

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018**

Name of foundation PEVEHOUSE FAMILY FOUNDATION INC		<b>A Employer identification number</b> 26-3401629
Number and street (or P O box number if mail is not delivered to street address) 3300 NORTH A ST BLDG 1-201	Room/suite	<b>B Telephone number (see instructions)</b> (432) 687-1608
City or town, state or province, country, and ZIP or foreign postal code MIDLAND, TX 79705		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>15,506,146</u>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule)	2,000,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	29,638	29,638		
	<b>4</b> Dividends and interest from securities	382,836	379,653		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	-739,134			
	<b>b</b> Gross sales price for all assets on line 6a	8,047,492			
	<b>7</b> Capital gain net income (from Part IV, line 2)		0		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	109,541	109,541			
<b>12 Total.</b> Add lines 1 through 11	1,782,881	518,832			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	25,700	12,850		12,850
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	7,376	3,688		3,688
	<b>c</b> Other professional fees (attach schedule)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	35,699	23,593		973
	<b>19</b> Depreciation (attach schedule) and depletion	104,329	104,329		
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings	1,147	574		573
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	55,697	55,477		220
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	229,948	200,511		18,304
	<b>25</b> Contributions, gifts, grants paid	725,500			725,500
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	955,448	200,511		743,804	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	827,433				
<b>b Net investment income</b> (if negative, enter -0-)		318,321			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	581,214	127,472	127,472
	<b>2</b> Savings and temporary cash investments . . . . .	24,083	17,115	17,115
	<b>3</b> Accounts receivable ▶ <u>13,177</u>			
	Less allowance for doubtful accounts ▶ _____	13,583	13,177	13,177
	<b>4</b> Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)	0	247,330	248,070
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	12,013,669	12,988,668	11,789,583
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
<b>12</b> Investments—mortgage loans . . . . .				
<b>13</b> Investments—other (attach schedule) . . . . .	3,232,836	3,299,233	3,310,504	
<b>14</b> Land, buildings, and equipment basis ▶ <u>896</u>				
Less accumulated depreciation (attach schedule) ▶ <u>671</u>	404	225	225	
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	15,865,789	16,693,220	15,506,146	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	14,000,000	15,000,000	
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	1,865,789	1,693,220		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	15,865,789	16,693,220		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	15,865,789	16,693,220		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> 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)	<b>1</b>	15,865,789
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	827,433
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	16,693,222
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	2
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	16,693,220

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	-739,134
<b>3</b> 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) (see instructions). If (loss), enter -0- in Part I, line 8	3	

**Part V 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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 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 instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	660,368	14,217,577	0.046447
2016	492,888	11,094,002	0.044428
2015	429,525	8,821,163	0.048693
2014	561,143	10,956,920	0.051214
2013	404,170	9,216,802	0.043851

<b>2</b> Total of line 1, column (d)	2	0.234633
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.046927
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	15,971,624
<b>5</b> Multiply line 4 by line 3	5	749,500
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	3,183
<b>7</b> Add lines 5 and 6	7	752,683
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	743,804

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.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes sub-tables for 6a-6d (Credits/Payments) and 7-11 (Total credits and tax due). Values include 6,366, 0, 14,100, and 7,734.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question text, 'Yes', and 'No' checkboxes. Questions cover political influence, expenditures, and reporting requirements.

Part VII-A Statements Regarding Activities (continued)

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.
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
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of JAN WATSON Telephone no (432) 687-1608

Located at 3300 NORTH A ST BLDG 1-201 MIDLAND TX ZIP+4 79705

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

16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

Part 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.

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?
(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)?
(6) Agree to pay money or property to a government official?
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions
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 2018?
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))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years
b 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?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or 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?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?



**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total number of others receiving over \$50,000 for professional services.</b>		<b>0</b>

**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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	15,729,234
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	485,613
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	16,214,847
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	16,214,847
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	243,223
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	15,971,624
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	798,581

**Part XI 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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	798,581
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	6,366
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	6,366
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	792,215
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	792,215
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	792,215

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	743,804
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	743,804
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	743,804

**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 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				792,215
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			70,045	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>743,804</u>				
<b>a</b> Applied to 2017, but not more than line 2a			70,045	
<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			
<b>d</b> Applied to 2018 distributable amount. . . . .				673,759
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> 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		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				118,456
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2018</b>	<b>(b) 2017</b>	<b>(c) 2016</b>	<b>(d) 2015</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> 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. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
BEVERLY PEVEHOUSE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

---

**b** The form in which applications should be submitted and information and materials they should include

---

**c** Any submission deadlines

---

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				





**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co.)	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
1 WF ADVISORS LOSS	P		
1 WF ADVISORS GAIN	P		
WF ADVISORS LOSS	P		
WF ADVISORS LOSS	P		
MERRILL LYNCH GAIN	P		
DORCHESTER MINERALS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
3,928,063		3,953,158	-25,095
675,000		675,000	0
1,850,264		2,467,705	-617,441
764,329		958,763	-194,434
819,756		732,000	87,756
10,080			10,080

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>(i)</b> FMV as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col. (i) over col. (j), if any	
			-25,095
			0
			-617,441
			-194,434
			87,756
			10,080

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
BEVERLY PEVEHOUSE 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	PRESIDENT 1 00	100	0	0
MELISSA PEVEHOUSE HOELSCHER 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	VICE PRESIDENT-SECRETARY/T 1 00	100	0	0
CLAY PEVEHOUSE 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	VICE PRESIDENT-ASSISTANT S 1 00	100	0	0
JAN WATSON 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	VICE PRESIDENT-ASSISTANT S 1 00	100	0	0
LAURA HOELSCHER 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	DIRECTOR 1 00	100	0	0
EVAN PEVEHOUSE 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	DIRECTOR 1 00	100	0	0
SARA O'NEILL 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	DIRECTOR 1 00	100	0	0
CRESSINDA HYATT 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	EXECUTIVE DIRECTOR 20 00	26,946	0	0

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ANGELO STATE UNIVERSITY FOUNDATION ASU STATION 11023 SAN ANGELO, TX 76909		PC	STUDENT SCHOLARSHIP FUND	65,000
APHASIA CENTER WEST TEXAS 5214 THOMASON DRIVE MIDLAND, TX 79703		PC	OPERATIONAL EXPENSES	10,000
BIG BROTHERS BIG SISTERS OF PERMIAN BASIN 714 W LOUISIANA MIDLAND, TX 79701		PC	OPERATIONAL EXPENSES	10,000
<b>Total . . . . . ▶ 3a</b>				725,500



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BORDERLANDS RESEARCH INSTITUTE PO BOX C-21 ALPINE, TX 79832		PC	OPERATIONAL EXPENSES	10,000
BOYS AND GIRLS CLUB OF MIDLAND 1321 S GOODE ST MIDLAND, TX 79701		PC	SCHOLARSHIP FUND	10,000
BUCKNER CHILDREN & FAMILY SERVICES 425 W PECAN ST MIDLAND, TX 79705		PC	OPERATIONAL EXPENSES	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CASA DE AMIGOS OF MIDLAND TEXAS INC 1101 GARDEN LN MIDLAND, TX 79707		PC	PROGRAM EXPENSES	10,000
CITY OF EARLY BEAUTIFICATIN COMMISSION PO BOX 3100 EARLY, TX 76803		PC	PROJECT EXPENSES	15,000
CJ MACON SCHOLARSHIP FOUNDATION 967 MORROW RD VALLEY VIEW, TX 76272		PC	SCHOLARSHIP FUND	7,500
<b>Total . . . . . ▶ 3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY CHILDREN'S CLINIC PO BOX 3328 MIDLAND, TX 79702				
FORT CHADBOURNE FOUNDATION 651 FT CHADBOURNE RD BRONTE, TX 76933				
GIRL SCOUTS OF THE DESERT SOUTHWEST 9700 GIRL SCOUT WAY EL PASO, TX 79924				
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HARDIN SIMMONS UNIVERSITY PHYSICAL THERAPY DEPT 2200 HICKORY ABILENE, TX 79602		PC	OPERATIONAL EXPENSES	5,000
HIGH SKY CHILDREN'S RANCH 8613 WEST COUNTY RD 60 MIDLAND, TX 79707		PC	PROGRAM EXPENSES	30,000
HILL COUNTRY DISTRICT JUNIOR LIVESTOCK SHOW PO BOX 291217 KERRVILLE, TX 78028		PC	CAPITAL PROJECT	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HILLCREST SCHOOL 2800 N A STREET MIDLAND, TX 79705		PC	SCHOLARSHIP FUND	15,000
HUNT VOLUNTEER FIRE DEPARTMENT PO BOX 362 HUNT, TX 78024		PC	OPERATIONAL EXPENSES	5,000
IN-SYNC EXOTICS PO BOX 968 WYLIE, TX 75098		PC	OPERATIONAL EXPENSES	5,000
<b>Total . . . . . ▶ 3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
INTERFAITH MINISTRIES OF GREATER HOUSTON 3303 S MAIN ST HOUSTON, TX 77002		PC	OPERATIONAL EXPENSES	10,000
JUBILEE CENTER OF MIDLAND PO BOX 7240 MIDLAND, TX 79708		PC	OPERATIONAL EXPENSES	5,000
MANOR PARK INC2208 N LOOP 250 W MIDLAND, TX 79707		PC	OPERATIONAL EXPENSES	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MIDLAND BEHAVIOR HEALTH LEADERSHIP TEAM 400 ROSALIND REDFERN GROVER PKWY MIDLAND, TX 79701		PC	OPERATIONAL EXPENSES	10,000
MIDLAND CHILDREN'S REHABILITATION CENTER 802 VENTURA MIDLAND, TX 79705		PC	OPERATIONAL EXPENSES	10,000
MIDLAND COLLEGE FOUNDATION 3600 N GARFIELD PAB 139 MIDLAND, TX 79705		PC	OPERATIONAL EXPENSES	5,000
<b>Total . . . . . ▶ 3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MIDLAND COLLEGE FOUNDATION 3600 N GARFIELD PAB 139 MIDLAND, TX 79705		PC	SCHOLARSHIP FUND	5,000
MIDLAND COMMUNITY THEATRE 2000 W WADLEY AVE MIDLAND, TX 79705		PC	OPERATIONAL EXPENSES	5,000
MIDLAND COUNTY PUBLIC LIBRARY FOUNDATION PO BOX 1634 MIDLAND, TX 79702		PC	OPERATIONAL EXPENSES	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MIDLAND MEMORIAL FOUNDATION 400 ROSALIND REDFERN GROVER PKWY MIDLAND, TX 79701		PC	CAPITAL EQUIPMENT	35,000
MIDLAND YOUNG LIFE 925 W WADLEY AVE MIDLAND, TX 79705		PC	OPERATIONAL EXPENSES	5,000
MUSEUM OF THE SOUTHWEST 1705 W MISSOURI AVE MIDLAND, TX 79701		PC	OPERATIONAL EXPENSES	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NOTRE DAME CATHOLIC SCHOOL 907 MAIN STREET KERRVILLE, TX 78028		PC	SCHOLARSHIP FUND	15,000
OUR LADY OF THE HILLS REGIONAL CATHOLIC HIGH SCHOOL 235 PETERSON FARM ROAD KERRVILLE, TX 78028		PC	OPERATIONAL EXPENSES AND SCHOLARHIP FUND	50,000
PERMIAN BASIN PUBLIC TELECOMMUNICATIONS INC (BASIN PBS) PO BOX 8940 MIDLAND, TX 79708		PC	OPERATIONAL EXPENSES	10,000
<b>Total . . . . . ▶ 3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAINT PETER UPON THE WATER PO BOX 509 INGRAM, TX 78025				
SENIOR LINK MIDLAND PO BOX 80519 MIDLAND, TX 79708				
SHOW OF SUPPORT MILITARY HUNT INC PO BOX 11225 MIDLAND, TX 79702				
<b>Total . . . . .</b>	<b>▶ 3a</b>			725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TARLETON STATE UNIVERSITY FOUNDATION INC PO BOX T-0260 STEPHENVILLE, TX 76402		PC	CAPITAL PROJECT	40,000
TARLETON STATE UNIVERSITY FOUNDATION INC PO BOX T-0260 STEPHENVILLE, TX 76402		PC	SCHOLARSHIP FUND	15,000
TARLETON STATE UNIVERSITY FOUNDATION INC PO BOX T-0260 STEPHENVILLE, TX 76402		PC	PROJECT EXPENSES	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TEXAS LIONS CAMP INCPO BOX 290247 KERRVILLE, TX 78029				
TEXAS TECH FOUNDATION INC-TTUHSC AT THE PERMIAN BASIN 800 W 4TH ST STE 1C75 ODESSA, TX 79763				
THE MUSEUM OF WESTERN ART 1550 BANDERA HWY PO BOX 294300 KERRVILLE, TX 78029				
<b>Total . . . . .</b>	<b>▶ 3a</b>			725,500

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE SPRINGBOARD CENTER 200 CORPORATE DR MIDLAND, TX 79705		PC	OPERATIONAL EXPENSES	10,000
UNITED WAY OF MIDLAND 1209 W WALL ST MIDLAND, TX 79701		PC	OPERATIONAL EXPENSES	10,000
WEST TEXAS FOOD BANK 1601 WESTCLIFF MIDLAND, TX 79703		PC	OPERATIONAL EXPENSES	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				725,500

<b>Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YMCA OF MIDLAND 800 N BIG SPRING ST MIDLAND, TX 79701		PC	CAPITAL PROJECT	20,000
<b>Total</b> . . . . .			<b>▶ 3a</b>	725,500

**TY 2018 Accounting Fees Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEE	7,376	3,688		3,688



Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2018 Depreciation Schedule

**Name:** PEVEHOUSE FAMILY FOUNDATION INC

**EIN:** 26-3401629

### Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAPTOP	2015-03-30	896	492	SL	5 000000000000	179	0		

**TY 2018 Investments Corporate Stock Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
STOCKS AND ETF'S	12,988,668	11,789,583

**TY 2018 Investments Government Obligations Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629**US Government Securities - End  
of Year Book Value:**

247,330

**US Government Securities - End  
of Year Fair Market Value:**

248,070

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

**TY 2018 Investments - Other Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
PUBLICLY TRADED PARTNERSHIPS	AT COST	489,372	585,600
WFA CERTIFICATE OF DEPOSIT	AT COST	2,439,000	2,436,904
ROYALTY TRUST	AT COST	370,861	288,000

**TY 2018 Land, Etc.  
Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
LAPTOP	896	671	225	225

**TY 2018 Other Decreases Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629

<b>Description</b>	<b>Amount</b>
ROUNDING	2

**TY 2018 Other Expenses Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OIL & GAS ROYALTIES EXPENSES	17,492	17,492		0
DUES & SUBSCRIPTIONS	82	41		41
ADR FEE	2,300	2,300		0
INVESTMENT FEES	35,465	35,465		0
OFFICE EXPENSES	358	179		179

**TY 2018 Other Income Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OIL AND GAS ROYALTIES-PARTNERSHIPS	77,907	77,907	77,907
SAN JUAN ROYALTY TRUST	28,389	28,389	28,389
MISCELLANEOUS INCOME	3,245	3,245	3,245



**TY 2018 Substantial Contributors  
Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629**Name****Address**

BEVERLY PEVEHOUSE

3300 NORTH A STREET BLDG 1-201  
MIDLAND, TX 79705

**TY 2018 Taxes Schedule****Name:** PEVEHOUSE FAMILY FOUNDATION INC**EIN:** 26-3401629

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FEDERAL EXCISE TAX	11,133	0		0
FOREIGN TAX ON DIVIDENDS	22,620	22,620		0
PAYROLL TAXES	1,946	973		973

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information

OMB No 1545-0047  
**2018**

**Name of the organization**  
PEVEHOUSE FAMILY FOUNDATION INC

**Employer identification number**  
26-3401629

**Organization type** (check one)

**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

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

<b>Name of organization</b> PEVEHOUSE FAMILY FOUNDATION INC	<b>Employer identification number</b> 26-3401629
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**Part I** **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BEVERLY PEVEHOUSE 3300 NORTH A STREET BLDG 1-201 MIDLAND, TX 79705	\$ 2,000,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions )</small>

<b>Name of organization</b> PEVEHOUSE FAMILY FOUNDATION INC	<b>Employer identification number</b> 26-3401629
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<b>Part II Noncash Property</b>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	(See instructions) Use duplicate copies of Part II if additional space is needed _____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____
	_____ _____ _____	_____ \$ _____	_____

<b>Name of organization</b> PEVEHOUSE FAMILY FOUNDATION INC	<b>Employer identification number</b> 26-3401629
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**Part III** 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 information once. See instructions.) ▶ \$ \_\_\_\_\_  
 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
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

<hr/> <hr/>	(e) Transfer of gift
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>