Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

2018

Open to Public Inspection ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2018 or tax year beginning 2018, and ending 20 Name of foundation A Employer identification number MOUNTAIN TOP FOUNDATION 35-2462050 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 4037 NEPTUNE DR (405)844 - 9995City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ OKLAHOMA CITY OK 73116 ☐ Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here . Amended return ☐ Final return 2. Foreign organizations meeting the 85% test. X Address change ☐ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation 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: ☑ Cash ☐ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), ☐ Other (specify) under section 507(b)(1)(B), check here ▶ 🗀 line 16) ▶ \$ 13,854. (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes books the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2,933 2 Check ► ☐ if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments O SCANISCANINED FEB 2 1 2020 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . . 12 Total. Add lines 1 through 11 . . 2,933 0. 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Other professional fees (attach schedule) C RECEIVED 17 18 Taxes (attach schedule) (see instructions) . 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings . OGDEN 22 Printing and publications . . . Other expenses (attach schedule) See .Stmt. 23 36 24 Total operating and administrative expenses. Add lines 13 through 23 36 25 Contributions, gifts, grants paid 5,972 972 26 Total expenses and disbursements. Add lines 24 and 25 6,008. 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements -3.075" 15 m 15 7 Net-investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) . THE STATE OF 7.3.1 (有名: " . "

For Paperwork Reduction Act Notice, see instructions.

Cat No. 11289X

Form **990-PF** (2018)

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P	Part II Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End	of year		
		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	16,929.	13,854.	13,854.		
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶		10 1 A			
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►	The second of the second				
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	İ	disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶		•			
		Less: allowance for doubtful accounts ▶					
Assets	8	Inventories for sale or use					
SS	9	Prepaid expenses and deferred charges					
Ä	10a	Investments – U.S. and state government obligations (attach schedule)					
	b	Investments - corporate stock (attach schedule)					
	C	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment: basis ▶					
		Less: accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment: basis ▶	-		<u> </u>		
		Less: accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe ►					
	16	Total assets (to be completed by all filers—see the					
	4=	ınstructions. Also, see page 1, ıtem I)	16,929.	13,854.	13,854.		
	17	Accounts payable and accrued expenses					
es	18	Grants payable					
Liabilities	19	Deferred revenue					
ğ	20	Loans from officers, directors, trustees, and other disqualified persons					
Ë	21 22	Mortgages and other notes payable (attach schedule)			- C. C.		
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			<u> </u>		
	23			<u>-</u>	3		
es		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.					
lances	24	Unrestricted					
ala	25	Temporarily restricted		<u>.</u>			
ä	26	Permanently restricted					
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here ► 🗵			174		
Fu		and complete lines 27 through 31.					
or	27	Capital stock, trust principal, or current funds					
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
Se	29	Retained earnings, accumulated income, endowment, or other funds	16,929.	13,854.			
۲	30	Total net assets or fund balances (see instructions)	16,929.	13,854.			
<u>e</u>	31	Total liabilities and net assets/fund balances (see	10/3231	10,001.	1		
~		instructions)	16,929.	13,854.	The State of		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			<u></u>		
1	Tota	I net assets or fund balances at beginning of year-Part II, colur	nn (a), line 30 (mus	t agree with			
		of-year figure reported on prior year's return)			16,929.		
2		r amount from Part I, line 27a		2	-3,075.		
3			•••••	3			
4		lines 1, 2, and 3		4	13,854.		
5	Decr	reases not included in line 2 (itemize)		5			
6	Tota	eases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lir	ne 30 6	13,854.		

Par	IV Capital Gains and	Losses for Tax on Investme	nt Income	·		
		i(s) of property sold (for example, real esta e, or common stock, 200 shs MLC Co.)	te,	(b) How acquired P-Purchase D-Donation	(c) Date acquir (mo , day, yr	
1a						
<u>b</u>						
<u>C</u>						
<u>d</u>						
<u>е</u>				<u> </u>		
	(e) Gross sales price (f) Depreciation allowed (or allowable)			other basis nse of sale) Gain or (loss) olus (f) minus (g))
<u>a</u> b						
C						
d						·
е						
	Complete only for assets show	ing gain in column (h) and owned by	the foundation	on 12/31/69.	(I) Gains	(Col. (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	col (k), bu	ut not less than -0-) or ses (from col (h))
а						
b						
C				-		· · · · · · · · · · · · · · · · · · ·
<u>d</u>						
е		(If goin alo	a anter in Da	white box 7		
2	Capital gain net income or (HELCADIIALIOSSI / "	o enter in Pa nter -0- in Par		2	
3		or (loss) as defined in sections 12	222(5) and (6)	: [_	
		line 8, column (c). See instruction			3	
Part	V Qualification Under	r Section 4940(e) for Reduce	d Tax on N	et Investment		
		ite foundations subject to the sec				
		·				
r sec	tion 4940(d)(2) applies, leave t	this part blank.				
		ection 4942 tax on the distributab alify under section 4940(e). Do no			ase period?	☐ Yes 🗵 No
1		nt in each column for each year;			king any entri	es.
	(a) Base period years	(b)		(c)		(d) Distribution ratio
Cale	endar year (or tax year beginning in)	Adjusted qualifying distributions		noncharitable-use ass	sets (col	(b) divided by col (c))
	2017	8,006		17,24		0.464385
	2016	24,540		14,45		1.698035
	2015	9,150		28,82		0.317389
	2014	4,050		17,97		0.225376
	2013	10,400		15,85	9.	0.655779
2	Total of line 1, column (d)				. 2	2 260064
3	• • •	r the 5-year base period—divide			—	3.360964
3		ndation has been in existence if l				0.672193
4	Enter the net value of nonch	arıtable-use assets for 2018 from	Part X, line s	5	. 4	17,322.
5	Multiply line 4 by line 3 .				. 5	11,644.
6	Enter 1% of net investment i	ncome (1% of Part I, line 27b)			. 6	0.
7	Add lines 5 and 6				. 7	11,644.
8		from Part XII, line 4			. 8	5,972.
	If line 8 is equal to or greater	r than line 7, check the box in Pa	art VI, line 1b,	and complete th	at part using	a 1% tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	e instructions)						
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.	112						
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)							
b								
	here ▶ □ and enter 1% of Part I, line 27b	10 10 20 10 10						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	was the same of th						
	Part I, line 12, col. (b).							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	0.						
3	Add lines 1 and 2	0.						
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	0.						
6	Credits/Payments:							
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a							
b	Exempt foreign organizations—tax withheld at source 6b							
С	Tax paid with application for extension of time to file (Form 8868) . 6c 0.							
d	Backup withholding erroneously withheld	- 4 4						
7	Total credits and payments. Add lines 6a through 6d	0.						
8	Enter any penalty for underpayment of estimated tax. Check here [] if Form 2220 is attached 8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9	0.						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	0.						
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ 11							
Part	VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did							
_	participate or intervene in any political campaign?	1a ×						
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1						
	instructions for the definition	1b ×						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	ls is in the						
_	published or distributed by the foundation in connection with the activities.	40 3						
C	Did the foundation file Form 1120-POL for this year?	1c X						
d								
е	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
E	on foundation managers. ► \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 ×						
_	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	1 2 3						
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3 ×						
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a ×						
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b N/A						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 ×						
	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:	D 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10						
	By language in the governing instrument, or	展送 [4]						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	at · · · · ·						
	conflict with the state law remain in the governing instrument?	6 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 X							
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	3. 7						
	OK							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	al 7.3 5.4 42						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b ×						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of	or I The North Company						
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes							
	complete Part XIV	9 × 4						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	ir						
	names and addresses	10 X						

Pai	Statements Regarding Activities (continued)	_		
		美国教	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		. ×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	4.0		
13	person had advisory privileges? If "Yes," attach statement. See instructions	12	×	×
	Website address N/A			İ
14	The books are in care of ► MARK SHEETS Telephone no. ► (405)	844-	9995	.
	Located at ► 4037 NEPTUNE DR OKLAHOMA CITY OK ZIP+4 ► 73116			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ [
40	•	/A		
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			A. (4
	the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
•	disqualified person?	7.	E	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🗵 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	5		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b	7	<u>認</u> /A
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □	386		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
ь	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	2	Ά
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			
3a	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	凝		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	禮		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		20	
	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 2018.)	3b	N /	// (A)
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>*\</u> ×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	2500	建	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		×

Part	VII-B Statements Regarding Activitie	s for Which For	n 4720	May Be I	Requir	ed (conti	nued)		
5a				<u></u>	•			Yes	No
	(1) Carry on propaganda, or otherwise attempt(2) Influence the outcome of any specific pub	lic election (see se				☐ Yes	⊠ No		
	directly or indirectly, any voter registration drive?								
	(3) Provide a grant to an individual for travel, st(4) Provide a grant to an organization other that					☐ Yes	⊠ No		
	section 4945(d)(4)(A)? See instructions					☐Yes	⊠ No	*****	rep. V
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to						X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of tin Regulations section 53.4945 or in a current n	he transactions fail	to qual	ify under th	e exce	ptions des			
	Organizations relying on a current notice regard						▶ [THE REAL PROPERTY.	
С	If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibilit						□No		
	If "Yes," attach the statement required by Regu	lations section 53.4	945–5(c	i).		_			
6a	Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or i	ndirectly · · ·	y, to pay pr	emiums 	S ☐ Yes	⊠ No		•
b	Did the foundation, during the year, pay premiu If "Yes" to 6b, file Form 8870.	ms, directly or indir	ectly, or	n a persona	l benefi	t contract	? .	6b	×
	At any time during the tax year, was the foundation					☐ Yes			
	If "Yes," did the foundation receive any proceed	is or have any net i	ncome a	attributable	to the t	ransactior	n? .	7b ~/	Α
8	Is the foundation subject to the section 4960 to remuneration or excess parachute payment(s) of	ax on payment(s) of	more	than \$1,000),000 ir				ļ·.;
Part	VIII Information About Officers, Direct								
	and Contractors	rioro, rraoteco, i	ounde		ugers,	· ···g····y ·	aid L	inployees,	
1	List all officers, directors, trustees, and found	dation managers a	nd thei	r compens	ation. S	See instru	ctions	S	
	(a) Name and address	(b) Title, and average hours per week	(H	mpensation not paid,	emple	Contributions byee benefit	plans	(e) Expense acco	
		devoted to position	e	nter -0-)	and det	erred compe	nsation	Other allowand	
	A. SHEETS	DIRECTOR		•	and def	errea compe		otrier allowance	-
4037	NEPTUNE DR OKLAHOMA CITY OK 73116	DIRECTOR 0.50		0 .	and def	erred compe	nsation 0.	otter allowalic	
4037 SARA	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS	DIRECTOR 0.50)	0.	and det	erred compe	0.	Otter allowance	0.
4037 SARA	NEPTUNE DR OKLAHOMA CITY OK 73116	DIRECTOR 0.50)	•	and def	erred compe		other allowant	
4037 SARA	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS	DIRECTOR 0.50)	0.	and def	erred compe	0.	other allowant	0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS	DIRECTOR 0.50 DIRECTOR 0.50)	0.			0.		0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 es (other than the	sse incl	0. 0. uded on li	ne 1-	see instru	0.	s). If none, e	0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe	DIRECTOR 0.50 DIRECTOR 0.50 es (other than the	se incl	0.	ne 1-	see instru	0. 0. uctions to benefit eferred		0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 c) (b) Title, and hours per hours	se incl	0. 0. uded on li	ne 1-	see instru (d) Contribu employee I plans and d	0. 0. uctions to benefit eferred	s). If none, e	0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 c) (b) Title, and hours per hours	se incl	0. 0. uded on li	ne 1-	see instru (d) Contribu employee I plans and d	0. 0. uctions to benefit eferred	s). If none, e	0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 c) (b) Title, and hours per hours	se incl	0. 0. uded on li	ne 1-	see instru (d) Contribu employee I plans and d	0. 0. uctions to benefit eferred	s). If none, e	0.
4037 SARA 4037	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 c) (b) Title, and hours per hours	se incl	0. 0. uded on li	ne 1-	see instru (d) Contribu employee I plans and d	0. 0. uctions to benefit eferred	s). If none, e	0. 0. nter
4037 SARA 4037 2	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 c) (b) Title, and hours per hours	se incl	0. 0. uded on li	ne 1-	see instru (d) Contribu employee I plans and d	0. 0. uctions to benefit eferred	s). If none, e	0. 0. nter
4037 SARA 4037 2	NEPTUNE DR OKLAHOMA CITY OK 73116 H J. SHEETS NEPTUNE DR OKLAHOMA CITY OK 73116 Compensation of five highest-paid employe "NONE."	DIRECTOR 0.50 DIRECTOR 0.50 c) (b) Title, and hours per hours	se incl	0. 0. uded on li	ne 1-	(d) Contribu employee I plans and d compens	0. 0. uctions to benefit eferred	s). If none, e	0.

3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		<u> </u>
		5
	number of others receiving over \$50,000 for professional services	0
	IX-A Summary of Direct Charitable Activities	1
Lis	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
		0
2		
	······································	
3		
4		
	······································	
Par	IX-B Summary of Program-Related Investments (see instructions)	1
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
		0
2	······································	
All	other program-related investments. See instructions	
3		
otal	Add lines 1 through 3	0. Form 990-PF (2018
		Earm 4411-PF (2018

Part	see instructions,)	ign iounc	iations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	500.5	·····
•	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	17,586.
C	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	17,586.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	17,586.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	264.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17,322.
6	Minimum investment return. Enter 5% of line 5	6	866.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundatio	ns
	and certain foreign organizations, check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	866.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	866.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	866.
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,		
	<u>Ine 1 </u>	7	866.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	5,972.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	<u></u>
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	5 , 972.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,972.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

Par	XIII Undistributed Income (see instruction	ons)	*		
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI,				0.55
2	line 7				866.
a	Enter amount for 2017 only		,		
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2018:				
а	From 2013 10,314.				
b	From 2014				
C	From 2015				
d	From 2016	,			
e f	From 2017	51,428.			ļ
4	Qualifying distributions for 2018 from Part XII,	31,420.			
-	line 4: ► \$ 5,972.	'			
а	Applied to 2017, but not more than line 2a .				
b	Applied to undistributed income of prior years				,
	(Election required - see instructions)				2
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2018 distributable amount				866.
e	Remaining amount distributed out of corpus	5,106.			
5	Excess distributions carryover applied to 2018 (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. Subtract line 5	56,534.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
е	Undistributed income for 2017. Subtract line				
	4a from line 2a. Taxable amount—see				
_	instructions		<u></u>	0.	
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019			-	0.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	,			
8	Excess distributions carryover from 2013 not				
-	applied on line 5 or line 7 (see instructions) .	10,314.			
9	Excess distributions carryover to 2019.				
4-	Subtract lines 7 and 8 from line 6a	46,220.			
10	Analysis of line 9:	-			,
a b	Excess from 2014				•
C	Excess from 2015				
d	Excess from 2017				•
e	Excess from 2018 5,106.				+

roini 9	90-FF (2016)					Page II
Part	XIV Private Operating Founda	tions (see ınstr	uctions and Part	VII-A, question 9	9)	N/A
1a	If the foundation has received a ruling	or determination	n letter that it is a	private operating		
	foundation, and the ruling is effective fo	r 2018, enter the c	late of the ruling .	i i ▶		
b	Check box to indicate whether the four	ndation is a privat	e operating founda	tion described in s	ection 🗌 4942(j)(3	or 🗌 4942(j)(5
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,				1	
	line 4 for each year listed					
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.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:			,	1	
а	"Assets" alternative test - enter.					
	(1) Value of all assets				1	
	(2) Value of assets qualifying under				-	
	section 4942(j)(3)(B)(i)				1	
b	"Endowment" alternative test-enter 2/3			<u>-</u>		
	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, paýments on				1	
	securities loans (section					
	512(a)(5)), or royalties)			1		
	and 5 or more exempt					
	organizatjóns as provided in					
	section 4942(j)(3)(B)(iii)		<u> </u>			
	(3) Largest amount of support from an exempt organization					
						_
Doub	(4) Gross investment income	(O	 	 	-d 65 000	
Part		•	•	ne toundation n	ad \$5,000 or mo	re in assets at
	any time during the year-		18.)			
1	Information Regarding Foundation	•	.4	/ -f +b- +-+-!	alle care and a second to	
а	List any managers of the foundation vibefore the close of any tax year (but o					y the foundation
,	- ·	rily if they have of	ontributed more th	iaii \$5,000). (See S	ection 507(a)(z).)	
	MARK & SARAH SHEETS List any managers of the foundation	b.a. a.v.m. 400/. a.		-lf	. /	
D	ownership of a partnership or other en					je portion of the
,	· · ·	itity) Or writer the	iounuation nas a	10 70 Or greater into	51 6 51.	
	N/A	0:41.	O-b-lbis -	4- D		
2	Information Regarding Contribution			· -		
	Check here ► 🗵 if the foundation of					
	unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See in:		gitts, grants, etc.,	to individuals or o	rganizations under t	otner conditions,
				- 1 1	At a second and the second	
а	The name, address, and telephone numbers	mber or email add	aress of the persor	n to wnom applica	tions should be add	iressed:
	NA					
	<u></u>	h = a b	d to form + t			
b	The form in which applications should	be submitted and	d information and i	materials they sho	uld include:	
	NIA					
						
С	Any submission deadlines:					
	~ /A			.1	11 1 1 1 1	
d	Any restrictions or limitations on aw	ards, such as b	y geographical ar	eas, charitable fie	elas, kinds of instit	utions, or other
	factors:					
	N/A					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

5 Grants and Contributions Faid Buring t			i i	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			<u> </u>
STUDENT MOBILIZATION				
PO BOX 567				
CONWAY AR 72003		NONE	CAMPUS MINISTRY	2,972
NATIONAL MS SOCIETY		110112		2,3,2
733 THIRD AVENUE				
NEW YORK NY 10017		NONE	DONATION	1,500
CHOHN'S & COLITIS FOUNDATION				-,
733 THIRD AVENUE		OPERATING		
NEW YORK NY 10017		1	DONATION	500
RANSOMED HEART				
PO BOX 51065				-
COLORADO SPRINGS CO 80949		NONE	DONATION	1,000
Outerand Binines of Outers				
				ľ
	<u> </u>		<u> ▶ 3a</u>	5,972.
b Approved for future payment				1
Total	<u>. </u>		▶ 3b	
	<u> </u>	<u> </u>		l

Ente	r gro	ess amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	ion 512, 513, or 514	(e)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
1		gram service revenue.					(OCC INSTIGUTIONS.
	a	-			-		
	b .					-	
	C						
	ď						
	e .				<u> </u>		-
		Face and contracts from a contract to the cont					
2		Fees and contracts from government agencies					
2		mbership dues and assessments			1		·-··
3 4		rest on savings and temporary cash investments dends and interest from securities		·	 		
5		rental income or (loss) from real estate:					
9		Debt-financed property					
		Not debt-financed property	ļ —				
6		rental income or (loss) from personal property	<u> </u>				
7		er investment income	-		 		
8		or (loss) from sales of assets other than inventory			-		
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					<u> </u>
11							
•	b	er revenue: a		·	 		
	c -						
	ď						
	e -				ļ. <u>-</u>		
	_		1911 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
12	Sub	total, Add columns (b), (d), and (e)					
		total. Add columns (b), (d), and (e)				13	
13	Tota	al. Add line 12, columns (b), (d), and (e)				13	
13 See	Tota work	al. Add line 12, columns (b), (d), and (e)				13	
13 See Par	Tota work	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
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13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)
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13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions.)

BAA

Firm's address ▶

Part	XVII	Information Organizat	on Regarding ions	Transfers	to and Trar	nsaction	ns and R	elationsh	ips With	Noncha	ritable	e Exe	:mp
1	ın şed	ction 501(c) (c	directly or indire								Ž.	Yes	No
_	•	zations?	nortina formalet		والمعالمة المعالم			_4 .					ž~, ģ
а			porting foundat								4 - (4)	25.54	<u>ا دٔ " د</u>
		her assets .									1a(1)		×
b	` '	transactions:									1a(2)		<u> </u>
			a noncharitable	e exempt or	ganization						1b(1)		×
	(2) Pu	rchases of ass	ets from a nonc	haritable ev	garıızatıcı empt organiz:	 atıon					1b(2)		$\hat{\mathbf{x}}$
			s, equipment, or								1b(3)		$\hat{\mathbf{x}}$
			arrangements.								1b(4)		×
		ans or loan gua									1b(5)		×
		-	ervices or meml								1b(6)		×
С			equipment, maili								1c		×
d			of the above is									faır m	
			other assets, or										
	value ı	n any transacti	ion or sharing ar	rrangement,	show in colui	mn (d) th	e value of	the goods	, other as	sets, or se	rvices	recei	ved.
(a) Line	no (b	Amount involved	(c) Name of	noncharitable	exempt organizat	ion	(d) Descrip	otion of transf	ers, transac	tions, and sha	ring arra	angeme	nts
				_									
								-					
		·											
					<u> </u>								
													
								. <u>-</u>					
	_												
		 											
	describ	ed in section 5	ectly or indirect 501(c) (other tha	in section 50							☐ Ye	s 🗵	No
b	it Yes		e following sche	aule.	#1.T		<u> </u>		,				
		(a) Name of organ	Ization		(b) Type of org	janization			(c) Descrip	tion of relation	nship		
							<u> </u>						
		_											
					•								
_													
	Under	enalties of person I	declare that I have ex	caminad this retu	m including accor	mnanung se	bodulos and	totomonto on	to the best	of my knowlod	ao and h	oliof it	o to co
Sign			aration of preparer (of										
Here	N	AMI.	-		111-15-19	, b	NDOMOD.			May the IP with the pr			
пеге		ure of officer or trus	stee		Date	Title	RECTOR			See instruc			
		Print/Type preparer		Prepare	er's signature		· · · · · · · · · · · · · · · · · · ·	Date	1	1 a	PTIN	-	
Paid		Typo proparer	J.,41110	i repair	o. o organization o			Date		eck ∐if [1114		
Prepa			Non-F	2 1 ਨੇ	Prep	are	<u> </u>			f-employed			
Use C)nly -	irm's name ►	TAOTI	<u>ralu</u>	<u> </u>	<u>ur</u> c	<u> </u>		Firm's EIN	-			

Form **990-PF** (2018)

Phone no

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

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
BANK CHARGES	36.			
Total	36			