Department of the Treasury Internal Revenue Service

**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.

OMB No 1545-0047

2019

Open to Public Inspection

	Interg	nal Reven	ue Service	▶ Go to	www.irs.gov/Form990PF fo	or instructions and	the late	st informati	on. Open	to Public Inspection	N
٠	For	calen	dar year. 20	019 or tax year be				ending		, 20	0
	Nam	e of four	ndation	•			•	A Employe	r identification numb	er	K.
	WI:	SZNEA	AUCKAS F	AMILY FOUNDA	TION	:		26-1	480955	•	B
	Num	ber and	street (or P O	box number if mail is n	ot delivered to street address)	Roon	n/suite	<b>B</b> Telephor	e number (see instruct	ions)	2
	10	647 5	S ERIE P	LACE	•			(817	647-5119	•	089
	City	or town,	state or provi	nce, country, and ZIP or	foreign postal code	•	•		tion application is pend	ling, check here ▶ 🗍	45
	TU:	LSA (	OK 74137	1	-	•				· . <u> </u>	
			all that app		urn   Initial return	of a former public	charity	D 1. Foreig	n organizations, check	here ▶ 🗍	$\overline{\omega}$
				☐ Final retu	ırn 🗌 Amended ı	return		2 Foreign	n organizations meetin	a the 85% test	3
3/		-	•	Address	change 🔲 Name char	nge			here and attach comp		
AV					ection 501(c)(3) exempt p		rd.		foundation status was	_	
U		Sectio	n 4947(a)(1	) nonexempt chari	table trust 🔲 Other tax	able private found	dation	section 5	07(b)(1)(A), check here	▶□	0,
				of all assets at	J Accounting method			F If the fou	ndation is in a 60-mont	th termination	
		end of	year (fron	n Part II, col. (c),	→ □ Other (specify)			under se	ction 507(b)(1)(B), chec	k here ▶ □	•
		line 16	) ▶ · \$ -	138,528.	(Part I, column (d), must be	e on cash basis.)			•		
	Pa	art I	Analysis	of Revenue and E	xpenses (The total of	(a) Revenue and	(L) NI-4		fol Advisated mak	(d) Disbursements	
	_	•			may not necessarily equal	expenses per books		t investment ncome	(c) Adjusted net income	for charitable purposes	
			the amounts	ın column (a) (see ınst	ructions))	DOORS				(cash basis only)	
		1			received (attach schedule).		<b>海</b>				
		2	Chock ►	oxtimes if the foundation is i	not required to attach Sch. B						
		, 3	Interest or	savings and temp	orary cash investments						
•		4	Dividends	and interest from	securities	3,547.		3,547.	3,547.		
		5a		ts,		anana an a an mahambaha an a utadi	Hery Schaller Lum	A. Inches of the property and and a	o o composition composition de montre de composition de compositio	***	
		. թ		income or (loss)	· · · · · · · · · · · · · · · · · · ·						
	e l	6a	-		f assets not on line 10	OCTRACION AND AND POST OFFICE AND A		- 10 - Marie Control (19 - 19 - 19 - 19 - 19 - 19 - 19 - 19		Y: 3000 Y 4000	
	Revenue	b		price for all assets or		200100000000000000000000000000000000000	34,273				
	é	7		•	n Part IV, line 2)		200000000000000000000000000000000000000	v 15. viskinings-eks			,
	<b>E</b>	8.		· -	· · · · · · · · ·		2000		<del></del>		
	_	9		odifications		Sizes Assert Carlot de de la Carlot de la Ca	7 (Page 1977)		Trunduning fal. (1. 1. 1. 1. see w/s of the 2011 but was		
		l .		less returns and allo		568-6582-658-27, 27, 27, 27, 27, 27, 27, 27, 27, 27,			# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		, ,
		b		•			STATE OF STATE	A CONTRACTOR			
		C			schedule)		1999/2008	CLASS PROPERTY	•		
٦		11 12		•	ıle) 1	2 547		3,547.	2 5 4 7		
2	-	13			rectors, trustees, etc	3,547.		3,347.	3,347.	***************************************	
3	es	14	•	_	wages		1				
	nses	15		lans, employee be	=		<u>-</u> -			<del> </del>	,
	d	16a		(attach schedule)			,	•		<del> </del>	•
	ũ	l .			edule)	400.		550	EIVED	••	
	Š	C			ch schedule)	100.		REC	EIVLD		
	ati	17					1	\[\[ \]	1 1 2020 0		
	ist	18	Taxes (att	ach schedule) (see	instructions) See. Stmt	26.	1	MAY (S	1 1 2020 16		
	i	19			e) and depletion				<u>`</u>		
	ф	20				•		OGI	DEN, UT		
	ΑĖ	21			etings						
	juc.	22									
	ĝ	23	Other exp	enses (attach sche	dule),			•		•	
	Operating and Administrative Expe	24			ninistrative expenses.				•		
	era			=		426.					
	ď	25			aid	7,000.				•	
	_	26			nents. Add lines 24 and 25	7,426.					
		27		ne 26 from line 12						16.00 ST 25.35	
		а	•		nses and disbursements	<i>.</i> −3,879.	K.				r
		b		•	negative, enter -0-) .			3,547.		WASHING TO	
		C	Adjusted	net income (if neg	ative, enter -0-)				.3,547.	17.73	

Page 2

Pa	art II.	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	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			,
	2	Savings and temporary cash investments	135,815.	131,936.	138,528.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		17 3 E
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶	•		
	5	Grants receivable	,		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	CLANA V Heart Single of SERGERS CO.	From an Italian analysis and house and an analysis and analysis	de II da daniel o cristoff da de le lever starf : The d
	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)			
	С	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 ▶		and the same of th	
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers-see the			
		ınstructions. Also, see page 1, item l)	135,815.	131,936.	138,528.
	17	Accounts payable and accrued expenses			
s	18	Grants payable	4		
tie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ial	21	Mortgages and other notes payable (attach schedule) , .			
_	22	Other liabilities (describe ▶)			等的 第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
	23	Total liabilities (add lines 17 through 22)			
es		Foundations that follow FASB ASC 958, check here			
alances		and complete lines 24, 25, 29, and 30.		,	
ala	24	Net assets without donor restrictions	135,815.	131,936.	
8	25	Net assets with donor restrictions			
Net Assets or Fund		Foundations that do not follow FASB ASC 958, check here ▶ □			
Fu		and complete lines 26 through 30.			
or	26	Capital stock, trust principal, or current funds			
ts	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
se	28	Retained earnings, accumulated income, endowment, or other funds			
As	29	Total net assets or fund balances (see instructions)	135,815.	131,936.	
et	30	Total liabilities and net assets/fund balances (see			
		instructions)	135,815.	131,936.	
	rt III	Analysis of Changes in Net Assets or Fund Balances		<del></del>	· · · · · · · · · · · · · · · ·
1		I net assets or fund balances at beginning of year-Part II, colu			
		of-year figure reported on prior year's return)			135,815.
_		r amount from Part I, line 27a			-3,879.
3					
4		lines 1, 2, and 3		4	131,936.
5	Decr	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—		5	
6	Гota	net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 29 <b>6</b>	131,936.

Par	t IV Capital Gains and L	osses for Tax on Investm	ent Income			
		s) of property sold (for example, real es or common stock, 200 shs. MLC Co)	tate,	(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr )	d (d) Date sold (mo., day, yr)
	GREAT WESTERN BANK C	D		P	07/26/2018	3 02/11/2019
t	)					
	<u> </u>					
<u>:c</u>	<u> </u>					
e	·					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Gain or (loss) lus (f) minus (g))
a	50,000.			50,000.		0.
<u>t</u>	<u> </u>				<b></b>	<del></del>
						<u> </u>
		-				<del></del>
		ng gain in column (h) and owned b	ov the foundation	on 12/31/69	<i>m</i> o	(0.1.41)
<sub>3</sub> —	Complete only for assets show	(j) Adjusted basis		s of col (i)		(Col (h) gain minus t not less than -0-) <b>or</b>
	(i) FMV as of 12/31/69	as of 12/31/69		(j), if any	Loss	es (from col (h))
				· · · · · · · · · · · · · · · · · · ·		0.
t						
<u>c</u>	1					*
2	Capital gain net income or (i	nercanitatineet ) • /	also enter in Pa enter -0- in Pai		2	0.
3	Net short-term capital gain o	or (loss) as defined in sections	1222(5) and (6)	•		
	If gain, also enter in Part I,	line 8, column (c). See instruc	ctions. If (loss)	, enter -0- ın		
	Part I, line 8		<u> </u>	<u> J</u>	3	0.
	<b>Qualification Under</b> optional use by domestic priva	Section 4940(e) for Redu				
Was	ction 4940(d)(2) applies, leave t the foundation liable for the se es," the foundation doesn't qua	ction 4942 tax on the distribut			base period?	☐ Yes ☐ No
1		nt in each column for each yea			akıng any entri	es.
Ca	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use a	ssets (col	(d) Distribution ratio (b) divided by col (c))
	2018	7,40	04.	134,5	48.	0.055029
	2017	8,25		143,5		0.057452
	2016	7,75	50.	146,8	884.	0.052763
	2015	8,00		153,4		0.052145
	2014	9,00	00.	162,7	714.	0.055312
<sup>13</sup> 2	Total of line 1, column (d)				. 2	0.272701
3		r the 5-year base period—divindation has been in existence				0.054540
. 4	Enter the net value of nonch	aritable-use assets for 2019 fr	om Part X. line	5	. 4	131,689.
5					. 5	7,182.
6		ıncome (1% of Part I, line 27b)				35.
7	Add lines 5 and 6				. 7	7,217.
8	Enter qualifying distributions	from Part XII, line 4			. 8	7,426.
હ	If line 8 is equal to or greate Part VI instructions.	r than line 7, check the box in	Part VI, line 1b	o, and complete	that part using	

...



1	Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-se	e instru	ction	ıs)
•	1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			<b>F</b>
		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			35.
ţ.		here ► 🗵 and enter 1% of Part I, line 27b	# 25.00 E		建造计
	c	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-)			0.
	3	Add lines 1 and 2			35.
	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			35.
	6	Credits/Payments:		100 M	žii
	а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6	制度的基		
	b	Exempt foreign organizations—tax withheld at source			
	С	Tax paid with application for extension of time to file (Form 8868) 6c			
	d	Backup withholding erroneously withheld			
	7	Total credits and payments. Add lines 6a through 6d			
ï	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			<u>35.</u>
	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	_		0.
	11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11			
Ì	Part	VII-A Statements Regarding Activities	34457431588	. 1	
	1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	AA	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	ne   1b		×
		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	ls 💥		47.1
		published or distributed by the foundation in connection with the activities.			
	С	Did the foundation file Form 1120-POL for this year?	1c	a de anno de la	X
	d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
2		(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			N. Feb
٠,	е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•		on foundation managers. ► \$		A P	
	2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 5500000	155436656	X 8. 72,449
•		If "Yes," attach a detailed description of the activities.	F. 17. 73.		
1	3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	9S <u>27627</u> 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		
	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:			
		By language in the governing instrument, or			
		• By state legislation that effectively amends the governing instrument so that no mandatory directions the conflict with the state law remain in the governing instrument?	at 6	×	
••	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 I		×	
-	, 8а	Enter the states to which the foundation reports or with which it is registered. See instructions.	V. 578-3		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	oa	TY			
	b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener			
,	,	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		X
	9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	357.37	ESS.	20° 53
	3	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes			الكفاية مقدة الانتخاب
		complete Part XIV	"   9		×
	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			
		names and addresses	10		×

Form **990-PF** (2019)

Pan	VII-A	Statements Regarding Activities (continued)				
		•	Î	學相	Yes	No
11	meaning of	ne during the year, did the foundation, directly or indirectly, own a controlled entity with f section 512(b)(13)? If "Yes," attach schedule. See instructions		11		×
12		undation make a distribution to a donor advised fund over which the foundation or a disquare named and a distribution to a donor advised fund over which the foundation or a disquare named and a distribution of a disquare named and a disq	ualified	12		×
13		d advisory privileges? If "Yes," attach statement. See instructions	cation?	13	$\overline{}$	<del>  ^</del>
13		ddress ► N/A				L
14		are in care of ▶ ERIC C WISZNEAUCKAS Telephone no. ▶	(817)6	47-5	119	
	Located at	t ▶ 10647 S ERIE PLACE TULSA OK ZIP+4 ▶	74137			<u></u>
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here.	·			▶ □
			15		Yes	No
16	over a ban	e during calendar year 2019, did the foundation have an interest in or a signature or other auk, securities, or other financial account in a foreign country?		16	163	X
		structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the n	ame of			
Dor		statements Regarding Activities for Which Form 4720 May Be Required		22,333		10 m
Far		4720 if any item is checked in the "Yes" column, unless an exception applies.	- Ia	18176	Yes	No
1a		year, did the foundation (either directly or indirectly):				(*************************************
	(1) Engage	e in the sale or exchange, or leasing of property with a disqualified person?	⊠ No		1	regal
		money from, lend money to, or otherwise extend credit to (or accept it from) a				
	· · · · · · · · · · · · · · · · · · ·	Iffied person?	⊠ No			
	• •	n goods, services, or facilities to (or accept them from) a disqualified person? Yes mpensation to, or pay or reimburse the expenses of, a disqualified person?	. 🖾 No 🖁			
		er any income or assets to a disqualified person (or make any of either available for				
	` '	nefit or use of a disqualified person)?	⊠ No			
		to pay money or property to a government official? (Exception. Check "No" if the	Į,			3/3
		tion agreed to make a grant to or to employ the official for a period after				
h		ation of government service, if terminating within 90 days.)				
b	Regulation	is section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	. [	1b		×
		ons relying on a current notice regarding disaster assistance, check here	te that ?		9.0	传述 資訊
, 'C	were not c	corrected before the first day of the tax year beginning in 2019?	[	1c		×
2	operating f	failure to distribute income (section 4942) (does not apply for years the foundation was a foundation defined in section 4942(j)(3) or 4942(j)(5)):	private			
a		of tax year 2019, did the foundation have any undistributed income (Part XIII, lines				
		of for tax year(s) beginning before 2019?	⊠ No			
ь		any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 49	42(a)(2)			
-		nncorrect valuation of assets) to the year's undistributed income? (If applying section 4942)				
	-	sted, answer "No" and attach statement – see instructions.)	[	2b		×
С		isions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	re.			
За		, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	1			
Ja		e during the year?	⊠ No			
b	-	lid it have excess business holdings in 2019 as a result of (1) any purchase by the founda				
	disqualified	d persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	by the			
		oner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the la				
•		15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine in had excess business holdings in 2019.)	if the			
4a		indation invest during the year any amount in a manner that would jeopardize its charitable purp		3b 4a		×
b		undation make any investment in a prior year (but after December 31, 1969) that could jeopar				
-		purpose that had not been removed from jeopardy before the first day of the tax year beginning in		4b		X

Part	VII-B Statements Regarding Activities	STOPW	nich Form	4/20	IVIAY DE N	equire	u (comm	iucu)			
5a	During the year, did the foundation pay or incur	any am	ount to:						• ;	Yes	No
	(1) Carry on propaganda, or otherwise attempt			n (sect	ion 4945(e)	)? .	☐ Yes	⊠ No			· [
•	(2) Influence the outcome of any specific publi								-		
	directly or indirectly, any voter registration di						□Yes	⊠ No		ŀ	į
							☐Yes	⊠ No	-		ı
	(3) Provide a grant to an individual for travel, stu						□ res		١. ا	ľ	
	(4) Provide a grant to an organization other tha			_			_		'	'	
	section 4945(d)(4)(A)? See instructions						_	⊠ No			
	(5) Provide for any purpose other than religious										ı
	purposes, or for the prevention of cruelty to						_	⊠ No		<u> </u>	- {
b	If any answer is "Yes" to 5a(1)-(5), did any of the	he trans	actions fail t	o qualif	y under th	e excep	tions des	scribed			
	in Regulations section 53.4945 or in a current no	otice reg	garding disas	ter assi	stance? Se	e instru	ıctıons		5b		
	Organizations relying on a current notice regard	ing disa	ster assistan	ce, che	ck here .						
С	If the answer is "Yes" to question 5a(4), does								1		
	because it maintained expenditure responsibility							□No			- 1
	If "Yes," attach the statement required by Regul		-				_	_			
6a	Did the foundation, during the year, receive any					emiums			,		ı
	on a personal benefit contract?		-	-			□Yes	⊠ No	,	1	ı
b	Did the foundation, during the year, pay premiur					henefit		_	6b		$\overline{}$
D	If "Yes" to 6b, file Form 8870.	, Gii C	ony or maner	Jany, 011	a pordonal	20.10110	30,111401	•	35		
7a	At any time during the tax year, was the foundation	n a nortu	to a probibite	ed tav s	helter trans	action?	□ Vac	⊠ Na			}
b	If "Yes," did the foundation receive any proceed								7b		
8	Is the foundation subject to the section 4960 ta								3.8		. 1
٥	remuneration or excess parachute payment(s) d							□ No	1	r <u>s</u>	1
Dox	Information About Officers, Direct										
Fail	and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	rustees, r	Juliua	LIOII WIAII	igers,	i iigiiiy i	alu L	проу	ccs,	
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation S	ee instri	ıctions			
	Elst all officers, all octors, tractices, and reality										
		(D)	s, and average		mpensation	(a) (	Contribution	s to	(a) Euro		
	(a) Name and address	hou	e, and average rs per week ed to position	(If n	iot paid,	emplo	yee benefit	plans	(e) Expe	nse aco allowan	
rn T		devote	rs per week ed to position	(If n		emplo		plans			
	C C WISZNEAUCKAS	devote	rs per week ed to position & TREAS	(If n	iot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
106	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137	PRES	rs per week ed to position  & TREAS  1.00	(If n	iot paid,	emplo	yee benefit	plans			
106 PAT	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS	PRES	rs per week ed to position  & TREAS  1.00  ETARY	(If n	ter -0-)	emplo	yee benefit	plans ensation 0.			O.
106 PAT 106	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137	PRES SECRI	ed to position  TREAS  1.00  ETARY  0.25	(If n	iot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
106 PAT 106 GEO	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 FFREY C WISZNEAUCKAS	PRES SECRI	rs per week ed to position  & TREAS  1.00  ETARY  0.25  PRESIDENT	(If n	0 .	emplo	yee benefit	plans ensation  0.			0. 0.
106 PAT 106 GEO 106	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 FFREY C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137	PRES SECRI	ed to position  TREAS  1.00  ETARY  0.25	(If n	ter -0-)	emplo	yee benefit	plans ensation 0.			O.
106 PAT 106 GEO 106	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 FFREY C WISZNEAUCKAS	PRES SECRI	rs per week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25	(If n	0 . 0 .	emplo	yee benefit	O.  O.			0. 0.
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 FFREY C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 Statement	PRES SECRI	rs per week ed to position  & TREAS	(lf n	0. 0.	emplo and defe	yee benefit	O. O.	other :	allowan	0. 0. 0.
106 PAT 106 GEO 106	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe	PRES SECRI	rs per week ed to position  & TREAS	(lf n	0. 0.	emplo and defe	yee benefit	O. O.	other :	allowan	0. 0. 0.
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 RICIA L WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 FFREY C WISZNEAUCKAS 47 S ERIE PLACE TULSA OK 74137 Statement	PRES SECRI	rs per week ed to position  & TREAS	(lf n	0. 0.	emplo and defe	yee benefit erred compe	O. O. uctions	other :	allowan	0. 0. 0.
106 PAT: 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."	PRES SECRI	s per week ed to position  & TREAS  1.00 ETARY  0.25 PRESIDENT  0.25  0.50 er than thos	(If ren	0. 0. 0. uded on li	emplo and defe	yee benefit rred compe	O. O. O. uctions	s). If no	one, o	0. 0. 0. enter
106 PAT: 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe	PRES SECRI	se per week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25  0.50 er than those	se inclu	0. 0.	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, (	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit rred compe	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT: 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	PRES SECRI	sper week ed to position  & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter
106 PAT 106 GEO 106 See 2	C C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  RICIA L WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  FFREY C WISZNEAUCKAS  47 S ERIE PLACE TULSA OK 74137  Statement  Compensation of five highest-paid employe "NONE."  (a) Name and address of each employee paid more than \$50,0	hou devote PRES SECRI VICE es (oth	rs per week ed to position & TREAS 1.00 ETARY 0.25 PRESIDENT 0.25 0.50 er than those (b) Title, and a hours per v	se inclu	0. 0. 0. uded on li	emplo and defe	yee benefit erred compositions see instr	0. 0. 0. uctions to benefit deferred	s). If no	one, o	0. 0. 0. enter

3 Five	and Contractors (continued) highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
'NONE'		
		}
	er of others receiving over \$50,000 for professional services	0
Part IX-A		[
List the for organization	indation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ins and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
•		
2		
3		
4		
Part IX-B		
1	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
2		
•	ogram-related investments. See instructions	
3		
otal Add	lines 1 through 3	
Ulai. Auu		

f

Р	art X	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. Forei see instructions.)	gn foui	ndations,
-		air market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	•	urposes:	40	122 604
Ē		verage monthly fair market value of securities	1a 1b	133,694.
,		verage of monthly cash balances		· · · · · ·
		air market value of all other assets (see instructions)	1c	122 604
		otal (add lines 1a, b, and c)	1d	133,694.
		eduction claimed for blockage or other factors reported on lines 1a and		
		c (attach detailed explanation)		
		equisition indebtedness applicable to line 1 assets	2	100 101
	3 S	ubtract line 2 from line 1d	3	133,694.
•		ash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
		structions)	4	2,005.
		et value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	131,689.
		linimum investment return. Enter 5% of line 5	6	6,584.
P	art XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► □ and do not complete this part.)	oundat	ions
<u>.                                    </u>		linimum investment return from Part X, line 6	1	6,584.
;	2a Ta	ax on investment income for 2019 from Part VI, line 5		
		come tax for 2019. (This does not include the tax from Part VI.) 2b		
	c A	dd lines 2a and 2b	2c	35.
;	3 D	stributable amount before adjustments. Subtract line 2c from line 1	3	6,549.
	4 R	ecoveries of amounts treated as qualifying distributions	4	
;	5 A	dd lines 3 and 4	5	6,549.
(		eduction from distributable amount (see instructions)	6	
•	7 D	istributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	lır	ne 1	7	6,549.
Р	art XI	Qualifying Distributions (see instructions)	-	
	1 A	mounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	a E	xpenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	7,426.
		rogram-related investments—total from Part IX-B	1b	
1		mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	р	urposes	2	
;	3 A	mounts set aside for specific charitable projects that satisfy the:		
	a S	uitability test (prior IRS approval required)	3a	
		ash distribution test (attach the required schedule)	3b	
	4 Q	ualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	7,426.
;	5 F	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		·
	Eı	nter 1% of Part I, line 27b. See instructions	5	35.
(	6 A	djusted qualifying distributions. Subtract line 5 from line 4	6	7,391.
		ote: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g wheth	
BA	Δ	REV 03/04/20 PRO		Form <b>990-PF</b> (2019)

;

Part	VIII Undistributed Income (see instruction	ons)			
••		(a) Corpus	(b) . Years prior to 2018	(c) - 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				6,549.
2	Undistributed income, if any, as of the end of 2019:	<b>交票的</b>			
а	Enter amount for 2018 only			7,150.	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				Commission of the Commission o
а	From 2014				
b	From 2015				
°C	From 2016				
d	From 2017	Sample Table 1	in the comment of the		
е	From 2018				
f	Total of lines 3a through e	10,181.			
4	Qualifying distributions for 2019 from Part XII, line 4. ► \$ 7,426.				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				
' е	Remaining amount distributed out of corpus	7,426.		######################################	<b>心态的是一个</b>
5	Excess distributions carryover applied to 2019 (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:				
` a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	17,607.			
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		0.		
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0.		
ृe	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount—see			•	
	instructions			7,150.	
f	Undistributed income for 2019. Subtract lines				
•	4d and 5 from line 1. This amount must be distributed in 2020				6 540
					6,549.
7	Amounts treated as distributions out of corpus	,			
	to satisfy requirements imposed by section 17ó(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)		VINNE STATE OF THE		
8	Excess distributions carryover from 2014 not				
3	applied on line 5 or line 7 (see instructions).	864.			
9	Excess distributions carryover to 2020.		27 17 18 18 18 18 18 18 18 18 18 18 18 18 18		
-	Subtract lines 7 and 8 from line 6a	16,743.			
10	Analysis of linc 9:			Million T. Harriston	
а	Excess from 2015		Water and the same of the same		
b	Excess from 2016		31.00 E 30.00		
. с	Excess from 2017 1,100.				
d	Excess from 2018				
е	Excess from 2019 7,426.	PERMIT			

Page 10
1942(j)( <u>5)</u>
otal
<del></del>

orm 95	10-PF (2019)					Page 10
Part	XIV Private Operating Founda	<b>tions</b> (see ınstru	ctions and Part	VII-A, question 9	9)	N/A
1a	If the foundation has received a ruling					
•	foundation, and the ruling is effective for					
	Check box to indicate whether the four	<del></del>	operating founda		ection   4942(j)(	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1 2	(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
_	each year listed		_			<u> </u>
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities.					
3	Subtract line 2d from line 2c Complete 3a, b, or c for the			<del>  /                                   </del>		
_	alternative test relied upon.					
а	"Assets" alternative test—enter:			X		
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under</li></ul>		/	<u> </u>		<del>-</del>
	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				<u> </u>	
Part				the foundation h	nad \$5,000 or mo	ore in assets at
	any time during the year-		ıs.)			
1	Information Regarding Foundation					
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
b	List any managers of the foundation ownership of a partnership or other er			•		rge portion of the
2	Information Regarding Contribution	. Grant. Gift Los	n. Scholarshin	etc Programs		
-	Check here ► 🗵 if the foundation			-	organizations and	does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See ir				•	•
а	The name, address, and telephone nu	imber or email add	dress of the pers	on to whom applica	ations should be ad	ldressed:
b	The form in which applications should	l be submitted and	d information and	materials they sho	ould include:	
С	Any submission deadlines:			<del></del>		
<del></del>			<del></del>	<del></del>		
d	Any restrictions or limitations on av factors:	vards, such as by	y geographical a	areas, charitable fi	elds, kinds of inst	itutions, or other

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Foundation 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 COMMUNITY FOOD BANK EAST OK 1304 N KENOSHA AVE TULSA OK 74106 501(C)3 GENERAL SUPPORT 3,700. WOMEN MARINES ASSOCIATION P.O. BOX 377 500. 501(C)3 SCHOLARSHIP FUND OAKS PA 19456 ST JUDE CHILDREN RES HOSPITAL P.O. BOX 1893 501(C)3 GENERAL SUPPORT 0. MEMPHIS TN 38101 DONORS CHOICE 134 WEST 37TH ST, 11TH FL 501(C)3 SPECIAL EDUCATION 1,400. NEW YORK NY 10018 KINGS GROVE SCHOOL 6611 N 193RD EAST AVE 1,400. OWASSO OK 74055 501 (C) 3 GENERAL SUPPORT INTERNATIONAL REFUGEE ASS URBAN JUSTICE 40 RECTOR ST GENERAL SUPPORT 0. NEW YORK NY 10006 501(c) RAINFOREST TRUST 7078 AIRLINE ROAD WARRENTON VA 20187 501 (C) 3 GENERAL SUPPORT 0. 3a 7,000. . . . . . . . . . . . . . . . . . . . Approved for future payment

3b

Total

		VI-A Analysis of Income-Producing Acoss amounts unless otherwise indicated.		usiness income	Excluded by sect	on 512, 513, or 514	, ,
	a gro	ss amounts unless otherwise indicated.					(e) Related or exempt
•			(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	function income
1	Pro	gram service revenue:		747104710	ZNOIGOIOT. GOGO		(See instructions.)
	а						
	b				_		
	C				<del>-</del>		
	d	<u> </u>			-		
	e		<u></u>		-		
	T	Face and a selection from a second second second					
2	_	Fees and contracts from government agencies mbership dues and assessments					
2 3		rribership dues and assessments	-			*	-
4		idends and interest from securities	-		14	3,547.	
5		rental income or (loss) from real estate:	Philody Can Leading source by his control in the control as control and contro	we's hare ล้างและ เกตเกาะเหล่างานก็และโดย เก	<del></del>	. Y.W.A. (\$\) ( \( \) ( \) ( \) ( \( \) ( \) ( \	, ,
_		Debt-financed property	5000 700 IMITIAL - MILET	[	110000000000000000000000000000000000000	3930 31 110 1	
		Not debt-financed property		**********			
6		rental income or (loss) from personal property					
7	Oth	er investment income					
8	Gai	n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		oss profit or (loss) from sales of inventory					<u>.</u>
11	Oth	ner revenue: a					
	b						
	C.				<u> </u>		
	d						
	e Cl	ototal. Add columns (b), (d), and (e)				3,547.	
	Sur	ototal. Add columns (b), (d), and (e)		1	1	3,34/.	
12	Tot	al Add line 12 columns (b) (d) and (e)					
13	Tot	al. Add line 12, columns (b), (d), and (e)					
13 (See	Tot wor	al. Add line 12, columns (b), (d), and (e)	 ıs.)				
13 (See Pa	Tot wor	cal. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	 is.) <b>.ccomplishm</b>	ent of Exemp	ot Purposes	13	3,547.
13 (See Pa	Tot wor	cal. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	 is.) <b>.ccomplishm</b>	ent of Exemp	ot Purposes	13	3,547.
13 (See Pa	Tote wor rt X ne No	cal. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	 is.) <b>.ccomplishm</b>	ent of Exemp	ot Purposes	13	3,547.
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13 (See Pa	Tote wor rt X ne No	cal. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	 is.) <b>.ccomplishm</b>	ent of Exemp	ot Purposes	13	3,547.
13 (See Pa	Tote wor rt X ne No	cal. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	 is.) <b>.ccomplishm</b>	ent of Exemp	ot Purposes	13	3,547.
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13 (See Pa	Tote wor rt X ne No	cal. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	 is.) <b>.ccomplishm</b>	ent of Exemp	ot Purposes	13	3,547.
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		Organizati	ons							
	in se	ne organization of ection 501(c) (c dizations?	directly or indirectly other than section	engage in any of the fo 501(c)(3) organizatio	ollowing wi ns) or in	th any other orga section 527, re	nızation des latıng to p	cribed olitical	Yes	No
	-		norting foundation t	o a noncharitable exer	nnt organiz	ation of:				
			_					1a(1	<u> </u>	×
	• •								-	
	• •	ther assets .						1a(2	4	× ,
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				empt organization .					<del></del>	×_
				able exempt organizat				1b(2	<del>`                                    </del>	×
	(3) Re	ental of facilities	, equipment, or othe	er assets				1b(3	<i>i</i> )	×
	(4) R	eimbursement a	rrangements					1b(4	l)	X
	<b>(5)</b> Lo	oans or loan gua	arantees					1b(5	<u>i)                                    </u>	×
	(6) Pe	erformance of se	ervices or membersl	nip or fundraising solic	itations .			1b(6	<u>i)                                    </u>	×
С	Sharıı	ng of facilities, e	quipment, mailing li	sts, other assets, or pa	aid employ	es		1c		×
d	If the	answer to any	of the above is "Ye	s," complete the follo	wing sched	lule. Column (b)	should alwa	ys show the	fair m	narket
				ices given by the repo						
				ement, show in colum						
(a) Line		b) Amount involved		haritable exempt organizatio		Description of transfe				
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?										No
-					•					
					•				-	
				·						
			· · ·							
Sign Here	corre	ct and confolete Dec	laration of preparer (other th	det this return, including accompant taxpayer) is based on all inf	panying schedu ormation of whi PRESI	ch preparer has any kno	owledge	May the IRS dis with the prepared See instructions	cuss this r shown b	return below?
	ـــــــا	Print/Type prepare		Preparer's algnature		Date		PTIN		
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Prepa		STANLEY L	<del></del>	y weng		04/04/2		ployed P007	3218	
Use C	only	Firm's name ▶		KWAN, C.P.A			Firm's EIN ▶	0101000	2017	
		Firm's address ▶	3001 CAMBRID			1006	Phone no (	918) 333-		
BAA			BARTLESVILLE	•	OK 7	1006		Form <b>9</b>	90-PF	(2019)

WISZNEAUCKAS FAMILY FOUNDATION

Form 990-PF: Return of Private Foundation

**Continuation Statement** Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

. . 0 Expense account, other allowances . 0 employee benefit plans and deferred compensation Contributions to 0 。 Compensation devoted to position Title, and average hours per week DIRECTOR 0.25 DIRECTOR 0.25 Name and address GINNY M WISZNEAUCKAS ERICA C WISZNEAUCKAS 10647 S ERIE PLACE 10647 S ERIE PLACE TULSA, OK 74137 TULSA, OK 74137 . 0

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

## Form 990-PF: Return of Private Foundation

Taxes

**Continuation Statement** 

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose	
	26.				
Total	26				