EXTENDED TO NOVEMBER 16, 20 Return of Private Foundation

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

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

1111	Ciliai	I TE	veride Service	- 3	_			
Fo	or ca	ler	ndar year 2019 or tax year beginning		, and e	nding		
1	Vame	e of	f foundation				A Employer identification	number
	A.I.	N	ABHAN FAMILY FOUNDATION	•			82-4840180	
_			and street (or P O box number if mail is not delivered to street a	address)		Room/suite	B Telephone number	
			08 KURDSON WAY	,			405-488-57	23
_					<u>-</u>	<u> </u>	-	
			own, state or province, country, and ZIP or foreign p	ostai code			C If exemption application is p	ending, check here
_			OND, OK 73013					
G	Ch	eck	call that apply Initial return	Initial return of a fo	ormer public o	charity	D 1 Foreign organizations	s, check here
			Final return	Amended return			2 Foreign organizations me	eting the 85% test
_			Address change	Name change			2 Foreign organizations me check here and attach co	emputation .
Н	Ch	eck	type of organization: X Section 501(c)(3) ex	cempt private foundation		2	E If private foundation sta	tus was terminated
		Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	U.J.	under section 507(b)(1)	(A), check here
ī	Fair	ma	arket value of all assets at end of year J Account	ng method: X Cash	Accr	ual	F If the foundation is in a	60-month termination
	(fro	m F	Part II, col. (c), line 16)	ther (specify)		,	under section 507(b)(1)	. —
	▶ \$		657,839. (Part I, colur		s.)			
ſ				(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
			Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
_	Т	-		50,000.			N/A	,
		1	Contributions, gifts, grants, etc., received	30,000.	·		-1/22	
_		2	Check In Interest on savings and temporary					
		3	cash investments					
•		4	Dividends and interest from securities					
		5a	. Gross rents					
		þ	Net rental income or (loss)					
		6a	Net gain or (loss) from sale of assets not on line 10					
	ă	b	Gross sales price for all assets on line 6a					
	Revenue	7	Capital gain net income (from Part IV, line 2)			0.		
	۳	8	Net short-term capital gain					
		9	Income modifications					
	1	0a	Gross sales less returns and allowances					
		b	Less Cost of goods sold					
		C	Gross profit or (loss)					
	1	1	Other income					
	1	2	Total. Add lines 1 through 11	50,000.		0.		
 	1	3	Compensation of officers, directors, trustees, etc	0.	•	0.		0.
2022	1	4	Other employee salaries and wages					
2	1	5	Pension plans, employee benefits					
_					,			
Z	INS.	h	Legal fees Accounting fees Other professional fees		F	RF(EIVED	
JAN	ğ	c	Other professional fees				181	
	ᇷ	7	Interest		Įį.	orn	3 0 2020 3	
	ativ 1		Taxes	· · · · · · · · · · · · · · · · · · ·		SEP SEP	3 0 2020	
SCANNED	ы	9	Depreciation and depletion		f		The second secon	
Z			Occupancy		1	OG	DEN, UT	
7	튐,		Travel, conferences, and meetings	-	+			
ろ			Printing and publications					
	ᅃ	2	• .					
	Operating 8		Other expenses					
	힏	4	Total operating and administrative	0.		0.		0.
	ᆲ.	_	expenses Add lines 13 through 23					31,500.
	4		Contributions, gifts, grants paid	31,500.				31,300.
	2	6	•	21 500		^		21 500
_	4		Add lines 24 and 25	31,500.		0.	<u> </u>	31,500.
	2	7	Subtract line 26 from line 12	10				
		а	Excess of revenue over expenses and disbursements	18,500.	•			
		þ	Net investment income (if negative, enter -0-)		_	0.		
	1	c	Adjusted net income (if negative, enter -0-)	1 1			N/A	1

Balance Sheets

2 Savings and temporary cash investments

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

10a Investments - U.S. and state government obligations

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment: basis

instructions. Also, see page 1, item l)Accounts payable and accrued expenses

21 Mortgages and other notes payable22 Other liabilities (describe ►

Total liabilities (add lines 17 through 22)

and complete lines 24, 25, 29, and 30
24 Net assets without donor restrictions
25 Net assets with donor restrictions

and complete lines 26 through 30

29 Total net assets or fund balances

26 Capital stock, trust principal, or current funds

30 Total liabilities and net assets/fund balances

Foundations that follow FASB ASC 958, check here

27 Paid-in or capital surplus, or land, bldg., and equipment fund

28 Retained earnings, accumulated income, endowment, or other funds

Foundations that do not follow FASB ASC 958, check here 🕨 🔀

Part III Analysis of Changes in Net Assets or Fund Balances

16 Total assets (to be completed by all filers - see the

Loans from officers, directors, trustees, and other disqualified persons

6 Receivables due from officers, directors, trustees, and other

1 Cash - non-interest-bearing

3 Accounts receivable

4 Pledges receivable

disqualified persons

7 Other notes and loans receivable

8 Inventories for sale or use

13 Investments - other

18 Grants payable19 Deferred revenue

20

Net

Less accumulated depreciation

15 Other assets (describe

b Investments - corporate stock
 c Investments - corporate bonds
 11 Investments - land, buildings, and equipment basis
 Less accumulated depreciation
 12 Investments - mortgage loans

5 Grants receivable

Attached schedules and amounts in the description

column should be for end-of-year amounts only

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
(must agree with end-of-year figure reported on prior year's return)	_1_	639,339.
2 Enter amount from Part I, line 27a	2	18, <u>500</u> .
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	657,839.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	657,839.
		Form 990-PF (2010)

639,339

Form **990-PF** (2019)

657,839

(a) List and descri	s and Losses for Tax be the kind(s) of property solo warehouse; or common stock	I (for example, real esta		(b) H	low acquired - Purchase - Donation	(c) I	Date acquired no., day, yr.)	(d) Date sold (mo , day, yr.)
1a `		,,			- Donation	-		
	ONE							
С								
<u>d</u>	***					-		
(e) Gross sales price	(f) Depreciation allow (or allowable)		st or other basis expense of sale				h) Gain or (loss plus (f) minus (
a								
b				_				
<u>c</u>				\dashv				
<u>d</u> e								
Complete only for assets show	ving gain in column (h) and o	wned by the foundation	on 12/31/69.		***	(I) Gan	ns (Col. (h) gain	minus
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any				but not less that sses (from col. (
<u>a</u>				_				
<u>b</u>	-	-						
d			<u> </u>					
e								
2 Capital gain net income or (net		also enter in Part I, line , enter -0- in Part I, line		}	2			
Net short-term capital gain or (If gain, also enter in Part I, line	8, column (c).	222(5) and (6):		}				
If (loss), enter -0- in Part I, line Part V Qualification	Under Section 4940	e) for Reduced	Tax on Net	Inve	stment Ir	come	!	
For optional use by domestic privi								
f section 4940(d)(2) applies, leave	this nart blank							
Vas the foundation liable for the s	ection 4942 tax on the distribi		·	iod?				Yes X No
f "Yes," the foundation doesn't qua 1 Enter the appropriate amount i				ntries.				
(a) Base period years		(b)		(c)	_		Distrib	(d) oution ratio
Calendar year (or tax year begin	ning in) Adjusted qual	fying distributions	Net value of no	nchar			(col. (b) div	ided by col. (c))
2018		0.			447,3	24.		.000000
2017 2016								
2015								
2014								
2 Total of line 1, column (d)							2	.000000
Average distribution ratio for th		the total on line 2 by 5.0	O, or by the number	er of y	ears			00000
the foundation has been in exis	tence if less than 5 years					-	3	.000000
Enter the net value of noncharit	able-use assets for 2019 from	Part X, line 5				_	4	691,634.
Multiply line 4 by line 3							5	0.
Enter 1% of net investment inco	ome (1% of Part I, line 27b)					-	6	0.
Add lines 5 and 6							7	0.
3 Enter qualifying distributions fr							8	31,500.
If line 8 is equal to or greater the See the Part VI instructions.	an line 7, check the box in Pa	rt VI, line 1b, and comp	olete that part usin	g a 1%	tax rate.			

Form		840180	Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	ee instructi	ons)
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)		
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		0.
_	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)		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.
	Add lines 1 and 2		0.
	A series of the		0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		0.
	Credits/Payments:		
	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0 •		
	25 to distributed tax paymonic and 25 to 500 paymonic distributed tax		
	Exempt foldigit of garrizations tax withhold at oddros		
	Tax paid with application of extension of anio to the (1 still ecos)		
	Butter minimizers of the state		0.
	Total credits and payments. Add lines 6a through 6d	•	0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11 Int VII-A Statements Regarding Activities		
			es No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		X
	any political campaign?	1a	$\frac{1}{x}$
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the 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 published or	i l	
	distributed by the foundation in connection with the activities.	 	
	Did the foundation file Form 1120-POL for this year?	1c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ 0.		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
	managers. ► \$0.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
	If "Yes," attach a detailed description of the activities.		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_ 4a	Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A 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:		
	● By language in the governing instrument, or		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		
	remain in the governing instrument?		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 2	X
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 (or designate)		
	of each state as required by General Instruction G? If "No," attach explanation	8b 2	X
	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	X !
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT		X
		Form 990-	PF (2019)

	990-PF (2019) ALNABHAN FAMILY FOUNDATION	82-484018	0_	Page 5
Pa	rt VII-A 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	1	Щ	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory pri	vileges?		
	If "Yes," attach statement. See instructions		<u>. </u>	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1:	X	
	Website address ► N/A	-		
14	The books are in care of ▶ PECK & ASSOCIATES, P.C. Telephone no. ▶	- 405-364-	3040	
	Located at ▶ 401 W. MAIN ST., STE. 400, NORMAN, OK	ZIP+4 ▶7306	9	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	-
	and enter the amount of tax-exempt interest received or accrued during the year	15 📗	N/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?		;	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):		ł	1 1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?	X No		
		X No		
		X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
		X No		
	(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	ļ		1 1
		X No	}	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	, (22) 110	1	
•	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A 1b		
	Organizations relying on a current notice regarding disaster assistance, check here	▶	+-	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			,
·	before the first day of the tax year beginning in 2019?	10	 	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
2		ĺ		1 1
_	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	X No	1	1 1
		IA NO		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	NT / 2	+	
	statement - see instructions.)	N/A 2b	-├	<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u> </u>			
Зa	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 disp	oose		
	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,	,,, <u> </u>	+	
	Schedule C, to determine if the foundation had excess business holdings in 2019.)	N/A 3b	+	<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u>4a</u>		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t	nat	4—	
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4h	I	X

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Form 990-PF (2019) ALNABHAN FAMILY FOUNDATI	ON		<u>82-48401</u>	80	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955), of		ectly,	ŀ	1	
any voter registration drive?	•	Y€	s X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	☐ Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions		☐ Y€	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational nurnoses or fo				
the prevention of cruelty to children or animals?	, or concational purposes, or to	√	s X No		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	ider the exceptions described i	· · · · · · · · · · · · · · · · · · ·	.9 (==) 100		
		ii negulations	N/A	5b	+-
section 53.4945 or in a current notice regarding disaster assistance? See instr				-	\vdash
Organizations relying on a current notice regarding disaster assistance, check		nod		ļ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to			s No		
expenditure responsibility for the grant?	1/	/A Ye	IS NU		1 1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		.		
a personal benefit contract?		Ye	s X No		┼╤┤
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6ь	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	s X No		igwdapprox
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	Ь—
8 Is the foundation subject to the section 4960 tax on payment(s) of more than S	\$1,000,000 in remuneration or				
excess parachute payment(s) during the year?			s X No		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors	 				
1 List all officers, directors, trustees, and foundation managers and t	Y	(-) Companyation	(d) Contributions to	(-) Es	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex account	pense t, other
· ·	to position	enter -0-)	compensation	allowa	
NABHAN ALNABHAN	DIRECTOR				
14808 KURDSON WAY					
EDMOND, OK 73013	10.00	0.	0.		0.
		i			
		i			
	1				
]				
			_		-
	1				
	1				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, e	enter "NONE."			
	(b) Title and average		(d) Contributions to employee benefit plans and deterred compensation	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred compensation	account allowa	i, other inces
NONE					
NONE	1				
				,	
	1				
	-				
	1				
	-				
	4				
	<u> </u>				
	1				
	I	<u> </u>			
Total number of other employees paid over \$50,000			<u> </u>	000 5	0
			Form	990-PF	(2019)

Form **990-PF** (2019)

Rantix Minimum Investment Return (All domestic foundations must of	complete this part. Foreign foundations, see	nstructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	., purposes.	
a Average monthly fair market value of securities	1a	675,527.
b Average of monthly cash balances	1b	675,527. 26,639.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	702,166.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1e (attach detailed explanation) 1e	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	702,166.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see ii	nstructions) 4	10,532.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part	V, line 4 5	691,634.
6 Minimum investment return Enter 5% of line 5	6	34,582.
PartiXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(foreign organizations, check here ▶ and do not complete this part.)	5) private operating foundations and certain	, , , , , , , , , , , , , , , , , , , ,
Munimum investment return from Part X, line 6	1	34,582.
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.)		
c Add lines 2a and 2b		0.
Distributable amount before adjustments. Subtract line 2c from line 1	3	34,582.
Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	34,582.
Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, li	ine 1 7	34,582
Part:XIII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part 1, column (d), line 26	_ <u>1a</u>	31,500.
b Program-related investments - total from Part IX-B	_1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc	c., purposes 2	
Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	_3b	
Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part	t XIII, line 4	31,500.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	t	
income. Enter 1% of Part I, line 27b	_ 5	0.
Adjusted qualifying distributions. Subtract line 5 from line 4	_ 6 _	31,500.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating whether the foundation qualifies for the	section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (s	see instructions)			
	(a)	(b)	(c)	(d)
•	Corpus	Years prior to 2018	2018	2019
1 Distributable amount for 2019 from Part XI,				
line 7	· · · · · · · · · · · · · · · · · · ·			/ 34,582.
2 Undistributed income, if any, as of the end of 2019			22.266/	
a Enter amount for 2018 only		<u></u>	22,366	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:			/	
a From 2014				
b From 2015				
c From 2016				
d From 2017	1			
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from		• • •		
Part XII, line 4: ►\$ 31,500.			/	
a Applied to 2018, but not more than line 2a			22,366.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		ø'.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	/		
d Applied to 2019 distributable amount				9,134.
e Remaining amount distributed out of corpus	0.	/	<u>.</u>	
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount				•
must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below.	_			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	/		
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	/ /			
amount - see instructions		0.		
e Undistributed income for 2018 Subtract line	/ /			
4a from line 2a. Taxable amount - see instr.	L	<u></u>	0.	
f Undistributed income for 2019. Subtract	/			
lines 4d and 5 from line 1. This amount must	/			25,448.
be distributed in 2020	-/			23,440.
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)	0.			
8 Excess distributions carryover from 2014	/			· · · · · · · · · · · · · · · · · · ·
not applied on line 5 or line 7	/ o.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.		·		
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				
923581 12-17-19				Form 990-PF (2019)

Form 990-PF (2019) ALNABHAI Part XIV Private Operating Fo	N FAMILY FO		I.A. question Q)	N/A	340180 Page 10
	<u>`</u>		-A, question 9)	N/A	
1 a If the foundation has received a ruling or foundation, and the ruling is effective for					
b Check box to indicate whether the foundation			in certion	4942(j)(3) or4	942())(5)
	Tax year	IIg Iogiloation described i	Prior 3 years] 4342(])(0) 01 <u> </u>	T
2 a Enter the lesser of the adjusted net income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for	(4) 20 10	(4) = 4 1 1	(-,		
	1				1
each year listed				 	- 1
b 85% of line 2a c Qualifying distributions from Part XII,		 			************
, , , , , , , , , , , , , , , , , , , ,					
Ine 4, for each year listed d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					-
e Qualifying distributions made directly					
for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		 	 	-	
alternative test relied upon:					
a "Assets" alternative test - enter:	1				(
(1) Value of all assets	<u>.</u> \	 	+	-	+
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter		 	· · · - · ·		
2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed	···	 	 		
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	*	 	 	-	
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)	. · -	 			· · · · · · · · · · · · · · · · · · ·
(3) Largest amount of support from					
an exempt organization			 	<u> </u>	
(4) Gross investment income Part XV Supplementary Infor	mation (Comple	te this part only i	f the foundation	had \$5.000 or mo	re in assets
at any time during th			r tho roundation		
					
 Information Regarding Foundation a List any managers of the foundation who 		than 20% of the total cents	ributions received by the	foundation before the clos	e of any tay
year (but only if they have contributed m			ributions received by the	Tournation bolore the clos	o or any tax
ONE	, , ,	(// / /			
b List any managers of the foundation who	own 10% or more of th	e stock of a cornoration (or an equally large portu	on of the ownership of a na	artnership or
other entity) of which the foundation has			or an equally large portion	on the difficient of a pe	artiforomp of
IONE	·				
2 Information Regarding Contribution	on Grant Gift Loan	Scholarship, etc., Pr	ograms:		
Check here ► X If the foundation or				not accept unsolicited requ	ests for funds If
the foundation makes gifts, grants, etc., t					
a The name, address, and telephone numb					
a The hame, address, and telephone heme	or or ornan address or a	ролоон то нитом ерриг			
b The form in which applications should be	submitted and informa	ition and materials they st	nould include:		
c Any submission deadlines:		 	<u> </u>		
			 		
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Part AV Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	Ψ	******
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	Tecipient		
a Paid during the year				
OKLAHOMA HEART HOSPITAL FOUNDATION	NONE	PUBLIC CHARITY	SUPPORT OF MEDICAL	
4200 W MEMORIAL STE, 510			FOUNDATION	
OKLAHOMA CITY, OK 73120			·	5,000.
			1	
ISLAMIC SOCIETY OF GREATER OKLAHOMA	NONE	PUBLIC CHARITY	SUPPORT OF RELIGIOUS ORGANIZATION	
3815 N ST CLAIR AVENUE				
OKLAHOMA CITY, OK 73111				26,500.
		İ		
	-	 		
Total			► 3a	31,500.
b Approved for future payment				
NONE				
NONE				
			-	
*				
		<u>L</u>		
Total			▶ 3b	0.

Part XVI-A	Analysis of Income-Producing	Activities
------------	------------------------------	-------------------

	Unrelate	d business income	Excl	ided by section 512, 513, or 514	4.3
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	- (e) Related or exempt function income
1 Program service revenue:	code		Code	7 0	1
a			 		
b		*	1		
d			1	~	
	 		-		
e			 -		
	1		 		
g Fees and contracts from government agencies2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash	-				
investments					
4 Dividends and interest from securities		· . · · · ·			
5 Net rental income or (loss) from real estate:					
a Debt-financed property				<u></u>	
b Not debt-financed property					
6 Net rental income or (loss) from personal			<u> </u>		
property	1				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:				-	
a					
b					
С					
d					
e				^	
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
		0.		13	0.
12 Subtotal. Add columns (b), (d), and (e)		0.			0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	the Accor		empt	13	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to		nplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incor	me is reported in	mplishment of Exe		13 Purposes	0.

923621 12-17-19

	HAN FAMILY FO				Page 13
Part XVIII Information Re Exempt Organ		to and Transactions and	d Relationships With None	charitable	
Did the organization directly or indicated (other than section 501(c)(3) organian a Transfers from the reporting found (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to a noncharitated (2) Purchases of assets from a noil (3) Rental of facilities, equipment, (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or medicated assets from a noil (5) Loans or loan guarantees (6) Performance of services or medicated assets from a noil (5) Loans or loan guarantees (6) Performance of services or medicated assets from a noil (6) Performance of services or medicated from the services or medicated	rectly engage in any of the fo nizations) or in section 527, re ation to a noncharitable exem ble exempt organization nicharitable exempt organization or other assets imbership or fundraising solic illing lists, other assets, or pa "Yes," complete the following	elating to political organizations? pt organization of: on elations id employees schedule. Column (b) should alwa	described in section 501(c) ays show the fair market value of the g		X X X X X X X X X
column (d) the value of the goods, (a) Line no (b) Amount involved	other assets, or services rece		(d) Description of transfers, transaction		ents
	N/	A			
2a Is the foundation directly or indirect in section 501(c) (other than section b) If "Yes," complete the following schill (a) Name of org	n 501(c)(3)) or in section 527 edule.		tions described (c) Description of re		X No
N/A		1-1 22	3.77		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign 9-22-2020 DIRECTOR Here Signature of officer or trustee

May the IRS discuss this return with the preparer shown below? See instr X Yes

Title Date PTIN Print/Type preparer's name Preparer's signature Check [ıf 9/18/20 self- employed P00697549 FRANK R. PECK Preparer ASSOCIATES P.C. Firm's EIN ► 42-1532523 Firm's name ▶ PECK & **Use Only** Firm's address ▶ 401 W. MAIN, SUITE 400 OK 73069 NORMAN, 405 364-3040 Phone no

Form **990-PF** (2019)

Paid

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

	ALNABHAN FAMILY FOUNDATION	82-4840180
Organization type (check	cone)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions
General Rule		
•	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota ny one contributor Complete Parts I and II See instructions for determining a contribut	
Special Rules		
sections 509(a)(1 any one contribu	ion described in section 501(c)(3) filing Form 990 or 990·EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990·EZ), Part II, line 13, 16 stor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the an EZ, line 1 Complete Parts I and II	a, or 16b, and that received from
year, total contri	non described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or equelty to children or animals Complete Parts I, II, and III	
year, contribution is checked, ente purpose Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled refer the total contributions that were received during the year for an exclusively religions omplete any of the parts unless the General Rule applies to this organization because ble, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box ous, charitable, etc ,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule E on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on it t the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

Employer identification number

ALNABHAN	FAMILY	FOUNDATION

82-4840180

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NABHAN ALNABHAN 14808 KURDSON WAY EDMOND, OK 73013	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Poncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

ALNABHAN FAMILY FOUNDATION

82-4840180

Part II	Noncash Property (see instructions) Use duplicate copies of Part	Il if additional space is needed	4040100
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of organization Employer identification number 82-4840180 ALNABHAN FAMILY FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) > \$_ Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held _ (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

82-4840180

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 1
NAME OF CONTRIBUTOR	ADDRESS	
NABHAN ALNABHAN	14808 KURDSON WAY	