#### Return of Private Foundation

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

OMB No 1545-0047 2019

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Department of the Treasury Internal Revenue Service

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

Open to Public Inspection ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning , 2019, and ending Name of foundation A Employer identification number MICHAEL AND JANE SIGMON FAMILY FOUNDATION 73-1592997 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 4220 BROOKLINE PLACE (405)329 - 3444City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ NORMAN OK 73072 G Check all that apply: ☐ Initial return Initial return of a former public charity D 1. Foreign organizations, check here ☐ Final return ☐ Amended return 2. Foreign organizations meeting the 85% test. □ Address change ☐ Name change check here and attach computation Check type of organization: Section 501(c)(3) exempt private foundation ? E If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust 

Other taxable private foundation section 507(b)(1)(A), check here Fair market value of all assets at J Accounting method. X 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) ▶ \$ (Part I, column (d), must be on cash basis) 1,956,826. 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 purposes (cash basis only) ıncome income books the amounts in column (a) (see instructions)) 1 Contributions, gifts, grants, etc., received (attach schedule) 151,000 2 Check ► 🗵 if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities . . . . 66,893 5a Gross rents . . . . . . . . . . . . . . . . b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a SCANNED APR 1 4 2021 7 Capital gain net income (from Part IV, line 2) 46,947 Net short-term capital gain . . . . . . . . 46,947 9 Income modifications 10a Gross sales less returns and allowances Less. Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . . . . 12 Total. Add lines 1 through 11 . . . 113,840. 151,000 46,947. 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) RECEIVED Accounting fees (attach schedule) L-1.6b. Stmt. 400 Other professional fees (attach schedule) L-16c Stmt. 21,394. က MAY **0 4** 2020 17 18 Taxes (attach schedule) (see instructions) See. Stmt 3,141. 19 Depreciation (attach schedule) and depletion . . . OGDEN UI 20 21 Travel, conferences, and meetings . . . . . 22 Printing and publications . . . 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . 24,935 25 Contributions, gifts, grants paid . . . . . 88,000 Total expenses and disbursements. Add lines 24 and 25 26 112,935. 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 38,065 113,840. **Net investment income** (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

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

Form **990-PF** (2019)

46,947.

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| P                  | art II |  | Beginning of year       |              | End of year |  |  |
|--------------------|--------|--|-------------------------|--------------|-------------|--|--|
|                    |        | should be for end-of-year amounts only. (See instructions.)              | (a) Book Value          | (b) Book Val | ue          | (c) Fair Market Value                  |  |
|                    | 1      | Cash-non-interest-bearing  |                         |              |             |  |  |
|                    | 2      | Savings and temporary cash investments                                   | 16,406.                 | 27,6         | 558.        | 27,658.                                |  |
|                    | 3      | Accounts receivable ▶  |                         |              |             |  |  |
|                    |        | Less: allowance for doubtful accounts ▶                                  |                         | <del></del>  |             |  |  |
|                    | 4      | Pledges receivable ▶   | 1                       |              |             |  |  |
|                    |        | Less: allowance for doubtful accounts ▶                                  |                         | <del></del>  |             | · · · · · · · · · · · · · · · · · · ·  |  |
|                    | 5      | Grants receivable  |                         | <u> </u>     |             |  |  |
|                    | 6      | Receivables due from officers, directors, trustees, and other            |                         |              |             |  |  |
|                    |        | disqualified persons (attach schedule) (see instructions)                |                         |              |             |  |  |
|                    | 7      | Other notes and loans receivable (attach schedule)                       |                         |              |             | ···· · · · · · · · · · · · · · · · · · |  |
|                    | }   •  | Less allowance for doubtful accounts ▶                                   | ·                       | <del></del>  |             | <del> </del>                           |  |
| S                  | 8      | Inventories for sale or use  |                         |              |             |  |  |
| Assets             | 9      | Prepaid expenses and deferred charges                                    |                         |              |             |  |  |
| SS                 | 10a    | Investments—U.S. and state government obligations (attach schedule)      |                         |              |             |  |  |
| 1                  | 1      |  | 070 050                 | 720.6        |             | 707.040                                |  |
|                    | b      | Investments—corporate stock (attach schedule)                            | 972,258.                | 739,8        |             | 787,249.                               |  |
|                    | C      | Investments—corporate bonds (attach schedule)                            | 761,877.                | 1,134,9      | ,55.        | 1,141,919.                             |  |
|                    | 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 ▶                                  |                         |              |             |  |  |
|                    |        | 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)                                  | 1,750,541.              | 1,902,4      | 46.         | 1,956,826.                             |  |
|                    | 17     | Accounts payable and accrued expenses                                    |                         |              |             | <b>a</b>                               |  |
| S                  | 18     | Grants payable   |                         |              |             |  |  |
| ţį                 | 19     | Deferred revenue   |                         |              |             |  |  |
| ij                 | 20     | Loans from officers, directors, trustees, and other disqualified persons |                         |              |             |  |  |
| Liabilities        | 21     | Mortgages and other notes payable (attach schedule)                      |                         |              |             |  |  |
| _                  | 22     | Other liabilities (describe ▶)   | -                       |              |             |  |  |
|                    | 23     | Total liabilities (add lines 17 through 22)                              |                         | -            |             |  |  |
| S                  |        | Foundations that follow FASB ASC 958, check here ▶ □                     |                         |              |             |  |  |
| Balances           |        | and complete lines 24, 25, 29, and 30.                                   |                         |              |             |  |  |
| <u>a</u>           | 24     | Net assets without donor restrictions                                    |                         |              |             |  |  |
| Ва                 | 25     | Net assets with donor restrictions                                       |                         |              |             |  |  |
|                    | ŀ      | Foundations that do not follow FASB ASC 958, check here ▶ 🗵              |                         |              |             |  |  |
| ٦                  |        | and complete lines 26 through 30.  |                         |              |             |  |  |
| Net Assets or Fund | 26     | Capital stock, trust principal, or current funds                         |                         |              |             |  |  |
| 8                  | 27     | Paid-in or capital surplus, or land, bldg., and equipment fund           |                         |              |             |  |  |
| et                 | 28     | Retained earnings, accumulated income, endowment, or other funds         | 1,750,541.              | 1,902,4      | 16          |  |  |
| SS                 | 29     | Total net assets or fund balances (see instructions)                     | 1,750,541.              | 1,902,4      |             |  |  |
| t A                | 30     | Total liabilities and net assets/fund balances (see                      | 1,730,341.              | 1,902,4      | 40.         |  |  |
| Ne                 | 30     | instructions)  | 1 750 541               | 1 902 4      | 16          | }                                      |  |
|                    | rt III | Analysis of Changes in Net Assets or Fund Balances                       | 1,750,541.              | 1,902,4      | 40.1        |  |  |
|                    |        |  | (a) time 20 (           | 1 aanaa      | Г           | <u> </u>                               |  |
| 1                  |        | Il net assets or fund balances at beginning of year-Part II, colur       |                         |              | ,           | 1 750 541                              |  |
| ^                  |        | of-year figure reported on prior year's return)                          |                         |              | 1           | 1,750,541.                             |  |
| 2                  |        | er amount from Part I, line 27a  |                         |              | 2           | 38,065.                                |  |
| 3                  |        | er increases not included in line 2 (itemize) INVESTMENT INC             |                         |              | 3           | 113,840.                               |  |
| 4                  |        | lines 1, 2, and 3  |                         | • • • •      | 4           | 1,902,446.                             |  |
| 5                  |        | reases not included in line 2 (itemize)                                  | N. 4 (1 //s\ )*         |              | 5           |  |  |
| 6                  | rota   | I net assets or fund balances at end of year (line 4 minus line 5) - F   | art II, column (b), lir | ie 29        | 6           | 1,902,446.                             |  |

| Part     | IV Capital Gains and  | Losses for Tax on Investm   | ent Incor      | ne                                      |              |                                  |                         |  |
|----------|---|---|----------------|---|--------------|----------------------------------|-------------------------|--|
|          |   | l(s) of property sold (for example, real er<br>er; or common stock, 200 shs MLC Co) |                | ( <b>b)</b> How a P—Pur D—Do            | rchase       | (c) Date acquir<br>(mo , day, yr |                         | (d) Date sold<br>(mo , day, yr )           |
| 1a       | LPL FINANCIAL   |   |                | P                                       | ,            | Various_                         |                         | 07/01/2019                                 |
| b        |   |   |                |   |              |                                  |                         |  |
| <u>C</u> |   |   |                |   |              |                                  |                         |  |
| <u>d</u> |   |   |                |   |              |                                  |                         |  |
| <u>е</u> |   |   |                |   |              | <del> </del>                     |                         |  |
|          | (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale |   |                |   |              |                                  | or (loss)<br>minus (g)) |  |
| <u>a</u> | 1,092,047.  | 0.  |                | 1,045                                   | ,100.        |                                  |                         | 46,947.                                    |
| <u>b</u> |   |   |                |   |              |                                  |                         |  |
| <u> </u> |   |   |                |   |              |                                  |                         |  |
| <u>d</u> |   |   |                |   |              |                                  |                         |  |
| е        | Complete only for appets above  | ung govern and ung (b) and owned  | hu the found   | otion on 12/21                          | /60          |                                  |                         |  |
|          | Complete only for assets snow   | ring gain in column (h) and owned   |                |   | 709.         |                                  |                         | (h) gain minus<br>less than -0-) <b>or</b> |
|          | (i) FMV as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69  |                | Excess of col (i)<br>er col (j), if any |              |                                  |                         | om col. (h))                               |
| a        | 0.  | 0.  |                |   | 0.           | ***                              |                         | 46,947.                                    |
| b        | <u> </u>  |   |                |   |              |                                  |                         |  |
| <u>c</u> |   |   |                |   |              |                                  |                         | <del></del>                                |
| <u>d</u> |   |   |                |   |              |                                  |                         |  |
| <u>e</u> |   |   |                |   |              |                                  |                         |  |
| 2        | Capital gain net income or  |   |                | n Part I, line 7<br>n Part I, line 7    |              | 2                                |                         | 46,947.                                    |
| 3        |   | or (loss) as defined in sections, line 8, column (c). See instru                    |                |   | 0- in }      |                                  |                         |  |
|          |   | <u> </u>  |                |   | <u>. J ]</u> | 3                                |                         | 46,947.                                    |
| Part     |   | er Section 4940(e) for Reduate foundations subject to the                           |                |   |              |                                  |                         |  |
| Was t    |   | ection 4942 tax on the distribution under section 4940(e). Do                       |                |   | r in the ba  | ase period?                      |                         | ☐ Yes ☐ No                                 |
| 1        |   | int in each column for each yea   |                |   | efore ma     | king any entr                    | ies.                    |  |
|          | (a)   | (b)   |                | (c)                                     |              |                                  |                         | (d)  |
| Cale     | Base period years endar year (or tax year beginning in)                                     | Adjusted qualifying distributions   | Net va         | lue of noncharita                       | able-use ass | sets (co                         | olstri<br>I (b) di      | bution ratio<br>vided by col (c))          |
|          | 2018  |   | 0.             |   |              | 0.                               |                         | 0.000000                                   |
|          | 2017  |   | 0.             |   |              | 0.                               |                         | 0.000000                                   |
|          | 2016  |   | 0.             |   |              | 0.                               |                         | 0.000000                                   |
|          | 2015  |   | 0.             |   |              | 0.                               |                         | 0.000000                                   |
|          | 2014  |   | 0.             |   |              | 0.                               |                         | 0.000000                                   |
| 2        | Total of line 1, column (d)   |   |                |   |              | . 2                              |                         | 0.000000                                   |
| 3        |   | or the 5-year base period—div<br>undation has been in existence                     |                |   |              |                                  |                         | 0.000000                                   |
|          |   |   |                |   |              |                                  |                         |  |
| 4        | Enter the net value of noncl  | haritable-use assets for 2019 for   | om Part X,     | line 5                                  |              | 4                                |                         | 0.   |
| 5        | Multiply line 4 by line 3 .   |   |                |   |              | . 5                              |                         | 0.   |
| 6        | Enter 1% of net investment  | income (1% of Part I, line 27b  | )              |   |              | . 6                              |                         | 1,138.                                     |
| 7        | Add lines 5 and 6   |   |                |   |              | . 7                              |                         | 1,138.                                     |
| 8        | Enter qualifying distribution   | s from Part XII, line 4   |                |   | <br>         | . 8                              | 40                      | V toy rate C-a Al-                         |
| _        | If line 8 is equal to or great Part VI instructions.  | er than line 7, check the box ir  | ı Part VI, lin | e ID, and CO                            | inplete tr   | iai part using                   |                         | o tax rate. See the                        |

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| Part | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see   | instr      | uctio        | ns)                                     |
|------|---|------------|--------------|---|
| 1a   | Exempt operating foundations described in section 4940(d)(2), check here ▶☐ and enter "N/A" on line 1. )                            |            |              | ,                                       |
|      | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)                                       |            |              |   |
| b    | Domestic foundations that meet the section 4940(e) requirements in Part V, check  |            | 2,2          | 277.                                    |
|      | 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)            |            | <del> </del> |   |
| 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   |            |              | 77.                                     |
| 4    | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                        |            | 2,2          | 0.                                      |
| 5    | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0  |            | 2 2          | 77.                                     |
| 6    | Credits/Payments:   |            |              | <del></del>                             |
| a    | 2019 estimated tax payments and 2018 overpayment credited to 2019   6a  |            |              |   |
| b    | Exempt foreign organizations—tax withheld at source   |            |              |   |
| c    | Tax paid with application for extension of time to file (Form 8868) 6c  | 3          |              | - 1                                     |
| ď    | Backup withholding erroneously withheld 6d  |            |              |   |
| 7    | Total credits and payments. Add lines 6a through 6d   |            |              | لــــــــــــــــــــــــــــــــــــــ |
| 8    | Enter any penalty for underpayment of estimated tax. Check here 🗵 if Form 2220 is attached  |            |              | 83.                                     |
| 9    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   |            |              | 60.                                     |
| 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   |            |              | <u> </u>                                |
|      | VII-A Statements Regarding Activities   |            |              |   |
| 1a   | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it                    | T          | Yes          | No                                      |
| ıa   | participate or intervene in any political campaign?   | 1a         |              | ×                                       |
| b    | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the                        | 1          | $\vdash$     |   |
| D    | 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 materials                     | 1          |              |   |
|      | published or distributed by the foundation in connection with the activities.   |            |              |   |
| С    | Did the foundation file Form 1120-POL for this year?  | 1c         |              | ×                                       |
| d    | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:                                  |            |              |   |
| _    | (1) On the foundation. ► \$ (2) On foundation managers. ► \$  | 1          |              |   |
| е    | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed                       |            |              |   |
|      | on foundation managers. ► \$  |            |              | 1                                       |
| 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, articles                      | ·L         |              |   |
|      | 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         |              |   |
| 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:                                   | 1 .        |              |   |
|      | By language in the governing instrument, or   | ٠          |              |   |
|      | • By state legislation that effectively amends the governing instrument so that no mandatory directions that                        | ļ <u>.</u> |              |   |
|      | conflict with the state law remain in the governing instrument?   | 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 XV   | 7          | ×            | L                                       |
| 8a   | Enter the states to which the foundation reports or with which it is registered. See instructions. ► OK                             |            |              |   |
| b    | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General                        | · .        |              | i                                       |
| IJ   | (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) or                     |            |              |   |
|      | 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV | 9          |              | ×                                       |
| 10   | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  | 10         |              | ×                                       |

| Far | Statements Regarding Activities (continued)   |      |               |            |
|-----|---|------|---------------|------------|
|     |   |      | 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  | 10   |               |            |
| 13  | person had advisory privileges? If "Yes," attach statement. See instructions  | 12   | ├─-           | ×          |
|     | Abberrate address & 27.00   |      | L             |            |
| 14  | The books are in care of ► MICHAEL W. SIGMON Telephone no. ► (405):   | 329- | 3444          |            |
|     | Located at ► 4420 BROOKLINE PLACE, NORMAN, OK ZIP+4 ► 73072   |      |               | <u>-</u> - |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here   |      |               | ▶ [        |
| 46  | and enter the amount of tax-exempt interest received or accrued during the year   |      | Yes           | No         |
| 16  | At any time during calendar year 2019, 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   | 162           | ×          |
|     | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of  |      |               |            |
|     | the foreign country   | Щ.   |               | l          |
| Pan | VII-B Statements Regarding Activities for Which Form 4720 May Be Required   | ,    | Yes           | No         |
| 1a  | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year, did the foundation (either directly or indirectly):   |      | res           | NO         |
| ıu  | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes   No   | ŀ    |               |            |
|     | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a   |      |               |            |
|     | disqualified person?  |      |               |            |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No   |      |               |            |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)?   | 1    |               |            |
|     | (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 <b>any</b> 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   |               |            |
|     | Organizations relying on a current notice regarding disaster assistance, check here   |      |               |            |
| С   | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that  |      |               |            |
|     | were not corrected before the first day of the tax year beginning in 2019?  | 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 2019, did the foundation have any undistributed income (Part XIII, lines   |      |               |            |
|     | 6d and 6e) for tax year(s) beginning before 2019?   |      |               |            |
| b   | If "Yes," list the years ► 20 , 20 , 20 , 20  |      |               |            |
| , , | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to  | 3    |               |            |
|     | all years listed, answer "No" and attach statement—see instructions.)   | 2b   |               | ×          |
| С   | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.   |      | *             |            |
| 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 2019 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 Form 4720, Schedule C, to determine if the         |      |               |            |
|     | foundation had excess business holdings in 2019.)   | 3b   | <del></del> } |            |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a   | -             | ×          |
|     | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its  |      |               |            |
|     | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?  | 4b   |               | ×          |

| Part                              | VII-B Statements Regarding Activi  | ties for \                   | Which Form   | 4720     | May Be F                | Require      | ed (conti  | nued)                               |               |         |             |
|-----------------------------------|--|------------------------------|--|----------|-------------------------|--------------|--|-------------------------------------|---------------|---------|-------------|
| 5a                                | During the year, did the foundation pay or inc   | ur any an                    | nount to:  |          |                         |              |  | <u></u>                             |               | Yes     | No          |
|                                   | (1) Carry on propaganda, or otherwise attern   |                              |  |          |                         |              | ☐ Yes  | 🔀 No                                | , [           |         |             |
|                                   | (2) Influence the outcome of any specific pu   |                              | tion (see sect   | ion 495  | 55); or to c            | arry on      | 1  |                                     | Ì             |         |             |
|                                   | directly or indirectly, any voter registration   | drive?                       |  |          |                         |              | ☐ Yes  | ⊠ No                                | , , ,         |         |             |
|                                   | (3) Provide a grant to an individual for travel,   |                              |  |          |                         |              | ☐ Yes  | 🔀 No                                | . ]           |         |             |
|                                   | (4) Provide a grant to an organization other   |                              |  |          |                         | rıbed ir     | 1  |                                     |               | ,       |             |
|                                   | section 4945(d)(4)(A)? See instructions .  |                              |  |          |                         |              | ☐ Yes  | X No                                | ·             |         |             |
|                                   | (5) Provide for any purpose other than religion  |                              |  |          | •                       |              |  | _                                   | ļ             |         |             |
| -                                 | purposes, or for the prevention of cruelty   |                              |  |          |                         |              |  | ⊠ No                                | - 1           |         |             |
| b                                 | If any answer is "Yes" to 5a(1)–(5), did any o   |                              |  |          |                         |              |  | scribed                             |               |         |             |
|                                   | in Regulations section 53.4945 or in a curren  |                              | •  |          |                         |              |  |                                     | _ <u>5b</u>   |         |             |
|                                   | Organizations relying on a current notice rega   | _                            |  |          |                         |              |  |                                     | 1             | ٥       |             |
| С                                 | If the answer is "Yes" to question 5a(4), do   |                              |  |          |                         |              |  | <b></b>                             | İ             |         |             |
|                                   | because it maintained expenditure responsib  |                              | -  |          |                         | • • •        | ∐ Yes  | ∐ No                                | '             |         |             |
| 60                                | If "Yes," attach the statement required by Re  | _                            |  |          |                         |              |  |                                     | -             |         | -           |
| 6a                                | Did the foundation, during the year, receive a on a personal benefit contract?   | ny lulius,                   | , directly or in   | directly | , to pay pri            | emiums       | _  | © Na                                |               |         |             |
| <b>h</b>                          | Did the foundation, during the year, pay prem  | <br>سام مطالب                |  |          |                         | <br>Lbonofii | ∐ Yes  | ျှေသြ No                            | _ <del></del> |         | <del></del> |
| b                                 | If "Yes" to 6b, file Form 8870.  | nums, um                     | ectly or maire   | ony, on  | a persona               | Dellell      | CONTRACT   |                                     | 6b            |         | ×           |
| 7a                                | At any time during the tax year, was the founda  | ion a nart                   | v to a prohibiti   | ed tay s | helter trans            | action?      | □ Vas  | X No                                |               |         | •           |
| b                                 | If "Yes," did the foundation receive any proce   |                              |  |          |                         |              |  |                                     | 7b            |         |             |
| 8                                 | Is the foundation subject to the section 4960  |                              |  |          |                         |              |  |                                     | ·             |         |             |
| •                                 | remuneration or excess parachute payment(s   |                              |  |          |                         |              |  | □No                                 |               |         |             |
| Part                              | VIII Information About Officers, Di  |                              |  |          |                         |              |  | Paid E                              | mploy         | ees,    |             |
|                                   | and Contractors  | •                            |  |          |                         |              |  |                                     |               | ·       |             |
| 1                                 | List all officers, directors, trustees, and for  | ındation                     | managers ar  | nd their | compens                 | ation. S     | See instru   | uctions                             | ).            |         |             |
|                                   | (a) Name and address   |                              | ile, and average<br>urs per week   |          | mpensation<br>not paid, |              | Contribution<br>byee benefit                       |                                     | (e) Expe      |         |             |
|                                   |  |                              |  |          |                         |              |  |                                     |               |         |             |
|                                   |  | devo                         | ted to position  |          | ter -0-)                |              | erred compe  | ensation                            | other         | allowan |             |
|                                   | HAEL SIGMON  | devo                         | RMAN   |          | nter -0-)               |              |  |                                     | other         | allowan |             |
| 4220                              | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730   | devo<br>CHAI                 | ted to position<br>RMAN<br>5.00  |          |                         |              |  | 0.                                  | other         | allowan | 0.          |
| 4220<br>JANE                      | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730<br>E SIGMON   | devo                         | ted to position RMAN 5.00 SIDENT   |          | 0 .                     |              |  | 0.                                  | other         | allowan | 0.          |
| 4220<br>JANE                      | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730   | devo                         | ted to position<br>RMAN<br>5.00  |          | nter -0-)               |              |  |                                     | other         | allowan |             |
| 4220<br>JANE                      | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730<br>E SIGMON   | devo                         | ted to position RMAN 5.00 SIDENT   |          | 0 .                     |              |  | 0.                                  | other         | allowan | 0.          |
| 4220<br>JANE                      | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730<br>E SIGMON   | devo                         | ted to position RMAN 5.00 SIDENT   |          | 0 .                     |              |  | 0.                                  | other         | allowan | 0.          |
| 4220<br>JANE                      | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730<br>E SIGMON   | devo                         | ted to position RMAN 5.00 SIDENT   |          | 0 .                     |              |  | 0.                                  | other         | allowan | 0.          |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  | devo<br>CHAI                 | RMAN 5.00 SIDENT 5.00  | er       | 0.                      | and def      | erred compe  | 0.                                  |               |         | 0.          |
| 4220<br>JANE                      | HAEL SIGMON<br>D BROOKLINE PLACE NORMAN OK 730<br>E SIGMON   | devo<br>CHAI                 | RMAN 5.00 SIDENT 5.00  | er       | 0.                      | and def      | erred compe  | 0.                                  |               |         | 0.          |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo   | devo<br>CHAI                 | RMAN 5.00 SIDENT 5.00  | se incl  | 0.                      | and def      | see instr  | 0.                                  |               |         | 0.          |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those than the than those that the those than those those than those those those that the tho | se incl  | 0.                      | and def      | see instr  | 0. 0.                               | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid employments of the highest of the | CHAI                         | ERMAN 5.00 EIDENT 5.00 her than those  | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those than the than those that the those than those those than those those those that the tho | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those than the than those that the those than those those than those those those that the tho | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those than the than those that the those than those those than those those those that the tho | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220              | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | CHAI                         | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | and def      | see instr  | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |
| 4220<br>JANE<br>4220<br>2<br>NONE | HAEL SIGMON  D BROOKLINE PLACE NORMAN OK 730  E SIGMON  D BROOKLINE PLACE NORMAN OK 730  Compensation of five highest-paid emplo "NONE."   | devo CHAI PRES V2  yees (otl | ted to position  RMAN 5.00  SIDENT 5.00  her than those per very per | se incl  | 0.<br>0.<br>uded on li  | ne 1—        | see instr  (d) Contribi employee plans and compens | 0.  0.  uctions to benefit deferred | s). If no     | one, e  | 0.<br>0.    |

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa<br>and Contractors (continued) |  | nployees,  |
|--|--|--|
| 3 Five   | highest-paid independent contractors for professional services. See instructions. If none, enter "NON  | E."  |
|  | (a) Name and address of each person paid more than \$50,000 (b) Type of service  | (c) Compensation                                 |
| NONE   |  |  |
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| Part IX-A  | er of others receiving over \$50,000 for professional services   | 10   |
|  |  |  |
|  | ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of its and other beneficiaries served, conferences convened, research papers produced, etc.   | Expenses   |
| 1  |  |  |
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|  | Commence of December 1 Delete d Investments (see instructions)   | l  |
| Part IX-B  | Summary of Program-Related Investments (see instructions) e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.   | Amount   |
| 1  | two largest program related investments made by the loangailon during the tax year on lines 1 and 2.   |  |
| '  |  |  |
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| All adhan an   | and the state of t | <u></u>  |
| 3  | gram-related investments. See instructions   |  |
| ·  | )  |  |
| *********  |  |  |
| Total. Add I   | nes 1 through 3  | <u> </u>   |
|  |  | Form <b>990-PF</b> (2019                         |

| Parl | X Minimum Investment Return (All domestic foundations must complete this part. Fore   | gn fo           | undations,          |
|------|---|-----------------|---------------------|
|      | see instructions.)  |                 | ·                   |
| 1    | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.   |                 |                     |
| а    | Average monthly fair market value of securities   | 1a              |                     |
| b    | Average of monthly cash balances  | 1b              |                     |
| C    | Fair market value of all other assets (see instructions)  | 1c              |                     |
| d    | <b>Total</b> (add lines 1a, b, and c)   | 1d              |                     |
| е    | Reduction claimed for blockage or other factors reported on lines 1a and  | . au            |                     |
|      | 1c (attach detailed explanation)  | ]]              |                     |
| 2    | Acquisition indebtedness applicable to line 1 assets  | 2               |                     |
| 3    | Subtract line 2 from line 1d  | 3               | 0.                  |
| 4    | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see  |                 |                     |
|      | instructions)   | 4               | 0.                  |
| 5    | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4  | 5               | 0.                  |
| _ 6  | Minimum investment return. Enter 5% of line 5   | 6               | 0.                  |
| Part | XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.) | ounda           | ations              |
| 1    | Mınımum investment return from Part X, line 6   | 1               | 0.                  |
| 2a   | Tax on investment income for 2019 from Part VI, line 5  |                 |                     |
| b    | Income tax for 2019. (This does not include the tax from Part VI.) 2b   |                 |                     |
| С    | Add lines 2a and 2b   | 2c              | 2,277.              |
| 3    | Distributable amount before adjustments. Subtract line 2c from line 1   | 3               | 0.                  |
| 4    | Recoveries of amounts treated as qualifying distributions   | 4               |                     |
| 5    | Add lines 3 and 4   | 5               | 0.                  |
| 6    | Deduction from distributable amount (see instructions)  | 6               |                     |
| 7    | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,   |                 |                     |
| _    | line 1  | 7               | 0.                  |
| 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 <sup>.</sup> |                     |
| b    | Program-related investments—total from Part IX-B  | 1b              |                     |
| 2    | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,  |                 |                     |
|      | purposes  | 2               | <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    | 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               | 0.                  |
| _    | 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 whe           | ther the foundation |

| Part   | Vill Undistributed Income (see instruction   | ons)          | ,                          | ·           |  |
|--------|--|---------------|----------------------------|-------------|--|
|        |  | (a)<br>Corpus | (b)<br>Years prior to 2018 | (c)<br>2018 | (d)<br>2019                                |
| 1      | Distributable amount for 2019 from Part XI, line 7   |               |                            | 3           | 0.   |
| 2<br>a | Undistributed income, if any, as of the end of 2019:<br>Enter amount for 2018 only   |               | , ,                        |             | · g · as a · · · · · · · · · · · · · · · · |
| b      | Total for prior years: 20, 20, 20  |               |                            |             |  |
| 3<br>a | Excess distributions carryover, if any, to 2019: From 2014   |               |                            |             | 2  |
| b      | From 2015  |               |                            | :           |  |
| С      | From 2016  |               |                            |             |  |
| d      | From 2017  | 1             |                            |             |  |
| e<br>f | From 2018  | 0.            |                            |             |  |
| 4      | Qualifying distributions for 2019 from Part XII, line 4. ► \$  | 0.            |                            |             |  |
| а      | Applied to 2018, but not more than line 2a .   |               |                            |             |  |
| b      | Applied to undistributed income of prior years (Election required—see instructions)  |               |                            | ٦           | ·  |
| С      | Treated as distributions out of corpus (Election required—see instructions)  |               |                            |             |  |
| d      | Applied to 2019 distributable amount   |               |                            |             |  |
| e      | Remaining amount distributed out of corpus   | 0.            | ,                          |             | ,  |
| 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:   | ч             | ء ا ا ساله                 |             | · * * 4 · 6 · • •                          |
| a      | Corpus Add lines 3f, 4c, and 4e. Subtract line 5   | 0.            |                            |             |  |
| 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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions  |               |                            | 0.          |  |
| f      | Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020  |               |                            | ,           | 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 2014 not applied on line 5 or line 7 (see instructions).   | 0.            |                            | ı           |  |
| 9      | Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a  | 0.            | , 0                        | c • •       | t b  |
| 10     | Analysis of line 9:  |               |                            |             |  |
| а      | Excess from 2015   |               | ī                          | ,           |  |
| b      | Excess from 2016   | ·             |                            |             |  |
| c<br>d | Excess from 2017   |               | ,                          | is not      |  |
| e      | - ( 2010   | 1             |                            | , ,         | u  |

factors:

Page **11** 

| 3 Grants and Contributions Paid During t | he Year or Approv                                       |                      | ture Payment                     |         |
|--|---|----------------------|----------------------------------|---------|
| Recipient                                | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount  |
| Name and address (home or business)      | any foundation manager<br>or substantial contributor    | recipient            | Contribution                     |         |
| a Paid during the year                   |   |                      |                                  |         |
| SEE ATTACHED LIST                        |   |                      |                                  |         |
| SEE ATTACHED LIST                        |   |                      |                                  |         |
| NORMAN OK 73069                          |   | NONE                 | SCHEDULE ATTACHED                | 88,000  |
|  |   | !                    |                                  |         |
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|  |   |                      |                                  |         |
| Total                                    |   |                      |                                  | 88,000. |
| <b>b</b> Approved for future payment     |   |                      |                                  |         |
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3b

Total

| Pa  | rt X       | VI-A Analysis of Income-Producing Ac  | tivities                           | · · · · · · · · · · · · · · · · · · · |  | ···-                                  |  |
|-----|------------|---|------------------------------------|---------------------------------------|--|---------------------------------------|--|
|     | _          | oss amounts unless otherwise indicated.   |                                    | siness income                         | Excluded by sect                               | ion 512, 513, or 514                  | (0)  |
| 1   | Pro        | gram service revenue:   | (a)<br>Business code               | (b)<br>Amount                         | (c)<br>Exclusion code                          | (d)<br>Amount                         | (e) Related or exemp function income (See instructions.) |
| •   | a          | gram service revenue.   |                                    |                                       | <del> </del>                                   |                                       |  |
|     | _          |   |                                    |                                       | <del> </del>                                   | <u> </u>                              |  |
|     | b          |   |                                    |                                       | <del> </del>                                   |                                       |  |
|     | C          |   |                                    | <del></del>                           | <del> </del>                                   |                                       |  |
|     | d          |   |                                    |                                       | <del> </del>                                   |                                       |  |
|     | e          |   |                                    |                                       | <del> </del>                                   |                                       |  |
|     | T          | <del></del>   |                                    |                                       | <u> </u>                                       |                                       |  |
| _   | _          | Fees and contracts from government agencies   |                                    |                                       | <del> </del>                                   |                                       |  |
| 2   |            | mbership dues and assessments   |                                    |                                       | ļ  |                                       |  |
| 3   |            | rest on savings and temporary cash investments  |                                    |                                       | -  |                                       |  |
| 4   |            | dends and interest from securities  |                                    |                                       |  |                                       |  |
| 5   |            | rental income or (loss) from real estate:   |                                    |                                       |  | 3 8                                   |  |
|     |            | Debt-financed property  |                                    |                                       | <del> </del>                                   |                                       |  |
| _   |            | Not debt-financed property  |                                    |                                       | ļ <u>.                                    </u> |                                       |  |
| 6   |            | rental income or (loss) from personal property  |                                    |                                       | <u> </u>                                       |                                       |  |
| 7   |            | er investment income  | ļ                                  |                                       | ļ  |                                       |  |
| 8   |            | n or (loss) from sales of assets other than inventory                                   |                                    | <u> </u>                              | <u> </u>                                       |                                       |  |
| 9   |            | income or (loss) from special events  |                                    |                                       | ļ  |                                       |  |
| 10  | Gro        | ss profit or (loss) from sales of inventory   |                                    |                                       |  |                                       |  |
| 11  | Oth        | er revenue: a   |                                    |                                       |  |                                       |  |
|     | b          |   | `                                  |                                       |  |                                       |  |
|     | C          |   |                                    |                                       |  |                                       |  |
|     | d          |   |                                    |                                       |  |                                       |  |
|     | e          |   |                                    |                                       |  |                                       |  |
| 12  | Sub        | ototal. Add columns (b), (d), and (e)   |                                    |                                       |  |                                       |  |
|     |            | al. Add line 12, columns (b), (d), and (e)  |                                    | ·                                     |  | 13                                    |  |
|     |            | ksheet in line 13 instructions to verify calculation                                    | s.)                                |                                       |  |                                       |  |
| Pa  | rt X\      | /I-B Relationship of Activities to the A  |                                    |                                       |  |                                       |  |
| Lin | e No.<br>▼ | Explain below how each activity for which accomplishment of the foundation's exempt pur | ncome is repo<br>poses (other than | rted in column<br>by providing fun    | (e) of Part XVI                                | -A contributed in oses). (See instruc | mportantly to the tions )                                |
| 4   |            | <u> </u>  | <u>.</u>                           |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    | ·                                     |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     | _          |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
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|     |            | <u> </u>  |                                    | <del></del> _                         | <del></del>                                    |                                       |  |
|     |            | <del> </del>  |                                    | <del></del>                           |  | <del></del>                           |  |
|     |            | <del>                                     </del>  |                                    | <del></del>                           |  | <del></del>                           |  |
|     |            | 1   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |
|     |            |   |                                    |                                       |  |                                       |  |

| Form 99<br>Part |      | <u> </u>   |   | insfers to and Tra  | nsactions    | and F       | Relatio     | nships   | With N      | oncha       | ritable     |       | ge 13<br>empt |
|-----------------|------|--|---|---|--------------|-------------|-------------|----------|-------------|-------------|-------------|-------|---------------|
| 1<br>a          | in s | the organization of section 501(c) (canizations? | directly or indirectly other than section | v engage in any of the 501(c)(3) organizato a noncharitable ex              | tions) or in | sect        | ion 527     |          |             |             |             | Yes   | No            |
| a               | (1)  | Cash   | · · · · · ·                               | · · · · · · ·   | · · · ·      |             |             |          |             |             | 1a(1)       |       | ×             |
| b               |      | Other assets . er transactions:                  |   |   |              |             |             |          |             | • •         | 1a(2)       |       | ×             |
|                 | (1)  | Sales of assets to                               | a noncharitable ex                        | empt organization   |              |             |             |          |             |             | 1b(1)       |       | ×             |
|                 |      |  |   | table exempt organiz  |              |             |             |          |             |             | 1b(2)       | _     | ×             |
|                 |      |  |   | er assets   |              |             |             |          |             |             | 1b(3)       | -     | ×             |
|                 | (4)  | Reimbursement a                                  | rrangements                               |   |              |             |             |          |             |             | 1b(4)       | -     | ×             |
|                 | (5)  | Loans or loan gua                                | rantees                                   |   |              |             |             |          |             |             | 1b(5)       |       | ×             |
|                 | (6)  | Performance of se                                | ervices or members                        | ship or fundraising so  | licitations  |             |             |          |             |             | 1b(6)       |       | ×             |
| C               | Sha  | ring of facilities, e                            | quipment, mailing                         | lists, other assets, or   | paid emplo   | yees        |             |          |             |             | 1c          |       | ×             |
| (a) Line        | valu |  | on or sharing arran                       | vices given by the re<br>gement, show in colu<br>charitable exempt organiza | umn (d) the  | value c     | of the go   | ods, otl |             | s, or se    | rvices      | recei | ved.          |
|                 | _    |  |   |   |              |             |             |          |             | •           |             |       |               |
|                 |      |  |   |   |              |             |             |          |             |             |             |       |               |
|                 |      |  |   |   |              |             |             |          |             |             |             |       |               |
|                 |      | ·  |   |   |              | _           |             |          |             |             |             |       |               |
|                 |      | <u> </u>   | <u> </u>                                  |   |              |             |             |          |             |             |             |       |               |
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|                 |      |  |   |   |              |             |             |          |             |             |             |       |               |
|                 |      | ······································           |   |   |              |             |             | -        |             |             |             |       |               |
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|                 |      |  |   |   | <del></del>  |             |             |          |             |             |             |       |               |
| 2a<br>b         | des  | cribed in section 5                              | •   | affiliated with, or rel<br>ection 501(c)(3)) or in<br>e.                    |              |             |             |          | organiz     | ations      | □ Ye        | es 🗵  | No            |
|                 |      | (a) Name of organ                                |   | (b) Type of o   | rganization  |             |             | (c) l    | Description | of relatio  | nship       |       |               |
|                 |      |  |   |   |              |             |             |          |             |             |             |       |               |
|                 |      |  |   |   |              |             |             |          |             |             |             |       |               |

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|               | the foundation directly or indirectly a  |   |  |
|               | scribed in section 501(c) (other than se   |   | · · · · · · · · · · · · · · · · · · ·                                    |
| <u>b If "</u> | Yes," complete the following schedule  |   |  |
|               | (a) Name of organization   | (b) Type of organization                          | (c) Description of relationship  |
|               |  |   |  |
|               |  |   |  |
|               |  |   |  |
|               |  |   |  |
|               |  |   |  |
|               | nder penalties of periffry, I declare that I have examin<br>prect, each complete Declaration of preparer (other th | ed this return, including accompanying schedules  | s and statements, and to the best of my knowledge and belief, it is true |
| 0.9           |  | lan taxpayer) is based on an information of which | May the IRS discuss this return  |
| Here /        | 4/1 kg gmon  | . The Chairm                                      | AN with the preparer shown below See instructions Yes No                 |
| S             | ignature of officer of trustee   | Date // Title //                                  |  |
| Paid          | Print/Type preparer's name   | Preparer's signature                              | Date Check X if PTIN   |
| Prepare       | RONALD D. KIRKPATRICK  | Tou Ew Dalud                                      | 4/25/207 self-employed P00657167   |
| Use Onl       |  | KPATRICK CPA /                                    | / Firm's EIN ▶ 73-1070929  |
|               | Firm's address ► 2465 BOARDWA  |   | Phone no (405)364-9138   |
| BAA           | NORMAN   | OK 730  | 69-6332 Form <b>990-PF</b> (201  |
|               |  |   |  |

MICHAEL AND JANE SIGMON FAMILY FOUNDATION

Form 990-PF: Return of Private Foundation

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

**Continuation Statement** Restrictions NONE Submission Information NONE Form Information NONE Name and Address Information 4220 BROOKLINE PLACE NORMAN, OK 73072 MICHAEL SIGMON

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

### Form 990-PF: Return of Private Foundation

Taxes

**Continuation Statement** 

| Description | Revenue and<br>Expense per<br>Book | Net<br>Investment<br>Income | Adjusted Net Income | Disbursement for charitable purpose |
|-------------|------------------------------------|-----------------------------|---------------------|-------------------------------------|
| EXCISE TAX  | 3,141.                             |                             |                     |                                     |
| Tatal       | 2 141                              |                             |                     |                                     |

## **Legal and Professional Fees**

2019

| Name    |     |      |        |        |            | Employer Identification No |
|---------|-----|------|--------|--------|------------|----------------------------|
| MICHAEL | AND | JANE | SIGMON | FAMILY | FOUNDATION | 73-1592997                 |
|         |     |      |        |        |            |                            |

#### Line 16a - Legal Fees

| Name of<br>Provider | Type of Service<br>Provided | Amount<br>Paid<br>Per Books | Net<br>Investment<br>Income | Adjusted<br>Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
|                     |                             |                             |                             |                           |   |
|                     | -                           |                             |                             |                           |   |
|                     |                             |                             |                             |                           |   |
|                     |                             |                             |                             |                           |   |
| al to Form 990      | )-PF, Part I, Line 16a      |                             |                             |                           |   |

### **Line 16b - Accounting Fees**

| Name of<br>Provider  | Type of Service<br>Provided | Amount<br>Paid<br>Per Books | Net<br>Investment<br>Income | Adjusted<br>Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|----------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| RON KIRKPATRICK, CPA | ACCOUNTING FEES             | 400.                        |                             |                           |   |
|                      |                             |                             |                             |                           | -   |
|                      |                             |                             |                             |                           |   |
|                      |                             |                             |                             |                           |   |
| Total to Form 990-   | PF, Part I, Line 16b        | 400.                        |                             |                           |   |

#### Line 16c - Other Professional Fees

| Name of<br>Provider    | Type of Service<br>Provided | Amount<br>Paid<br>Per Books | Net<br>Investment<br>Income | Adjusted<br>Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| LPL FINANCIAL SERVICES | INVESTMENT ADVISORY FEES    | 21,394.                     |                             |                           |   |
| Total to Form 990-     | PF, Part I, Line 16c        | 21,394.                     |                             |                           |   |

# Additional information from your 2019 Federal Exempt Tax Return

#### Form 990-PF: Return of Private Foundation

Line 1(a)

| Description             | Amount      |
|-------------------------|-------------|
| MICHAEL AND JANE SIGMON | 151,000.    |
| Tota                    | al 151,000. |

#### Form 990-PF: Return of Private Foundation

Line 4(b)

**Itemization Statement** 

| Description   |       | Amount  |
|---------------|-------|---------|
| LPL FINANCIAL |       | 66,893. |
|               | Total | 66,893. |

# Michael & Jane Sigmon Family Foundation

Distribution of Gifts for 2019

#### Artspace at Untitled

\$5,000

1 NE 3<sup>rd</sup> Street Oklahoma City, OK 73104 Laura Warrimer, Creative Director 405-515-9995

#### Center for Children and Families

\$3,000

210 South Cockrel Avenue Norman, OK 73071 Brandon Brooks, Executive Director 405-364-1420

#### Cleveland County CASA, Inc.

\$3,000

(Court Appointed Special Advocates) P.O. Box 1714 (Couch Center on Tecumseh Road) Norman, OK 73070 405-360-5295 Tiffany Page, Executive Director

#### **Deaconess Pregnancy and Adoption Services**

\$3,000

8308 N. May Ave. Suite 100 Oklahoma City, OK 73120 Diedre McCool, Executive Director

\$3,000

**Deliverance Ministries, Inc.** 2828 NW 57<sup>th</sup> Street, Ste. 305 Oklahoma City, OK 73112 www.delmin.com Richard Peterson, Executive Minister 405-842-5509

#### **Eden Clinic**

\$3,000

1807 W. Lindsey Norman, OK 73069 405-259-2801 Alison Stow, Nurse Manager Linda Cozadd, Executive Director

#### Food and Shelter

\$3,000

201 Reed Avenue (physical) PO Box 5537 Norman, OK 73070 405-360-4954 Mark Braley, President

**Hope House** 

\$5,000

6608 N. Wester Ave. PMB #178 Oklahoma City, OK 73116 405-254-5251 Brandy Romine, Program Director

LoveWorks

\$20,000

P.O. Box 721055, Norman, OK 73070-4815 151 12th Ave SE Norman, OK 73071 405-397-9576 Michael Hirsch, Executive Director

**Novo Ministries** 

\$10,000

P.O. Box 672 Oklahoma City, OK 73101 1700 NE 4<sup>th</sup> Street Oklahoma City, OK 73117 405-209-9765 Lee Roland, Chairman

Oklahoma Jail-Prison Ministries

\$2,000

2629 W I44 Service Road #204 Oklahoma City, OK 73112 405-917-2242 Tim Gentry, Executive Chaplain

**OSU** Foundation

\$20,0000

400 S. Monroe Street Stillwater, OK 74074 Rachel Tribble, Director of Development 405-385-5100

#### **Salvation Army**

\$2,000

318 E. Hayes St. Norman, Oklahoma 73069 405-364-9910 Major Margaret Kennell, Corps Officer

#### **Second Chance**

\$2,000

P.O. Box 1266 Norman, OK 73070 4500 24<sup>th</sup> Ave NW Norman, OK 73069 402-321-1915

#### St. Jude Childrens Research Hospital

\$2,000

262 Danny Thomas Place Memphis, TN 38105

# WildCare Foundation

\$2,000

7601 84<sup>th</sup> Street Noble, Oklahoma 73068 www.WildCareOklahoma.org 405-872-9338 Rondi, M. Large, Director

#### Part XV Purpose of Grants or Contribution

Artspace at Untitled provides a mentorship program for Oklahoma City Public Schools students to create, learn, and experiment with art. The program incorporates art history, theory and contemporary art trends into the curriculum.

Center for Children and Families provides a range of effective services to heal children who have been wounded by relationship trauma, strengthen families who are struggling with parenting challenges and empower youth to reach their full potential as caring adults.

Cleveland County CASA, Inc. is a court appointed non-profit advocacy group serving Cleveland, Garvin and McClain counties. CASA speaks up for children who have been abused or neglected and need a voice in the child welfare system. CASA's community volunteers are trained court advocates who give a voice to children who have no one to represent their best interests.

Eden Clinic (Formerly Care Net) provides pregnancy testing, counseling, education, and material assistance. Counseling includes education on the three options for an unexpected pregnancy. Education includes pregnancy and childbirth parenting. Ultrasound equipment is available for expecting mothers to get to know their baby prior to its birth. Material Assistance includes baby clothing, diapers, baby accessories and baby furniture. Referrals to other agencies are made as needed.

Deaconess Pregnancy and Adoption Services assists women in crisis pregnancies and provides adoption services.

**Deliverance Ministries, Inc.** is a non-profit, non-denominational, volunteer-reliant ministry providing group education and individual counseling and prayer with a focus on deliverance and inner healing. The program stresses that deliverance is not a one-time quick fix, but rather and important part of identifying issues and equipping people with methods and tools to gain freedom from harmful strongholds that are hindering their lives.

**Food and Shelter** (Norman, Oklahoma) provides hot daily meals for needy people and temporary shelter for homeless families in transition and counseling to encourage employment and resolving other problems of the homeless.

Hope House provides housing, support, and direction to disadvantaged women to help them gain education and employment and become contributing members of the community.

LoveWorks provides after school and summer programs for middle-school youth, where they are helped to discover their gifts, talents, strengths, and possible vocations through tutoring, life skills training, team work, community service, and leadership development.

Novo Ministries is an inner city ministry for children and youth offering after school, evening and summer initiatives.

Oklahoma Jail-Prison Fellowship is a non-profit, volunteer-reliant ministry ministering directly to jail and prison inmates through counseling and Bible study. Thousands of prisoners are touched every year by OJPF with nearly 2,000 professions of faith annually. OJPF is currently exploring a means of partnering with local churches to offer follow-up support for individuals once they are released.

Oklahoma State University (OSU) Foundation provides administrative services for scholarship funding for the Colleges of Education and Engineering for students with financial need.

St. Judes Children's Research Hospital advances cures and means of prevention for pediatric catastrophic diseases through research and treatment. No child is denied treatment based on race, religion, or a family's ability to pay.

Salvation Army (Norman, Okla.) assists needy people with a variety of programs including food, clothing and temporary shelter.

Second Chance finds homes for abandoned and lost dogs and cats in Norman, Okla.

Wild Care Foundation provides medical care for injured wild animals and eventually frees them back into their natural habitat.