# Form **990-PF**Department of the Treasury

### **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.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No. 1545-0052 **2015**Open to Public Inspection

For calendar year 2015 or tax year beginning , and ending A Employer identification number Name of foundation H.A. AND MARY K. CHAPMAN CHARITABLE TRUST 73-6177739 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 6100 S. YALE AVE., SUITE 1816 918-496-7882 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here TULSA, OK 74136 **D** 1. Foreign organizations, check here G Check all that apply: Initial return Initial return of a former public charity Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Accrual Cash F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ...▶ 83, 183, 512. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received ..... Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 435,959. 435,959. STATEMENT 2,490,455. 2,490,455. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 64,998. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ...... 27,754,500. 7 Capital gain net income (from Part IV, line 2) 64,998. 8 Net short-term capital gain Income modifications ... 10a Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) -19,472.4,303. STATEMENT 3 11 Other income 2,995,715. 2,971,940. Total. Add lines 1 through 11. 73,512. 367,562. 294,050. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ..... 109,874. 21,976. 87,898. 15 Pension plans, employee benefits Expenses 16a Legal fees 22,790. b Accounting fees STMT 4 6,837. 15,953. 76,390. 67,444. 8,946. c Other professional fees STMT 5 34,622. 34,622. 0. 17 Interest ..... 126,832. 6,055. Taxes STMT 6 182. 18 10,895. Depreciation and depletion 10,895. 65,179. 6,518. 58,661. 20 Occupancy 21 Travel, conferences, and meetings 16,963. 0. 16,963. 22 Printing and publications ...... 23 Other expenses STMT 7 46,793. 9,588. 35,820. 24 Total operating and administrative 877,900 237,447. 518,473. expenses. Add lines 13 through 23 4,455,500. 4,455,500. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 5,333,400 237,447. 4,973,973. Add lines 24 and 25 27 Subtract line 26 from line 12: -2,361,460**8** Excess of revenue over expenses and disbursements 2,758,268. **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-).

		B - L OL Attached schedules and amounts in the description	Beginning of year	End of	vear
Р	<u>art</u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	7,888.	5,000.	5,000.
	2	Savings and temporary cash investments	649,050.	2,663,355.	2,663,355.
	3	Accounts receivable ► 66,645.			
		Less: allowance for doubtful accounts ▶	1,150,772.	66,645.	66,645.
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
şţ		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	5 055 400		5 600 006
٩		Investments - U.S. and state government obligations STMT 9		5,376,293.	
	b	Investments - corporate stock STMT 10	5,671,241.	5,671,242.	
		Investments - corporate bonds STMT 11	4,868,835.	4,041,734.	4,504,533.
	11	Investments - land, buildings, and equipment: basis			
	۱.,	Less: accumulated depreciation			
	12	Investments - mortgage loans	15,254,683.	14,791,938.	14,736,996.
	13	Investments - other STMT 12	15,254,005.	14,/31,330.	14,730,990.
	14	Land, buildings, and equipment: basis ► 13, 225.			
	15	Less: accumulated depreciation 13,225.			
		Other assets (describe ►)  Total assets (to be completed by all filers - see the			
	'0	instructions. Also, see page 1, item I)	32,677,667.	32,616,207.	83,183,512.
_	17	Accounts payable and accrued expenses	32707770070	32,010,20,1	03/103/3121
		Grants payable			
ģ		Deferred revenue			
Liabilities	l	Loans from officers, directors, trustees, and other disqualified persons			
abi		Mortgages and other notes payable	1,000,000.	3,300,000.	
⋍		Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	1,000,000.	3,300,000.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
nce	24	Unrestricted			
alaı		Temporarily restricted			
d B	26	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here ➤ X			
ᅙ		and complete lines 27 through 31.	31 400 270	21 400 270	
ets	27	Capital stock, trust principal, or current funds	31,499,270.	31,499,270.	
\ss	۱	Paid-in or capital surplus, or land, bldg., and equipment fund	178,397.	-2,183,063.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	31,677,667.	29,316,207.	
Ž	30	Total net assets or fund balances	31,011,001.	27,310,207	
	31	Total liabilities and net assets/fund balances	32,677,667.	32,616,207.	
_	, v ,	Total magnitude und not according bullunces	= , - : , , , -	3=,0=0,=0,0	

### Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	31,677,667.
2	Enter amount from Part I, line 27a	2	-2,361,460.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	29,316,207.
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 30	6	29,316,207.

H.A. AND MARY K. CHAPMAN 73-6177739 Form 990-PF (2015) CHARITABLE TRUST Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (d) Date sold (mo., day, yr.) (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) 12 PUBLICLY TRADED SECURITIES  $\overline{P}$ b PRESCOTT GRP AGGESSIVE SMALL CAP II, c PRESCOTT GRP AGGESSIVE MID CAP II, d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 27,754,500 27,698,676. 55,824. 602. b 8,572 C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (i), if any 55,824. 602. b 8,572. C d е ∫ If gain, also enter in Part I, line 7 64,998. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 N/A Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) (d)
Distribution ratio
(col. (b) divided by col. (c)) Adjusted qualifying distributions Net value of noncharitable-use assets 4,355,046. 93,755,560. .046451 2014 4,406,557. 87,653,796. .050272 2013 4,445,594. 89,630,764. .049599 2012 4,157,629. 91,491,447. .045443 2011 83,707,142. 3,761,854. .044941 2010 2 Total of line 1, column (d) 2 .236706 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years .047341 3 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 85,506,538. 4 4,047,965. 5 Multiply line 4 by line 3 27,583. Enter 1% of net investment income (1% of Part I, line 27b) 6 4,075,548. 7

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

4,973,973.

8

	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b)	). 4940(e). or 4	1948 -	see in	stri		ns)
	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line			230 111			,
ıα	Date of ruling or determination letter: (attach copy of letter if necessary-see instr						
h	<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <b>X</b> and enter	r 1%	1		2	7,5	83.
	of Part I, line 27b					.,.	
С	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-)		2				0.
	Add lines 1 and 2		3		2	7,5	83.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
			5		2	7,5	83.
	Credits/Payments:						
а	a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a	84,000.					
	<b>b</b> Exempt foreign organizations - tax withheld at source 6b	-					
	c Tax paid with application for extension of time to file (Form 8868)		1				
	d Backup withholding erroneously withheld 6d		1				
	Total credits and payments. Add lines 6a through 6d		7		8	4,0	00.
			8				
			9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		5	6,4	<del>17.</del>
		7 • Refunded ►	11				0.
Pa	art VII-A Statements Regarding Activities						
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it par	rticipate or intervene	e in			Yes	No
	any political campaign?				1a		X
b	<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruction	ons for the definitior	ı)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	materials publish	ed or				
	distributed by the foundation in connection with the activities.						
C	c Did the foundation file Form 1120-POL for this year?				1c		X
	<b>d</b> 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.					
е	e 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, article	es of incorporation, (	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	<b>a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		N/	/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:						
	<ul> <li>By language in the governing instrument, or</li> </ul>						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that of	conflict with the state	e law				
	remain in the governing instrument?				6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, co	ol. (c), and Part X\	<b>/</b>		7	Х	
8a	<b>Ba</b> Enter the states to which the foundation reports or with which it is registered (see instructions)						
	OK						
b	${f b}$ If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (o	- ,					
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9		, . ,					
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part X				9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	s and addresses			10		X

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)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address  HTTP://WWW.CHAPMANTRUSTS.ORG/			
14	The books are in care of ▶ DONNE PITMAN  Telephone no. ▶918-49	6-7	882	
	Located at ▶ 6100 SOUTH YALE, SUITE 1816, TULSA, OK ZIP+4 ▶74	136		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - Check here		<b></b>	. 🗆
	and enter the amount of tax-exempt interest received or accrued during the year     15		/A	
16	At any time during calendar year 2015, 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?	16		Х
	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):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)? $oxed{oxed}$ Yes $oxed{f X}$ 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			
	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		X
	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 2015?	1c		Х
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015? Yes X No			
	If "Yes," list the years \( \bigs_{\text{\tint{\text{\tint{\text{\ti}\text{\texi{\text{\text{\text{\texi}\texit{\text{\text{\text{\text{\text{\text{\text{\text{\text{\te			
b				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	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.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				
	during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.)  N/A	3b		v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	AL.		Х
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		_A

Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,		
any voter registration drive?		Ye	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for		
the prevention of cruelty to children or animals?		Ye	es X No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	ler the exceptions described i	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere		▶Ш	
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined		
expenditure responsibility for the grant?		I/A Y	es L No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5 <i>(d).</i>			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Ye	es 🔼 No	
$\boldsymbol{b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a $\boldsymbol{p}$	ersonal benefit contract?			6b 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 s	helter transaction?	Ye	es 🔼 No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	У	
List all officers, directors, trustees, foundation managers and their	compensation.			
. List all officers, all octors, il actors, roundation managers and then		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	<b>(b)</b> Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
J. JERRY DICKMAN	MANAGER & CO-		compensation	anowarroos
6100 S. YALE, STE 1816				
TULSA, OK 74136	15.00	182,257.	0.	0.
-	MANAGER & CO-			
6100 S. YALE, STE 1816				
TULSA, OK 74136	15.00	185,305.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
()	devoted to position	(C) compondation	and deferred compensation	allowances
NONE				
Table I number of other employees poid over #FO 000		<u> </u>		0
Total number of other employees paid over \$50,000				U

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A - THE H.A. & MARY K. CHAPMAN CHARITABLE TRUST IS A NON-OPERATING PRIVATE FOUNDATION WHICH MAKES GIFTS TO CHARITABLE ORGANIZATIONS. THE FOUNDATION DOES NOT OPERATE	0.
2 ANY FACILITY OR INSTITUTION UNDERTAKING A CHARITABLE,	
EDUCATIONAL, OR RELIGIOUS ENDEAVOR.	
3	
4	
Part IX-B   Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
	_
All other program-related investments. See instructions.  3	
Total. Add lines 1 through 3	<u> </u>

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

4940(e) reduction of tax in those years.

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

73-6177739 Form 990-PF (2015) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 86,613,605. 1a 195,063. **b** Average of monthly cash balances 1b c Fair market value of all other assets 1c 86,808,668. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. Acquisition indebtedness applicable to line 1 assets 2 86,808,668. Subtract line 2 from line 1d 3 3 1,302,130. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 85,506,538. 5 4,275,327. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 

and do not complete this part.) 4,275,327. Minimum investment return from Part X, line 6 Tax on investment income for 2015 from Part VI, line 5 27,583. 2a Income tax for 2015. (This does not include the tax from Part VI.) 2b 27,583 Add lines 2a and 2b 2c C Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 4,247,744 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 4,973,973. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes \_\_\_\_\_ 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 4,973,973. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

Form **990-PF** (2015)

4,946,390.

5

27,583.

Part XIII Undistributed Income (see instructions)

Form 990-PF (2015)

	<b>(a)</b> Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1 Distributable amount for 2015 from Part XI, line 7				4,247,744.
2 Undistributed income, if any, as of the end of 2015:				
a Enter amount for 2014 only			4,554,728.	
<b>b</b> Total for prior years:				
Excess distributions carryover, if any, to 2015:		0.		
1				
<b>a</b> From 2010 <b>b</b> From 2011				
c From 2012				
<b>d</b> From 2013				
<b>e</b> From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: $\triangleright$ \$ 4,973,973.				
<b>a</b> Applied to 2014, but not more than line 2a			4,554,728.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus				
(Election required - see instructions)	0.			440.045
<b>d</b> Applied to 2015 distributable amount	0			419,245.
e Remaining amount distributed out of corpus	0.			0
Excess distributions carryover applied to 2015 (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>b</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		0.		
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				3,828,499.
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 2010	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.	0.			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9: a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				

CHARITABLE TRUST

Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2015, enter the date of t	the ruling	▶		
<b>b</b> Check box to indicate whether the foun				4942(j)(3) or 49	042(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	,,,,	
income from Part I or the minimum	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
•					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</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					
(4) Gross investment income					
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5.000 or mo	ore in assets
at any time during					
1 Information Regarding Foundation		· · · · · · · · · · · · · · · · · · ·			
a List any managers of the foundation wh	•	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed i			indutions received by the	Touridation botoro tito oto	oo or any tax
NONE					
<b>b</b> List any managers of the foundation where	own 10% or more of th	e stock of a cornoration (	or an equally large portion	on of the ownership of a n	artnershin or
other entity) of which the foundation ha			or an oquany largo porti	on or the evineramp of a pr	artiforomp of
NONE					
2 Information Regarding Contribut	tion Cront Cift Loon	Scholarchin etc. Dr	ogramai		
		• • • •	-	not accept unsolicited requ	acte for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	<u>, , , , , , , , , , , , , , , , , , , </u>				
a The name, address, and telephone hun	ibei oi e-iliali audiess oi t	ile person to whom appir	calions should be addres	55tu.	
SEE STATEMENT 13					
<b>b</b> The form in which applications should	he cultmitted and informs	tion and materials thou sh	ould include:		
u the form in which applications should	טע טעטוווונטט מווט ווווטוווווט טיל	uon anu maitindis inty Si	iouiu iiioiuut.		
• Any submission deadliness					
c Any submission deadlines:					
d American and the Marketines	la avala aa huussa suusi 12	al avena abasitutut firiti	hinda of institutions	ath au fa atauar	
<b>d</b> Any restrictions or limitations on award	s, such as by geographica	ai areas, charitable fields,	KIIIUS OI INSTITUTIONS, OF	outer factors:	

523601 11-24-15 Form **990-PF** (2015)

Form 990-PF (2015) CHARITABLE TRUST

Part XV | Supplementary Information (continued)

Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	3511112411011	
a Paid during the year				
SEE ATTACHED STATEMENT	NONE	₽C	SEE ATTACHED	4,455,500.
				2,222,223
Total			▶ 3a	4,455,500.
<b>b</b> Approved for future payment				
SEE ATTACHED STATEMENT	NONE	PC	SEE ATTACHED	
				3,645,000.
Total			> 3b	3,645,000.

Form 990-PF (2015)

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

Enter gross amounts unless otherwise indicated.	Unrelated business income			ed by section 512, 513, or 514	(e)		
·	(a) Business	( <b>b)</b> Amount	(C) Exclu- sion	(d)	Related or exempt		
1 Program service revenue:	code	AIIIOUIII	code	Amount	function income		
a							
b							
c							
d							
e							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			14	435,959.			
4 Dividends and interest from securities			14	435,959.			
5 Net rental income or (loss) from real estate:				, ,			
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal			<b>-</b>				
. , .							
property	900000	-23,775.	18	4,303.			
7 Other investment income	900000	-23,773.	10	4,303.			
8 Gain or (loss) from sales of assets other			1 0	64 000			
than inventory			18	64,998.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
1 Other revenue:							
a							
b							
c							
d							
e							
2 Subtotal. Add columns (b), (d), and (e)					0.		
				13	2,971,940.		
See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities t	o the Accon	nplishment of Ex	empt	Purposes			
					. U. b		
			contribu	ited importantly to the accomp	disnment of		
· · · · · · · · · · · · · · · · · · ·	by providing fullu	s ioi sucii pui poses).					
NOT APPLICABLE							
	and (e) 13 2,971,9 verify calculations.)  of Activities to the Accomplishment of Exempt Purposes activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of purposes (other than by providing funds for such purposes).						
		the Accomplishment of Exempt Purposes is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of					

Part	XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	ships With No	ncharitabl	е	<u> </u>
<b>1</b> Di	d the or	<u> </u>		of the followin	g with any other organizat	tion described in sec	tion 501(c) of		Yes	No
					?7, relating to political orga		( )			
<b>a</b> Tr	ansfers	from the reporting found	ation to a noncharita	ble exempt or	ganization of:					
(1	) Cash							1a(1)		Х
(2	<b>)</b> Other	assets						1a(2)		Х
<b>b</b> Ot	her tran	sactions:								
(1	) Sales	of assets to a noncharita	ble exempt organizat	tion				1b(1)		X
(2	) Purch	nases of assets from a no	ncharitable exempt o	organization				1b(2)		X
(3	) Renta	ıl of facilities, equipment,	or other assets					1b(3)		X
(4	) Reimi	bursement arrangements						1b(4)		X
(5	) Loans	s or loan guarantees						1b(5)		X
					ns					X
					ployees dule. Column <b>(b)</b> should a				L	
or	service	-	oundation. If the four	ndation receiv	ed less than fair market va				5015,	
(a)Line	<u>`</u>	(b) Amount involved			e exempt organization	(d) Description	on of transfers, transaction	ons, and sharing a	rangeme	ents
		<u> </u>		N/A						
	_									
	_									
	_									
in	section	501(c) of the Code (other	r than section 501(c)		or more tax-exempt organion 527?			Yes	X	☐ No
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	elationship		
		N/A				1				
						-				
						+				
Sign Here	and be	penalties of perjury, I declare blief, it is true, correct, and cor	that I have examined thi nplete. Declaration of pr	s return, includir eparer (other tha	g accompanying schedules an n taxpayer) is based on all info	nd statements, and to the rmation of which prepare MANAG	e best of my knowledge er has any knowledge ER/CO - TRU	May the IRS return with the shown below X Yes	ne prepar / (see ins	er
	Sign	nature of officer or trustee			Date	Title				•0
	1 -	Print/Type preparer's na		Preparer's s	ignature	Date	Check if	PTIN		
							self- employed			
Paid					RICK MILLIG	05/12/16		P00435		
Prep		Firm's name ► HOG					Firm's EIN ► 7	3-14139	77	
Use	Only									
					, SUITE 200					
		TU	LSA, OK 7	4114-7	002		Phone no. (9	18) 745		
								Form <b>99</b>	0-PF	(2015)

FORM 990-PF INTER	EST ON SAVIN	IGS ANI	TEMPOR	ARY (	CASH	INVE	STMENTS	SI	TATEMENT	1
SOURCE  INTEREST INCOME  TOTAL TO PART I, LINE 3						INVE	(B) NVESTMENT NCOME		(C) ADJUSTED NET INCOME	
			435,9	59.		43	5,959.			
			435,9	59.			435,959.			
FORM 990-PF	DIVIDENDS	AND 1	NTEREST	' FRON	4 SEC	URIT	IES	S7	TATEMENT	2
SOURCE	GROSS AMOUNT	G <i>I</i>	PITAL AINS IDENDS	REV	(A) /ENUE BOOK		(B) ET INVES ENT INCC		(C) ADJUSTI NET INCO	
DIVIDEND INCOME	2,490,455.		0.	2,49	0,45	 5.	2,490,45	55.		
TO PART I, LINE 4	2,490,455.		0.	2,49	0,45	 5. =	2,490,45	55.		
FORM 990-PF		ОТЪ	HER INCO	)ME				SI	PATEMENT	3
DESCRIPTION				(A) VENUE BOOF			(B) INVEST- T INCOME		(C) ADJUSTEI NET INCOM	
FLOW THROUGH FROM I AGGRESSIVE SMALL CO OTHER INCOME					,775. ,303.		0 4,303	 ).		
TOTAL TO FORM 990-1	PF, PART I,	LINE 1	INE 11 -19,47		472.	2. 4,303		 		
FORM 990-PF		ACCO	OUNTING	FEES				SI	TATEMENT	4
DESCRIPTION		(A) EXPENS PER BO	SES NE	(B) VI IN: NT IN:	/EST-		(C) ADJUSTED ET INCOM		(D) CHARITAI PURPOSI	
ACCOUNTING FEES		22,	790.		5,837	•			15,95	53.
TO FORM 990-PF, PG 1, LN 16B			790.		5,837	•			15,95	 53.

(A) (FEXPENSES NET IN DESCRIPTION PER BOOKS MENT IN	WEST- ADJUSTED CHARITABLE
PROFESSIONAL FEES 11,183. ADVISORY FEES 65,207.	2,237. 8,946. 55,207.
TO FORM 990-PF, PG 1, LN 16C 76,390.	8,946.
FORM 990-PF TAXES	STATEMENT 6
(A) (EXPENSES NET IN PER BOOKS MENT IN	WEST- ADJUSTED CHARITABLE
REAL ESTATE TAXES 4,563. FOREIGN TAXES PAID 1,674. ESTIMATED TAX PAYMENTS &	4,381. 1,674. 182. 0.
WITHHOLDINGS 120,595.	0. 0.
TO FORM 990-PF, PG 1, LN 18 126,832.	6,055.
FORM 990-PF OTHER EXPENSES	S STATEMENT 7
(A) (EXPENSES NET INDESCRIPTION PER BOOKS MENT IN	WEST- ADJUSTED CHARITABLE
DUES, MEMBERSHIPS, SUBSCRIPTIONS 1,618. INSURANCE AND BONDS 6,684. OFFICE SUPPLIES 2,363. POSTAGE & COURIER SERVICE 554. PLANT RENTAL 902. COMPUTER EXPENSES 22,039. EDUCATION AND TRAINING 769. REPAIRS & MAINTENANCE 1,306. TELEPHONE AND CABLE EXPENSES 6,766. FOOD & ENTERTAINMENT 1,680. OTHER EXPENSES 2,112.	324.       1,294.         2,005.       4,679.         473.       1,890.         111.       443.         180.       722.         4,408.       17,631.         77.       692.         261.       1,045.         1,353.       5,413.         84.       756.         312.       1,255.

FOOTNOTES

STATEMENT 8

FORM 990-PF U.S. AND STATE/O	CITY GOVE	ERNMENT	OBLIGATIONS	STATEMENT	9
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	ַר
BOK BOND FUND - SEE ATTACHED	X		5,376,293.	5,633,23	36.
TOTAL U.S. GOVERNMENT OBLIGATIONS		_	5,376,293.	5,633,23	36.
TOTAL STATE AND MUNICIPAL GOVERNMEN	NT OBLIG	ATIONS			
TOTAL TO FORM 990-PF, PART II, LINE	E 10A	=	5,376,293.	5,633,23	36.
FORM 990-PF COF	RPORATE S	ETOCK		STATEMENT	10
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	ŗ
EQUITIES - SEE ATTACHED LISTING		_	5,671,242.	55,573,74	<u>1</u> 7.
TOTAL TO FORM 990-PF, PART II, LINE	∃ 10B	=	5,671,242.	55,573,74	ŀ7.
FORM 990-PF COF	RPORATE E	30NDS		STATEMENT	11
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	ŗ
BOK BOND FUND - SEE ATTACHED GENERAL MOTORS CORP 7.2% DUE 1/15/2	2011	-	3,840,346. 201,388.	4,504,53	33.
TOTAL TO FORM 990-PF, PART II, LINE	3 10C	=	4,041,734.	4,504,53	33.
FORM 990-PF OTHE	ER INVEST	 FMENTS		STATEMENT	12
DESCRIPTION	VALUA METI		BOOK VALUE	FAIR MARKET VALUE	[
EQUITATES SEE AMBACHED LISMING			13,360,074.	13,305,13	 32.
EQUITIES - SEE ATTACHED LISTING BOK SHORT-TERM CASH FUND	COS		1,431,864.	1,431,86	

n.A. AND MARI K. CHAPMAN CHARITABLE IRUS

FORM 990-PF

## GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

J. JERRY DICKMAN OR DONNE PITMAN ONE WARREN PLACE, 6100 SOUTH YALE AVE, SUITE 1816 TULSA, OK 74136

TELEPHONE NUMBER

918-496-7882

### FORM AND CONTENT OF APPLICATIONS

THE ORGANIZATION MAKES GRANTS ONLY TO CHARITABLE ORGANIZATIONS QUALIFIED AS TAX-EXEMPT UNDER I.R.C. SECTION 501(C)(3). A TWO-STEP GRANT PROCESS IS FOLLOWED. FIRST, A LETTER OF INQUIRY IS SUBMITTED BY THE APPLICANT. IF APPROVED, THE APPLICANT WILL BE INVITED TO SUBMIT A WRITTEN GRANT PROPOSAL. THE COMPLETE APPLICATION PROCESS IS PROVIDED ON THE ORGANIZATION'S WEBSITE AT: http://www.chapmantrusts.org.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Form	990-T	E	Exempt Organization Bus	sine	ss Income Ta	ax Return	)	OMB No. 1545-0687
			(and proxy tax und	ler se	ction 6033(e))			0045
		For ca	lendar year 2015 or other tax year beginning		, and ending		_ ·	2015
Departm	ent of the Treasury		► Information about Form 990-T and its instru		•		F	Open to Public Inspection for
	Revenue Service		Do not enter SSN numbers on this form as it may			tion is a 501(c)(3).		Open to Public Inspection for 501(c)(3) Organizations Only oyer identification number
A	Check box if address changed		Name of organization (		and see instructions.)		(Empl	loyees' trust, see
D Fue		D=!=4	CHARITABLE TRUST	IAM				3-6177739
	mpt under section 501( <b>c</b> )( <b>3</b> )	Print or	Number, street, and room or suite no. If a P.O. bo	!	-tti			ated business activity codes
=	408(e) 220(e)	Туре	6100 S. YALE AVE., SUI					nstructions.)
=	408A 530(a)		City or town, state or province, country, and ZIP of					
=	529(a)		TULSA, OK 74136	ii iureigi	i postai code		900	000
		F Grou	o exemption number (See instructions.)	<u> </u>			700	
3 2 .	value of all assets d of year 616,207.		corganization type 501(c) corporatio	n D	<b>K</b> 501(c) trust	401(a) trust		Other trust
H Desc	ribe the organization		ary unrelated business activity. $\triangleright$ FROM IN	VES.	TMENT IN LIN	ITED PAR	TNE	RSHIP
			poration a subsidiary in an affiliated group or a pare				Ye	
			tifying number of the parent corporation.		, gp			
<b>J</b> The I	books are in care of	<b>&gt;</b> ]	OONE PITMAN		Telepho	ne number 🕨 9	18-	496-7882
	_		de or Business Income		(A) Income	(B) Expenses		(C) Net
<b>1a</b> G	ross receipts or sale	es						
<b>b</b> L	ess returns and allo	wances	<b>c</b> Balance▶	1c				
<b>2</b> C	ost of goods sold (S	Schedule	A, line 7)	2				
	ross profit. Subtrac			3				
			h Schedule D)	4a				
<b>b</b> N	et gain (loss) (Form	4797, F	Part II, line 17) (attach Form 4797)	4b				
<b>c</b> C	apital loss deductio	n for tru	sts	4c				
			ips and S corporations (attach statement)	5	-23,775.			-23,775.
	ent income (Schedu			6				
			me (Schedule E)	7				
		-	and rents from controlled organizations (Sch. F)	8				_
			on 501(c)(7), (9), or (17) organization (Schedule G)	-				
			me (Schedule I)	10				
11 A	avertising income (	Scneau	3 J)	11				
			ns; attach schedule) gh 12	13	-23,775.			-23,775.
Part			ot Taken Elsewhere (See instructions for					23,7730
ı aı			utions, deductions must be directly connecte			income.)		
14 (			rectors, and trustees (Schedule K)				14	
							15	
							16	
							17	_
							18	
19	Taxes and licenses						19	
20	Charitable contributi	ions (Se	e instructions for limitation rules)				20	
21	Depreciation (attach	Form 4	562)		21			
<b>22</b> l	Less depreciation cl	aimed o	n Schedule A and elsewhere on return		22a		22b	
	Depletion						23	
			mpensation plans				24	
	Employee benefit pr	-					25	
26	Excess exempt expe	enses (S	chedule I)				26	
27	Excess readership c	osts (Sc	hedule J)				27	
			nedule)				28	0.
	Total deductions						29	-23,775.
			ncome before net operating loss deduction. Subtract				30	-43,113.
31   32	Net operating loss of	tavabla :	n (limited to the amount on line 30)	rom line	30 STATE	3141711 T 4	31 32	-23,775.
			ncome before specific deduction. Subtract line 3 Ft y \$1,000, but see line 33 instructions for exception:				33	1,000.
			e income. Subtract line 33 from line 32. If line 33 is				- 00	1,000.
J-T		, .a.\a.b.it		greater l	عادات الله على الله الله الله	11101 UI 251U UI		22 775

Part II	1	Tax Computation											
35	Orgai	nizations Taxable as Corporat	tions. See	instructions for tax co	omputa	ation.							
	Contr	olled group members (section	s 1561 an	d 1563) check here 🕨	▶ □	Bee instructions	and:						
а	Enter	your share of the \$50,000, \$2	5,000, and	d \$9,925,000 taxable i	income	e brackets (in that or	der):						
	(1)	\$	(2) \$			(3) \$							
b	Enter	organization's share of: (1) A	dditional 5	% tax (not more than	\$11,7	50) \$							
	( <b>2</b> ) A	dditional 3% tax (not more tha	ın \$100,00	00)		\$							
C	Incon	ne tax on the amount on line 3	4							► 35c			
		s Taxable at Trust Rates. See											
	X	Tax rate schedule or	Schedule [	O (Form 1041)						▶ 36			0.
37		tax. See instructions								▶ 37			
38	Altern	native minimum tax								38			
39	Total	. Add lines 37 and 38 to line 35	ōc or 36, w	hichever applies						39			0.
		Tax and Payments											
40 a	Forei	gn tax credit (corporations atta	ch Form 1	118; trusts attach For	rm 111	6)	40a						
		credits (see instructions)											
C	Gener	ral business credit. Attach Forr	n 3800 🔣				40c						
		t for prior year minimum tax (a											
е	Total	credits. Add lines 40a through	h 40d							40e			
41	Subtr	act line 40e from line 39		<u></u> <u></u>	<u></u>		<u></u>	<u>.</u>		. 41			0.
42	Other	taxes. Check if from: Fo	rm 4255	Form 8611	_ Forr	m 8697 Form	8866	Other	(attach schedule	e) <b>42</b>			
43										43			0.
		ents: A 2014 overpayment cre											
		estimated tax payments											
		eposited with Form 8868											
		gn organizations: Tax paid or w											
		up withholding (see instruction											
		t for small employer health ins	urance pre				44f						
g		credits and payments:	<u> </u>	Form 2439									
		Form 4136		Other			► 44g						
		payments. Add lines 44a thro											
46		ated tax penalty (see instruction											Λ
47		lue. If line 45 is less than the to											0.
48		payment. If line 45 is larger that								48			0.
49 Part V	_	the amount of line 48 you war Statements Regardir					tion (se		funded ctions)	<b>►</b>   49			
		e during the 2015 calendar yea								account (	'hank	Yes	No
	-	or other) in a foreign country?		=		=		-			bank,	103	NO
		, -						-					х
2 Durir	ig the t	If YES, enter the name of the fax year, did the organization receive instructions for other forms the organization.	a distribution	on from, or was it the gran	ntor of, o	or transferor to, a foreign	rtrust?						X
		amount of tax-exempt interest											
		A - Cost of Goods Se					/A						
		at beginning of year	1		<u> </u>	Inventory at end of				6			
	chases	i i	2			Cost of goods sold							
		oor	3		1	from line 5. Enter he			ne 2	7			
		ection 263A costs (att. schedule)	4a		8	Do the rules of sect						Yes	No
		ts (attach schedule)	4b		1	property produced	,						
		d lines 1 through 4b	5		1	the organization?	-						
	Un	nder penalties of perjury, I declare the rrect, and complete. Declaration of p	at I have exa	amined this return, includi	ing acco	ompanying schedules ar	nd statemen	ts, and to	the best of my l			s true,	•
Sign	Co	rrect, and complete. Declaration of p	oreparer (our	ier triari taxpayer) is basec	u on an	imormation of which pre	eparer nas ar	ly Knowle	uge.	May the IF	RS discuss thi	is return v	with
Here		•				MANAGE	ER/CO	-TRU	STEE	-	rer shown belo		
		Signature of officer		Date		Title				instruction	ns)? X Y	es	No
		Print/Type preparer's name		Preparer's sigr			Date		Check	if PT	IN		
Paid				J. PATR		1			self- employ				
Prepa	rer	J. PATRICK MI			N	(	)5/12	/16			00435		
Use C		Firm's name ► HOGAN							Firm's EIN	<b>▶</b> 7	73-141	.397	7
	-,			UTICA PL.						,			
		Firm's address > TUL	SA, C	OK 74114-7	002				Phone no.	(918	3) 745	-23	33

Form 990-T (2015) CHARITABLE TRUST

Schedule C - Rent Inco	me (Fr	om Real	Proper	ty and	l Personal	Propert	y Lease	ed With Real P	rope	rty)(see instructions)
1. Description of property										
(1)										
(2)										
(3)										
(4)										
	2.	. Rent receiv	ed or accrue					0/0)5		
(a) From personal property (if rent for personal property in 10% but not more that	is more thar	age of	( <b>b</b> ) F	f rent for p	nd personal proper ersonal property ex t is based on profit	ceeds 50% o	entage r if	columns 2(	a) and 2(	nected with the income in (b) (attach schedule)
(1)										
(2)										
(3)										
(4)										
Total		0.	Total				0.			
(c) Total income. Add totals of colu	, ,	. ,	ter				_	(b) Total deductions Enter here and on page		_
here and on page 1, Part I, line 6, co							0.	Part I, line 6, column (B)	" <b>&gt;</b>	0.
Schedule E - Unrelated	Debt-l	Financed	Incom	e (see i	nstructions)		-			
					2. Gross inc	come from		<ol><li>Deductions directly to debt-fir</li></ol>		
1. Description of o	debt-finance	ed property			or allocable financed p	e to debt-	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)										
(2)										
(3)										
(4)										
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5. Average of or a debt-financed debt-financed		adjusted basis illocable to nced property a schedule)  6. Column 4 divided by column 5			7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))			
(1)						%				
(2)										
(3)						%				
(4)						%				
						,,,	_	nter here and on page 1,		Enter here and on page 1,
								art I, line 7, column (A).		Part I, line 7, column (B).
Totals						ì	<b>▶</b>		0.	0.
Total dividends-received deduction	<b>ons</b> includ	led in columr								0.
Schedule F - Interest, A				nd Rer	ts From C	ontrolle	d Orgai	nizations (see i	nstruc	tions)
				Exemp	t Controlled O	rganizatio	ns			
1. Name of controlled organization	on	Employer ide numl	entification		3. irelated income see instructions)		4. If specified ents made	5. Part of column included in the con organization's gross	trolling	connected with income
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organiza	ations	•						•		•
7. Taxable Income		unrelated incom see instructions		<b>9.</b> To	tal of specified pay made	ments	in the con	column 9 that is included trolling organization's ross income		Deductions directly connected with income in column 10
(1)						<u> </u>			t	
(2)										
(3)										
(4)										
							Enter here	olumns 5 and 10. and on page 1, Part I, 8, column (A).	Ent	Add columns 6 and 11. er here and on page 1, Part I, line 8, column (B).
Totals								0.		0.
Totals								· ·	1	

Schedule G - Investme (see instr		Section 8	501(c)(7	), (9), or (17) Or	ganizat	tion			
1. Descr	ription of income			2. Amount of income	directly of	ductions connected schedule)		Set-asides ch schedule)	<ol> <li>Total deductions and set-asides (col. 3 plus col. 4)</li> </ol>
(1)									
(2)									
(3)									
(4)									
( )				Enter here and on page 1, Part I, line 9, column (A).					Enter here and on page 1 Part I, line 9, column (B).
				0.					0.
Schedule I - Exploited (see instru		/ Income	, Other	Than Advertisi	ing Inco	ome			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Exper directly con with produ of unrela business in	nected action ted	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	from act is not u	s income civity that nrelated s income	attri	Expenses butable to olumn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals	Enter here and on page 1, Part I, line 10, col. (A).	Enter here a page 1, P line 10, co	art I, I. (B).						Enter here and on page 1, Part II, line 26.
Schedule J - Advertision	ng Income (see i	nstructions)							•
Part I Income From I	Periodicals Rep	orted on	a Cons	solidated Basis					
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, comput cols. 5 through 7.		rculation come		eadership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals (carry to Part II, line (5))		0.	0.						0.
Part II Income From I columns 2 through	Periodicals Rep	orted on			each peric	odical liste	d in Parl	t II, fill in	•
	1 on a line by line be	1010.)		1 .					_
1. Name of periodical	<b>2.</b> Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, comput cols. 5 through 7.	<b>5.</b> Ci	rculation come		eadership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals from Part I	▶	0.	0.						0.
Totals, Part II (lines 1-5)	Enter here and of page 1, Part I, line 11, col. (A)	page	ere and on 1, Part I, I, col. (B).						Enter here and on page 1, Part II, line 27.
Schedule K - Compens					instructio	ns)			•
1. N		10, <b>D</b> 11001	010, 011	2. Title	moti dotto	3. Percer time devot busines	ed to		ensation attributable related business
(1)							%		
(2)							%		
(3)							%		
(4)							%		
<b>Total</b> . Enter here and on page 1, P	art II, line 14								0.
	,								200 =

### SCHEDULE I (Form 1041)

### Alternative Minimum Tax - Estates and Trusts

Attach to Form 1041.

Department of the Treasury Internal Revenue Service Name of estate or trust ▶ Information about Schedule I (Form 1041) and its separate instructions is at www.irs.gov/form1041 .

OMB No. 1545-0092

Employer identification number

H.A. AND MARY K. CHAPMAN CHARITABLE TRUS 73-6177739 Part I Estate's or Trust's Share of Alternative Minimum Taxable Income -23,775. Adjusted total income or (loss) (from Form 1041, line 17) 2 3 3 Taxes Miscellaneous itemized deductions (from Form 1041, line 15c) 4 5 5 Refund of taxes Depletion (difference between regular tax and AMT) 6 Net operating loss deduction. Enter as a positive amount SEE STATEMENT 16 7 7 Interest from specified private activity bonds exempt from the regular tax 8 Qualified small business stock (see instructions) 9 Exercise of incentive stock options (excess of AMT income over regular tax income) 10 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 11 11 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) 12 Disposition of property (difference between AMT and regular tax gain or loss) 13 13 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 14 14 Passive activities (difference between AMT and regular tax income or loss) 15 15 Loss limitations (difference between AMT and regular tax income or loss) 16 16 Circulation costs (difference between regular tax and AMT) 17 17 Long-term contracts (difference between AMT and regular tax income) 18 18 Mining costs (difference between regular tax and AMT) 19 19 Research and experimental costs (difference between regular tax and AMT) 20 20 Income from certain installment sales before January 1, 1987 21 21 22 Intangible drilling costs preference Other adjustments, including income-based related adjustments 23 23 24 25 Adjusted alternative minimum taxable income. Combine lines 1 through 24 STATEMENT 18 -23,775**.** 25 Note: Complete Part II below before going to line 26. 26 Income distribution deduction from Part II, line 44 N/A Estate tax deduction (from Form 1041, line 19) N/A **28** Add lines 26 and 27 28 -23,775. Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25 29 If line 29 is: \$23,800 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust is not liable for the

- alternative minimum tax.
- Over \$23,800, but less than \$174,650, go to line 45.
- \$174,650 or more, enter the amount from line 29 on line 51 and go to line 52.

Pa	rt II Income Distribution Deduction on a Minimum Tax Basis N/A		
30	Adjusted alternative minimum taxable income (see instructions)	30	
31	Adjusted tax-exempt interest (other than amounts included on line 8)	31	
32	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	32	
33	Capital gains for the tax year allocated to corpus and paid or permanently set aside for		
	charitable purposes (from Form 1041, Schedule A, line 4)	33	
34	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	34	
35	Capital gains computed on a minimum tax basis included on line 25	35	( )
36	Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount	36	
37	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0-	37	
38	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	38	
39	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	39	
40	Total distributions. Add lines 38 and 39	40	
41	Tax-exempt income included on line 40 (other than amounts included on line 8)	41	
42	Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40	42	

Sch	edule I (Form 1041) (2015) H.A. AND MARY K. CHAPMAN CHAF	RITA	BLE TRUS	73-	-6177739 Page 2
Pa	art II Income Distribution Deduction on a Minimum Tax Basis	(contin	ued)	N/Z	A
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line	37.			
	If zero or less, enter -0-			43	
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line	43.			
_	Enter here and on line 26			44	
Pa	art III Alternative Minimum Tax				
45				45	\$23,800.00
46	Enter the amount from line 29	46			
47	Phase-out of exemption amount	47	\$79,450.00		
48					
49	Multiply line 48 by 25% (.25)			49	
50					
51				51	
52	·				
	, , , , , , , , , , , , , , , , , , , ,	ie, if line	51 IS -		
E 2					
54					
55					
56				35	
00	Forms 10.41 Cabadula C. line 1a			56	
Pa					
•			/orksheet		
	before completing this part.				
57				57	
58					
	Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for				
	Form 1041, whichever applies (as refigured for the AMT, if necessary)	58			
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2)				
	(as refigured for the AMT, if necessary). If you did not complete				
	Schedule D for the regular tax or the AMT, enter -0-	59			
60	If you did not complete a Schedule D Tax Worksheet for the regular tax or the				
	AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 and enter				
	the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax				
	Worksheet (as refigured for the AMT, if necessary)	60			
61					
62				62	
63					
0.4				63	
64		04	\$2,500.00		
65	•				
	the amount from line 29 -out of exemption amount act line 47 from line 46. If zero or less, enter -0- act line 49 from line 46. If zero or less, enter -0- act line 49 from line 46. If zero or less, enter -0- act line 49 from line 46. If zero or less, enter -0- act line 50 from line 46. Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 amn (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise, if line 51 is - 5,400 or less, multiply line 51 by 26% (.26).  r \$185,400, multiply line 51 by 26% (.26).  r \$185,400, multiply line 51 by 26% (.28) and subtract \$3,708 from the result ative minimum foreign tax credit (see instructions) ive minimum tax. Subtract line 53 from line 52 the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a) ative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0 Enter here and on 1041, Schedule G, line 1c  Line 52 Computation Using Maximum Capital Gains Rates  on: If you did not complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, ac Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions the amount from line 51 the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax the amount from Schedule D (Form 1041), line 18b, column (2) figured for the AMT, if necessary). If you did not complete ulue D for the regular tax or the AMT, enter -0- fold id not complete a Schedule D Tax Worksheet for the regular tax or the enter the amount from line 58. Otherwise, add lines 58 and 59 and enter natler of that result or the amount from line 10 of the Schedule D Tax sheet (as refigured for the AMT, if necessary) the smaller of that result or the amount from line 50 of the Schedule D Tax sheet (as refigured for the AMT, if necessary)				
		65			
66		-			
67		-			
68		-			
69		-			

Schedule I (Form 1041) (2015) Page **3** 

Pa	rt IV Line 52 Computation Using Maximum Capital Ga	ains Rates <sub>(cont</sub>	inued)	
	Maximum amount subject to rates below 20%		\$12,300.00	
71	Enter the amount from line 66	71		
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the			
	Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax			
	Worksheet, whichever applies (as figured for the regular tax). If you did			
	not complete Schedule D or either worksheet for the regular tax, enter			
	the amount from Form 1041, line 22; if zero or less, enter -0-	72		
73	Add line 71 and line 72			
74	Subtract line 73 from line 70. If zero or less, enter -0-	74		
	Enter the <b>smaller</b> of line 69 or 74			
76	Multiply line 75 by 15% (.15)		<b>&gt;</b>	76
77	Add lines 68 and 75	1 1		
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Other		3.	
78	Subtract line 77 from line 67	78		
79	Multiply line 78 by 20% (.20)		<b>•</b>	79
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwis			
80	Add lines 62, 77, and 78	80		
	Subtract line 80 from line 57	ایما		
82	Multiply line 81 by 25% (.25)		<b>&gt;</b>	82
	Add lines 63, 76, 79, and 82			83
84	If line 57 is \$185,400 or less, multiply line 57 by 26% (.26). Otherwise, multiply line 57 by 26% (.26).			
	and subtract \$3,708 from the result	- , ,		84
85	Enter the amallar of line 92 or line 94 here and on line 52			85

Schedule I (Form 1041) (2015)

FORM 990-T	NET	OPERATIN	G LOSS	DEDUCTI	ON	STAT	EMENT	14
TAX YEAR	LOSS SUSTAINED	LOS: PREVIO	USLY		OSS AINING		LABLE YEAR	
12/31/08 12/31/09 12/31/11	13,613. 1,361. 14,142.		3,613. 1,361. 6,780.		0. 0. 7,362.			0. 0. 2.
NOL CARRYOV	ER AVAILABLE THIS	YEAR			7,362.		7,36	2.
FORM 990-T	INCO	ME (LOSS)	FROM P	ARTNERS	HIPS	STAT	EMENT	15
PARTNERSHIP	NAME		GROSS	INCOME	DEDUCTIONS		INCOM	
PRESCOTT GR	OUP AGGRESSIVE SM	ALL CAP	-2	3,775.	0	 ).	-23,7	75.
TOTAL TO FO	RM 990-T, PAGE 1,	LINE 5	-2	3,775.	0	). 	-23,7	75.
SCHEDULE I	NET O	PERATING 1	LOSS CA	RRYOVER	<del> </del>	STAT	EMENT	16
TAX YEAR	LOSS SUSTAINED	LOS PREVIO APPL	USLY			A	MOUNT	
12/31/08 12/31/09 12/31/11	13,613. 1,361. 14,142.		3,613. 1,361. 6,780.				7,3	0. 0. 62.
TOTAL TO SC	HEDULE I, LINE 7						7,3	62.
SCHEDULE I	ALTERNAT	IVE MINIM	UM TAX	NOL CAR	RYOVER	STAT	EMENT	17
TAX YEAR	LOSS SUSTAINED	LOS: PREVIO	USLY			A	MOUNT	
12/31/08 12/31/09 12/31/11	13,613. 1,361. 14,142.		3,613. 1,361. 5,936.				8,2	0. 0. 06.
	HEDULE I, LINE 24 TO LIMITATION						8,2	06.

SCHEDULE I		NET OPERATING I		STATEMENT	18
DESCRIPTION		TOTAL AMT NOL CARRYFORWARD	AMT NOL USED THIS YEAR	UNUSED AMT CARRYFORWA	
AMT NOL CARRYFOR	WARD	8,206.		8,2	06.
TOTAL TO SCHEDUL	E I, LINE 24			8,2	06.