FRANK M. SEMPLE FAMILY

Employer identification number

82-6616612

Partill	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
1		\$ 50,755.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
-		\$				

1 of Part III

THE ROL	nization BIN Y. AND FRANK M. SEMPLE FA	AMILY		82-6616612			
Part III,	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8),						
or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,							
(a) No. from		(b) Purpose of gift Use of gift		(d) Description of how gift is held			
Part I							
	N/A						
	(e) Transfer of gift						
	Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(2)	(b)	(6)		(d)			
(a) No. from Part I	Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
			+				
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
Part I				·			
	,	(e) Transfer of gift					
	Transferee's name, addres		Rela	tionship of transferor to transferee			
	, ,			(.)\			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
- raiti							
		(e) Transfer of gift					
	Transferee's name, addres		Relationship of transferor to transferee				
	<u> </u>						

2017

FEDERAL STATEMENTS

THE ROBIN Y. AND FRANK M. SEMPLE FAMILY FOUNDATION

PAGE 1

82-6616612

STATEMENT 1 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

ROBIN SEMPLE REVOCABLE TRUST

6685 SOUTH EVANSTON CIRCLE TULSA, OK 74136