** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

A I	For the	e 2021 calendar year, or tax year beginning JU	JL 1, 2021 and	ending J	UN 30,	2022	
	Check if applicabl	C Name of organization			D Emp	loyer identif	ication number
Г	Addre		IA				
F	Name chang	` 			┪.	73-1396320	
F	Initial return	Number and street (or P.0. box if mail is not del	livered to street address)	Room/suite	1		
F	Final	801 NW 63RD STREET SILTER 200		E Telephone number 405-488-1450			
_	⊥return. termin ated		7IP or foreign postal code			receipts \$	263,774,300.
Г	Amen	ded OKIAHOMA CITY OK 73116	Zii oi loreigii postal code			this a group i	
F	return _Applic _tion	·	GISH		1	subordinate	
_	pendi	SAME AS C ABOVE			1		included? Yes No
T-	Γαν.Αν		◀ (insert no.) 4947(a)(1)	or 527	7		a list. See instructions
		te: WWW.CFOK.ORG	(mostries) = 10 m(a)(1)	01 021	1	•	on number
			ssociation Other	1 Year			M State of legal domicile; OK
		Summary		L 1001	or rorman	JII	otato or logar dominono,
	_	Briefly describe the organization's mission or most	significant activities: STRENG	THENING O	COMMUNI	TIES	
Se	'	THROUGH THOUGHTFUL, DELIBERATELY DESIGN					
Governance	2		ntinued its operations or dispos	sed of more	than 25%	6 of its net as	sets
Ver	3	Number of voting members of the governing body	·			1 _	11
ဗိ	4	Number of independent voting members of the gov					11
ფ		Total number of individuals employed in calendar y					12
ij		Total number of volunteers (estimate if necessary)					33
Activities &		Total unrelated business revenue from Part VIII, col					0.
ĕ		Net unrelated business taxable income from Form					
			, , ,			Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)				7,258,231.	
	9	. (5 1)(11 11 6)				214,337.	
š	10	Investment income (Part VIII, column (A), lines 3, 4,				9,227,016.	7,892,766.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,				30,207.	
	1	Total revenue - add lines 8 through 11 (must equal			7	6,729,791.	262,928,219.
		Grants and similar amounts paid (Part IX, column (6:	2,488,136.	
	1	Benefits paid to or for members (Part IX, column (A				0.	0.
w	45	Salaries, other compensation, employee benefits (F				3,883,512.	7,411,870.
Expenses	16a	Professional fundraising fees (Part IX, column (A), li				0.	0.
per	. ь	Total fundraising expenses (Part IX, column (D), line		171.			
й	17	Other expenses (Part IX, column (A), lines 11a-11d,	'			628,759.	1,209,925.
		Total expenses. Add lines 13-17 (must equal Part I)			6	7,000,407.	241,646,483.
	19	Revenue less expenses. Subtract line 18 from line				9,729,384.	21,281,736.
JO S	3			Ве	ginning of	Current Year	End of Year
sets	20	Total assets (Part X, line 16)			15	5,793,943.	167,077,976.
ASS	21	Total liabilities (Part X, line 26)			1	6,870,379.	29,272,210.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from	line 20		13	8,923,564.	137,805,766.
Pa	art II	Signature Block					
Und	er pena	lities of perjury, I declare that I have examined this return,	including accompanying schedule	s and stateme	ents, and to	o the best of m	y knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than office	er) is based on all information of wh	nich preparer	has any ki	nowledge.	
		O'contract officers				Data	
Sig	n	Signature of officer				Date	
Her	е	MARK GISH, CHAIR					
		Type or print name and title		T r	Data	10	DTIN
		Print/Type preparer's name	Preparer's signature		Date 5 (00 (00	Check if	PTIN
Paid			ASHLEY M. FOGLE	0	5/09/23 T	oon ompre	-
	parer	Firm's name HOGANTAYLOR LLP	GILLER 200			Firm's EIN 🛌	73-1413977
Use	Only	Firm's address 1225 N BROADWAY AVENUE,	SUITE 200			D: 400	5 040 2020
_		OKLAHOMA CITY, OK 73103				Phone no. 40	5-848-2020
May	v tne II	RS discuss this return with the preparer shown about	ve / See instructions				X Yes No

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SERVE PHILANTHROPIC NEEDS OF ALL OF OKLAHOMA.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	Many far and an arrival and a second and a second and
4a	(Code:) (Expenses \$25,565,658. including grants of \$\$ 218,219,132.) (Revenue \$)
Tu	COMMUNITY CARES PARTNERS - USED TO DISTRIBUTE FEDERAL ASSISTANCE
	AWARDED THROUGH THE CARES AND EMERGENCY RENTAL ASSISTANCE CONTRACTS.
	Interest in ones in manufact reasons to the contracts.
4b	(Code:) (Expenses \$ 1,320,868. including grants of \$ 1,147,027.) (Revenue \$)
TD	FLOURISH OKC OPERATIONS - TO PROVIDE A PLATFORM THAT REMOVES BARRIERS
	TO JUSTICE, UPROOTS INEQUALITY AND BIAS, AND PLANTS HOPE, TRUST, AND
	RENEWAL THROUGH EXPERIENCES, STORYTELLING, AND NETWORK ENGAGEMENT.
	REMEMBE THROUGH EAFERTENCES, STORTTEBBING, AND NETWORK ENGAGEMENT.
4c	(Code:) (Expenses \$ 891,107. including grants of \$ 891,107.) (Revenue \$)
40	CFO SPECIAL PROJECTS - GRANTS WERE PROVIDED ON BEHALF OF LOCAL HIGH
	SCHOOLS TO DESIGN AND BUILD SPORTING COMPLEXES.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 12,767,422. including grants of \$ 12,767,422.) (Revenue \$ 237,491.)
4e	Total program service expenses ▶ 240 , 545 , 055.
	Form 990 (2021)

Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	l		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f		_ ^
ıza	· · ·	12a	х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	and the contract of the contra	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

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Form **990** (2021)

Form	990 (2021) COMMUNITIES FOUNDATION OF OKLAHOMA 73-1396:	320	Р	age 4
Ра	t IV Checklist of Required Schedules (continued)		1	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		17	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		v	
04 -	Schedule J	23	Х	\vdash
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
ام	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		\vdash
		240		\vdash
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		l x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? ### If The Industrial Contributor is a content of the Industrial Contributor is a con			
u	"Yes," complete Schedule L, Part IV	28a	х	
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			х

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

If "Yes," complete Schedule R, Part V, line 2

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	5688			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	

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Form **990** (2021)

35b

36

37

38

Form 990 (2021) COMMUNITIES FOUNDATION OF OKLAHOMA

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

i (continued)			
		Yes	No
Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 12			
ind for the date later year of the ing with or within the year devoted by the rotatin	OI.	v	
	20	Λ	
	0-		Х
	30		
	4-		x
	4a		
	Eo.		х
			Х
	30		
	62	x	
	- Ou		
and the deduction of	6b	х	
	7a	х	
	7b	Х	
to file Form 8282?	7с		х
If "Yes," indicate the number of Forms 8282 filed during the year			
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
sponsoring organization have excess business holdings at any time during the year?	8		Х
Sponsoring organizations maintaining donor advised funds.			
Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
	9b		Х
	12a		
Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the			
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
Enter the amount of reserves the organization is required to maintain by the states in which the			
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14a 14b		Х
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b		
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?			х
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	14b 15		х
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	14b		
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	14b 15		х
Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	14b 15		х
	if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e_nie. See instructions. Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$5 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization received a contribution of qualified intellectual pr	It at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file, See instructions. Idi the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a If "Yes," enter the name of the foreign country P See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," idid the organization include with every solicitation and partly for goods and services provided to the payor? To be the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? To the organization receive any funds, directly o	if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file, See instructions. Job did the organization have unrelated business gross income of \$1,000 or more during the year? 3a and 1f "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country such as a bank account, securities account, or other financial account)? 4a a lif "Yes," enter the name of the foreign country provided an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country such as a bank account, securities account, or other financial account)? 4a lif "Yes," enter the name of the foreign country provided an explanation on Schedule O At any time during the tax year? See instructions frilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization ap any to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization aparty to a prohibited tax shelter transaction? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If "Yes," did the organization shell explanation that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of 5° made party as a contribution and party for goods and services provided to the payor? If "Yes," did the organization may receive any funding the y

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1	1		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b1	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3				x
	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	, -		
	(This Section B requests information about policies not required by the internal nevertile code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa		
D		400		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	v	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		х
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	10.0		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ioa		16a		х
L	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	108		
D				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
800	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OK			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	nd finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 405-488-1450			
	801 NW 63RD STREET, SUITE 200, OKLAHOMA CITY, OK 73116			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) TERESA ROSE CROOK	40.00									
EXECUTIVE DIRECTOR				Х				219,100.	0.	9,617
(2) MARK GISH	1.00									
CHAIR		Х		Х				0.	0.	0
(3) RICHARD RATCLIFFE	1.00									
VICE-CHAIR		Х		Х				0.	0.	0
(4) D.B. GREEN, III	1.00	-								
TREASURER		Х		Х				0.	0.	0
(5) LESLIE RAINBOLT-FORBES	1.00	1								
SECRETARY		Х		Х				0.	0.	0
(6) BILL BUCKLES	1.00									
DIRECTOR		Х						0.	0.	0
(7) ROBERTA BURRAGE	1.00	1								
DIRECTOR		Х						0.	0.	0
(8) TRIPP HALL	1.00	1								
DIRECTOR		Х						0.	0.	0
(9) TOM MCCASLAND, III	1.00									
DIRECTOR		Х						0.	0.	0
(10) SUSAN PADDOCK	1.00									
DIRECTOR		Х						0.	0.	0
(11) JAMES STUART	1.00									
DIRECTOR		Х						0.	0.	0
(12) DAVID RAINBOLT	1.00									
DIRECTOR		Х						0.	0.	0
						L				
						L				
		L	L		L	L				
		L		L	L	L				
		1								

Form 990 (2021)

Pai	T VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
	Name and title	Average	(do no				than o		Reportable	Reportable		l '	stimate	
		hours per week					s both or/trus		compensation	compensation		ar	nount (of
		(list any	tor						from the	from related organization		com	other pensa	tion
		hours for	direc.				ъ В		organization	(W-2/1099-MI		ı	rom the	
		related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC))	org	janizati	on
		organizations	al trus	onal tr		loyee	comp		1099-NEC)			l	d relate	
		below line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former				orga	anizatio	ons
			드	드	5	- X	물 등	요						
				_										
	Cubtatal						_		219,100.		0.		9	617.
	Subtotal Total from continuation sheets to Part VI								0.		0.			0.
	Total (add lines 1b and 1c)								219,100.		0.		9	617.
2	Total number of individuals (including but no							o re	· · · · · · · · · · · · · · · · · · ·	000 of reportable			-,	
_	compensation from the organization	or minica to ai	000	11010	u u	,000	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	010	socived more than \$100,	ooo or reportable				1
	omponedation the organization												Yes	No
3	Did the organization list any former officer,	director, truste	ee, k	еу е	empl	loye	e, or	hig	hest compensated emp	loyee on				
	line 1a? If "Yes," complete Schedule J for si	•	-	•	•	•		_		•		3		Х
4	For any individual listed on line 1a, is the su													
	and related organizations greater than \$150											4	Х	
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ıch į	oers	on .					5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest con	•	•								pensa ¹	tion fro	om	
	the organization. Report compensation for t	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin T		ear.				
	(A)	addrasa							(B)	onvices	_)) 20000'	C) postion	,
D 7 37	Name and business	auuress						-	Description of s	EI VICES	\vdash	ompe	nsatior	'
BANC	FIRST										i			

(A)	(B)	(C)
Name and business address	Description of services	Compensation
BANCFIRST		
101 N. BROADWAY, OKLAHOMA CITY, OK 73123	INVESTMENT MANAGEMENT FEES	291,119.
GIVING WELL, LLC, 8504 N. GEORGIA AVENUE,	CCP CONTRACT EXECUTIVE	
OKLAHOMA CITY, OK 73114	DIRECTOR	193,435.
KATIE FRY	CCP CONTRACT CHIEF OPERATING	
13401 AMBLESIDE DRIVE, YUKON, OK 73009	OFFICER	152,584.
2 Total number of independent contractors (including but not limited to those lis	ted above) who received more than	
\$100,000 of compensation from the organization		

Form **990** (2021)

Form 990 (2021) COMMUNITIES

Part VIII Statement of Revenue

		Check if Schedule O	contain	s a response	or note to any line	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							Turiction revenue	business revenue	sections 512 - 514
Siα	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts									
جَ ۾		Fundraising events							
fts, r A		Related organizations							
ig ig		Government grants (contri			239,403,931.				
Sin		All other contributions, gifts,							
ē Ħ	'				15,341,273.				
έş		similar amounts not included			692,428.				
	-	Noncash contributions included in			032,420.	254,745,204.			
Oa	<u>n</u>	Total. Add lines 1a-1f			Business Code	234,743,204.			
	_	MANAGEMENT BEEG			Business Code 900099	227 401	227 401		
<u>:</u>	2 a	-			900099	237,491.	237,491.		
er <	b								
n S	С								
ran Sev	d								
Program Service Revenue	е								
Δ.	f	All other program service							
	g	Total. Add lines 2a-2f				237,491.			
	3	Investment income (include	ling div	idends, inter	est, and				
		other similar amounts)				2,409,811.			2,409,811.
	4	Income from investment of	of tax-ex	cempt bond p	oroceeds >				
	5	Royalties				52,758.			52,758.
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
	С	Rental income or (loss)	6с						
	d	Net rental income or (loss))				
	7 a	Gross amount from sales of		i) Securities	(ii) Other				
		assets other than inventory	7a	6,329,036.					
	b	Less: cost or other basis							
ē		and sales expenses	7b	846,081	.				
Revenue	С	Gain or (loss)	7c	5,482,955.	,				
Ş		Net gain or (loss)				5,482,955.			5,482,955.
ther		Gross income from fundraising							
퉏		including \$	•	` . l					
		contributions reported on							
		Part IV, line 18			,				
	b	Less: direct expenses							
		Net income or (loss) from							
		Gross income from gamin		-					
		Part IV, line 19	-	I .	,				
	b	Less: direct expenses		I .					
		Net income or (loss) from		·····	•				
		Gross sales of inventory, I							
		and allowances			a				
	h	Less: cost of goods sold		I .					
		Net income or (loss) from			1				
			0	Sincoly .	Business Code				
Sn	11 a								
neo Tue	b								
Miscellaneous Revenue	C								
Sce		All other revenue							
Σ		Total. Add lines 11a-11d							
	12	Total revenue. See instruction				262,928,219.	237,491.	0.	7,945,524.
	-	. J. W. I D T D II W D. OOU III JU U U U				, - , •	,		, , , , , •

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do n	Check if Schedule O contains a respons of include amounts reported on lines 6b,	(A)	(B)	(C)	_ (D)
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	33,796,691.	33,796,691.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	199,227,997.	199,227,997.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	240,355.	204,302.	24,035.	12,018
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,987,677.	6,823,418.	164,259.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	00.100		46.55	
9	Other employee benefits	93,493.	76,597.	16,424.	472
10	Payroll taxes	90,345.	74,229.	15,189.	927
11	Fees for services (nonemployees):				
	Management				
	Legal	2,937.		2,937.	
	Accounting	27,351.		27,351.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	298,104.		298,104.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	413,054.	230,988.	182,066.	
12	Advertising and promotion	66,754.			66,754
13	Office expenses	43,979.	13,413.	30,566.	
14	Information technology	66,113.	3,540.	62,573.	
15	Royalties				
16	Occupancy	166,385.	69,352.	97,033.	
17	Travel	16,348.	16,348.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	10.001		10.001	
19	Conferences, conventions, and meetings	18,884.		18,884.	
20	Interest				
21	Payments to affiliates	24.425		24 425	
22	Depreciation, depletion, and amortization	24,196.		24,196.	
23	Insurance	28,380.		28,380.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	STAFF DEVELOPMENT	14,093.	400.	13,693.	
b	EVENTS	11,832.	-	11,832.	
c	BANK FEES	7,780.	7,780.	, ,	
d	DUES AND SUBSCRIPTIONS	3,277.	,	3,277.	
-	All other expenses	458.		458.	
25	Total functional expenses. Add lines 1 through 24e	241,646,483.	240,545,055.	1,021,257.	80,171
26	Joint costs. Complete this line only if the organization	. ,	. ,		,
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Form 990 (2021) Part X Balance Sheet

Par	τχ	Balance Sneet		=				
		Check if Schedule O contains a response or	note to any line	in this Part X		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				16,316,951.	1	39,347,436.
	2	Savings and temporary cash investments				45,000.	2	90,000.
	3	Pledges and grants receivable, net				1,463,484.	3	1,928,625.
	4	Accounts receivable, net					4	
	5	Loans and other receivables from any current			·····			
		trustee, key employee, creator or founder, su						
		controlled entity or family member of any of t					5	
	6	Loans and other receivables from other disqualified persons (as defined						
		under section 4958(f)(1)), and persons descril	oed in section 4	1958(c)(3)(B)	[6	
S	7	Notes and loans receivable, net					7	
Assets	8	Inventories for sale or use					8	
As	9	Donat alid according to a state of the state				300.	9	0.
	10a	Land, buildings, and equipment: cost or othe						
		basis. Complete Part VI of Schedule D		117	,463.			
	b	Less: accumulated depreciation		60	,606.	60,375.	10c	56,857.
	11	Investments - publicly traded securities				137,809,863.	11	125,557,088.
	12	Investments - other securities. See Part IV, Iir				97,970.	12	97,970.
	13	Investments - program-related. See Part IV, lii					13	
	14	Intangible assets					14	
	15	Other assets. See Part IV, line 11					15	
	16	Total assets. Add lines 1 through 15 (must e				155,793,943.	16	167,077,976.
	17	Accounts payable and accrued expenses			L	471.	17	15,750.
	18	Grants payable				7,476,994.	18	12,138,650.
	19	Deferred revenue					19	
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Comple		hadula D			21	
φ	22	Loans and other payables to any current or fo	ormer officer, di	rector,				
i <u>t</u> i		trustee, key employee, creator or founder, su	bstantial contri	butor, or 35%				
Liabilities		controlled entity or family member of any of t	hese persons		L		22	
=	23	Secured mortgages and notes payable to uni	related third pa	rties	L		23	
	24	Unsecured notes and loans payable to unrela	ated third partie	s	L		24	
	25	Other liabilities (including federal income tax,	payables to rel	ated third				
		parties, and other liabilities not included on li	nes 17-24). Cor	nplete Part X				
		of Schedule D			L	9,392,914.	25	17,117,810.
	26	Total liabilities. Add lines 17 through 25		<u></u>		16,870,379.	26	29,272,210.
.		Organizations that follow FASB ASC 958, or	heck here	X				
ces		and complete lines 27, 28, 32, and 33.						
lan	27					138,923,564.	27	137,805,766.
Ba	28	Net assets with donor restrictions			L		28	
un		Organizations that do not follow FASB ASC	C 958, check h	ere 🕨 📖				
Ē		and complete lines 29 through 33.						
(S)	29	Capital stock or trust principal, or current fun					29	
Se	30	Paid-in or capital surplus, or land, building, or					30	
(^ '			Charles and a second Alle	or fundo			31	
t As	31	Retained earnings, endowment, accumulated			·····- -			
Net Assets or Fund Balances	31 32 33	Retained earnings, endowment, accumulated Total net assets or fund balances				138,923,564. 155,793,943.	32 33	137,805,766. 167,077,976.

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	262,	928,	219.
2	Total expenses (must equal Part IX, column (A), line 25)	2	241,	646,	483.
3	Revenue less expenses. Subtract line 2 from line 1	3	21,	281,	736.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	138,	923,	564.
5	Net unrealized gains (losses) on investments	5	-22,	019,	664.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-	379,	870.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	137,	805,	766.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Employer identification number** COMMUNITIES FOUNDATION OF OKLAHOMA 73-1396320 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9,438,580.	9,360,466.	11,700,586.	67,258,231.	254,745,204.	352,503,067.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	9,438,580.	9,360,466.	11,700,586.	67,258,231.	254,745,204.	352,503,067.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						352,503,067.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	9,438,580.	9,360,466.	11,700,586.	67,258,231.	254,745,204.	352,503,067.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,997,646.	2,415,093.	2,462,979.	2,229,276.	2,462,569.	11,567,563.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						364,070,630.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	1,881,227.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					>
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2021 (li	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	96.82 %
15	Public support percentage from 2020	Schedule A, Part I	I, line 14			15	87.61 %
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2020. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			>
17a	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c				
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pul	olicly supported or	ganization		▶□
b	10% -facts-and-circumstances test	- 2020. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	zation	>
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	ı, 16b, 17a, or 17b	, check this box a	nd see instructions	· >
						Cabadula A	(Form 990) 2021

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fir	rst, second, third, f	fourth, or fifth tax y	year as a section 5	01(c)(3) organization	on,
_			-				>
	ction C. Computation of Publi						
	Public support percentage for 2021 (li			column (f))		15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Inves					T .= I	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2			Para d 4 1 Para		0.1/00/	%
19a	33 1/3% support tests - 2021. If the						/ is not
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19a	a, or 19b, check th	ns box and see ins	tructions	▶Ш

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Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
20		
3a		
3b		
20		
3c		
4a		
Ala		
4b		
4c		
5a		
5b		
5c		
6		
7		
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8		
9a		
34		
9b		
0-		
9c		
9c		
9c 10a		

Pa	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			l
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
•	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see
	inate actional	, 5	5 9-	`

Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ea	xempt purposes	1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	· · · · · · ·	4	
5	Qualified set-aside amounts (prior IRS approval required -	provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.	3	8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
	and a division division by mile a division in	(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2021	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
ī	Carryover from 2016 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater	r		
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
-	LAVEGO HUHLAUA I			

Part VI	Supplemental Information Design and the second seco
T dit VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Schedule B (Form 990) (2021)

Employer identification number

COM	MUNITIES FOUNDATION OF OKLAHOMA	73-1396320
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	\overline{X} 501(c)(3) (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	
	s covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) a contributor, during	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 1. Complete Parts I and II.	d that received from any one
contributor, during literary, or education	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, scional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (end) instead of the contributor name and address), II, and III.	entific,
year, contributions is checked, enter h purpose. Don't cor	a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious applete any of the parts unless the General Rule applies to this organization because it refer etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>
Caution: An organization th answer "No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, g requirements of Schedule B (Form 990).	orm 990), but it must

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

COMMUNITIES FOUNDATION OF OKLAHOMA

73-1396320

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.

Schedule B (Form 990) (2021) Page **3**

Name of organization Employer identification number

COMMUNITIES FOUNDATION OF OKLAHOMA 73-1396320

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

Schedule B (Form 990) (2021) Page **4**

Name of organization **Employer identification number** COMMUNITIES FOUNDATION OF OKLAHOMA 73-1396320 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 info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

COMMUNITIES FOUNDATION OF OKLAHOMA

Employer identification number

73-1396320

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		er Si	milar Funds or	Accour	nts. Complete if	the
	organization anomorous yes on year to the second active, mile	(a) Donor ac	lvised	d funds	(b) Fur	nds and other acco	ounts
1	Total number at end of year			66			869
2	Aggregate value of contributions to (during year)			2,623,699.		251	,173,293.
3	Aggregate value of grants from (during year)			4,072,774.		229	,922,883.
4	Aggregate value at end of year			36,882,900.		122	,997,352.
5	Did the organization inform all donors and donor advisors in w	riting that the asset	s hel	d in donor advised f	unds		
	are the organization's property, subject to the organization's e	xclusive legal contr	ol?			X Yes	☐ No
6	Did the organization inform all grantees, donors, and donor ad	visors in writing tha	ıt gra	nt funds can be use	d only		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or fo	or any	other purpose con	ferring		
	impermissible private benefit?						No No
Par	t II Conservation Easements. Complete if the organic	anization answered	"Yes	on Form 990, Part	IV, line 7		
1	Purpose(s) of conservation easements held by the organization	n (check all that app	oly).				
	Preservation of land for public use (for example, recreati	on or education)		Preservation of a h	istorically	important land ar	ea
	Protection of natural habitat			Preservation of a c	ertified hi	storic structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation cor	ntribu	tion in the form of a	conserva		
	day of the tax year.					Held at the End of	the Tax Year
а	Total number of conservation easements				2a		
b							
С	Number of conservation easements on a certified historic structure				2c		
d	Number of conservation easements included in (c) acquired af						
	listed in the National Register				2d		
3	Number of conservation easements modified, transferred, release	ased, extinguished,	or te	erminated by the org	anization	during the tax	
	year ▶						
4	Number of states where property subject to conservation ease		_				
5	Does the organization have a written policy regarding the period						
	violations, and enforcement of the conservation easements it h					Yes	L No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violation	s, and	d enforcing conserva	ation ease	ements during the	year
_							
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and	a eni	ording conservation	easemen	its during the year	
	▶ \$ Does each conservation easement reported on line 2(d) above	action, the requirer	nonto	of coation 170(b)(4)	\/D\/i\		
8						Yes	No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation						NO
9	balance sheet, and include, if applicable, the text of the footnot			•			
	organization's accounting for conservation easements.	ote to the organizati	0115	iii ai iciai statements	triat desc	cribes trie	
Par	t III Organizations Maintaining Collections of	Art, Historical	Trea	sures, or Othe	r Simila	r Assets.	
	Complete if the organization answered "Yes" on Form 9	-		,			
1a	If the organization elected, as permitted under FASB ASC 958		reve	nue statement and l	palance s	heet works	
	of art, historical treasures, or other similar assets held for publi	•					
	service, provide in Part XIII the text of the footnote to its finance	•					
b	If the organization elected, as permitted under FASB ASC 958				nce sheet	t works of	
	art, historical treasures, or other similar assets held for public e	•					
	provide the following amounts relating to these items:	,	,			,	
	(i) Revenue included on Form 990, Part VIII, line 1				•	\$	
	(ii) Assets included in Form 990, Part X					\$	
2	If the organization received or held works of art, historical treas				in, provide	e	
	the following amounts required to be reported under FASB AS				, ,		
а	Revenue included on Form 990, Part VIII, line 1				▶	\$	
	Assets included in Form 990, Part X					\$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Par	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or Othe	er Simila	r Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make	significant	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further th	e organization's exe	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o						_		
_	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes" o	n Form 990), Part IV,	ine 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi						7		
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			1			
							Amount		
	Beginning balance								
	Additions during the year								—
е	Distributions during the year								—
f	Ending balance						7	$\overline{}$	
	Did the organization include an amount on Fo				•	L	Yes	\vdash	No
Par	If "Yes," explain the arrangement in Part XIII.								
Fai	t V Endowment Funds. Complete i	the organization an				voare back	(a) Four	voore h	
4.	Danisaria a of consultation of		(b) Prior year	(c) Two years back 30,418,078.	-	years back		191,1	
	Beginning of year balance	42,419,366. 3,961,181.	31,308,457. 3,827,171.	<u> </u>	 	81,667.		569,6	
	Contributions	-4,336,077.	9,371,373.		1	76,532. 325,390.		877,7	
	Net investment earnings, gains, and losses	1,668,550.	1,649,651.	-	 	21,864.			
	Grants or scholarships	1,000,330.	1,049,031.	1,309,130.	1,2	21,004.	Ι,	051,7	
е	Other expenditures for facilities								
	and programs	533,953.	437,984.	353,562.	3	43,647.		305,1	11
	Administrative expenses	39,841,967.				18,078.		281,6	
g 2	End of year balance Provide the estimated percentage of the curr			•	00,1	, .,.,			<u> </u>
	Board designated or quasi-endowment	100	%	y neid as.					
b	Permanent endowment	%							
·	The percentages on lines 2a, 2b, and 2c sho	* =							
За	Are there endowment funds not in the posse	•	ition that are held an	nd administered for t	he organiz	ation			
ou	by:	oolon or the organiza	ation that are field ar	ia aariii ilotoroa for t	ino organiz	ation		Yes	No
	(i) Unrelated organizations						3a(i)		x
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the								_
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.				
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	Accumulat	ed	(d) Book	value	
_		basis (investn		1 ' '	epreciation	I			
1a	Land								_
	Buildings								
	Leasehold improvements								
	Equipment			117,463.	60,	606.		56,8	57.
	Other								
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. column (B). line 10	0c.)		ightharpoons		56,8	57.
				-		Schodulo	D /Form	000) 2	1001

Schedule D (Form 990) 2021 COMMUNITIES FOUND	ATION OF OKLAHOMA		73-1396320	Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line (b) Book value			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or el	nd-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.				
	n Form 000 Dort IV line	11a Cas Form 000 Dort V line 12		
Complete if the organization answered "Yes" of		•	ad af waar markat	. volue
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	iu-oi-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
	Fa 000 Dart IV line	11d Con Forms 000 Port V line 15		
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	(h) D1	
(a) L	Description		(b) Book	value
<u>(1)</u>			+	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		<u> </u>	
Part X Other Liabilities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2		
1. (a) Description of liability			(b) Book	value
(1) Federal income taxes				
(2) REFUNDABLE ADVANCES			17,	117,810
(3)			1	
(4)			1	
(5)				

(6) (7) (8) 17,117,810. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part :	XI Reconciliation of Revenue per Audited Financial Sta		Revenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.	I		249 765 691
				1	248,765,681.
	mounts included on line 1 but not on Form 990, Part VIII, line 12:	اما	22 010 664		
	let unrealized gains (losses) on investments		-22,019,664.		
	lonated services and use of facilities				
	lecoveries of prior year grants Other (Describe in Part XIII.)	1	8,155,230.		
				2e	-13,864,434.
	dd lines 2a through 2d ubtract line 2e from line 1			3	262,630,115.
	mounts included on Form 990, Part VIII, line 12, but not on line 1:			3	202,000,220.
	envestment expenses not included on Form 990, Part VIII, line 7b	4a	298,104.		
	other (Describe in Part XIII.)				
	dd lines 4a and 4b			4c	298,104.
					262,928,219.
Part	otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12. XII Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per R	eturn.	, ,
	Complete if the organization answered "Yes" on Form 990, Part IV, lir				
1 T	otal expenses and losses per audited financial statements			1	239,591,080.
	mounts included on line 1 but not on Form 990, Part IX, line 25:				
a D	onated services and use of facilities	2a			
	rior year adjustments				
	other losses				
	other (Describe in Part XIII.)				
e A	dd lines 2a through 2d			2e	0.
3 S	ubtract line 2e from line 1			3	239,591,080.
	mounts included on Form 990, Part IX, line 25, but not on line 1:				
	vestment expenses not included on Form 990, Part VIII, line 7b		298,104.		
b C	other (Describe in Part XIII.)	4b	1,757,299.		
	dd lines 4a and 4b		ľ	4c	2,055,403.
5 T	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		5	241,646,483.
	XIII Supplemental Information.				
	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			; Part X, I	ine 2; Part XI,
lines 20	I and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional inform	ation.		
PART 1	KI LINE 2D - OTHER ADJUSTMENTS:				
	,				
AGENCY	TRANSFERS SUBJECT TO FAS 136	8 155 230.			
		, <u>, </u>			
PART X	KII, LINE 4B - OTHER ADJUSTMENTS:				
AGENCY	TRANSFERS SUBJECT TO FAS 136	1,757,299.			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

2021
Open to Public

Inspection

Name of the organization	OURDANION OF A	OKI A HOMA					Employer identification number
		DKLAHOMA					/3-1396320
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section (f) Amount of (ff applicable) (P) Amount of (ff appl							
					anization answered "Y	es" on Form 990, Part	t IV, line 21, for any
1 (a) Name and address of organization	1	(c) IRC section	(d) Amount of	(e) Amount of noncash	valuation (book, FMV, appraisal,		1
1301 W. MAIN STREET	73-1151612	501(C)(3)	9,920.	0.			GENERAL OPERATIONS
1133 N ROBINSON AVE	73-0928288	501(C)(3)	25,000.	0.			GENERAL OPERATIONS
809 WEST CEDAR	73-0796096	501(C)(3)	9,298.	0.			GENERAL OPERATIONS
PO BOX 21	73-6105956	501(C)(3)	9,359.	0.			GENERAL OPERATIONS
	26-2895165	501(C)(3)	40,000.	0.			GENERAL OPERATIONS
ANNA'S HOUSE FOUNDATION 1101 N BRYANT EDMOND, OK 73034	33-1203679		25,150.	0.			GENERAL OPERATIONS
2 Enter total number of section 501(c)(3) a3 Enter total number of other organization	_	-	ne line 1 table				

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
APACHE HISTORICAL SOCIETY P.O. BOX 101 APACHE, OK 73006	73-0936761	501(C)(3)	10,000.	0.			GENERAL OPERATIONS		
APACHE REGIONAL FOUNDATION INC PO BOX 756 APACHE, OK 73006	27-2797382	501(C)(3)	20,000.	0.			GENERAL OPERATIONS		
APIS HOLDINGS, LLC 2269 S ROCKFORD AVENUE TULSA, OK 74114	83-2987630	501(C)(3)	9,600.	0.			GENERAL OPERATIONS		
ASSISTANCE LEAGUE OF NORMAN 809 WALL STREET NORMAN, OK 73026	73-0927199	501(C)(3)	33,210.	0.			GENERAL OPERATIONS		
BELLA FOUNDATION P.O. BOX 20035 OKLAHOMA CITY, OK 73156	20-5781826	501(C)(3)	32,500.	0.			GENERAL OPERATIONS		
BLACKWELL OKLAHOMA COMMUNITY FOUNDATION INC - PO BOX 514 - BLACKWELL, OK 74631-0514	73-1388218	501(C)(3)	6,786.	0.			GENERAL OPERATIONS		
BLACKWELL PUBLIC SCHOOL FOUNDATION PO BOX 151 BLACKWELL, OK 74631	73-1330442	501(C)(3)	7,079.	0.			GENERAL OPERATIONS		
BOYS AND GIRLS CLUB OF OKLAHOMA COUNTY - PO BOX 18701 - OKLAHOMA CITY, OK 73154	73-1472202	501(C)(3)	25,000.	0.			GENERAL OPERATIONS		
BRIDGES 1670 N. STUBBEMAN NORMAN, OK 73069	73-1466304	501(C)(3)	167,810.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	, ag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRISTOW EDUCATION FOUNDATION INC							
PO BOX 531							
BRISTOW, OK 74010-0531	73-1450789	501(C)(3)	20,533.	0.			GENERAL OPERATIONS
DDOGY MDANGDODMANTON							
BROCK TRANSPORTATION 3025 INDEPENDENCE DRIVE STE. C							
LIVERMORE, CA 94551	94-3279643	501(C)(3)	9,965.	0.			GENERAL OPERATIONS
ETVERMONE, ON 51331	31 32,3013	301(0)(3)	3,303.	•			
BURLINGTON EDUCATION FOUNDATION							
P. O. BOX 17 401 MAIN ST.							
BURLINGTON, OK 73722	73-1536760	501(C)(3)	11,729.	0.			GENERAL OPERATIONS
CALM WATERS							
501 N WALKER AVE SUITE 140				_			
OKLAHOMA CITY, OK 73102	73-1561707	501(C)(3)	13,825.	0.			GENERAL OPERATIONS
CALVARY TEMPLE							
PO BOX 564							
CYRIL, OK 73029	59-3767667	501(C)(3)	20,000.	0.			GENERAL OPERATIONS
			, -				
CAMERON UNIVERSITY							
2800 W. GORE BLVD							
LAWTON, OK 73505		501(C)(3)	17,250.	0.			GENERAL OPERATIONS
CASA FOR CHILDREN/MUSKOGEE							
419 W. BROADWAY ST.	72 1407271	E01/G)/3)	F 3F1				GENERAL OPERATIONS
MUSKOGEE, OK 74401	73-1497371	501(C)(3)	5,351.	0.			GENERAL OPERATIONS
CASA OF CHEROKEE COUNTRY							
P.O. BOX 1788							
TAHLEQUAH, OK 74465	73-1478988	501(C)(3)	27,889.	0.			GENERAL OPERATIONS
			, ,	-			
CASA OF OKLAHOMA COUNTY							
1608 NW EXPRESSWAY SUITE 101							
OKLAHOMA CITY, OK 73118	13-4364692	501(C)(3)	28,379.	0.			GENERAL OPERATIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CASADY SCHOOL 9500 N. PENNSYLVANIA AVE OKLAHOMA CITY, OK 73120	73-0587209	501(C)(3)	324,361.	0.			GENERAL OPERATIONS		
CENTER FOR HOUSING SOLUTIONS PO BOX 4628 TULSA, OK 74159	84-4733422	501(C)(3)	300,000.	0.			GENERAL OPERATIONS		
CENTER OF FAMILY LOVE P.O. BOX 245 OKARCHE, OK 73762	73-1130455	501(C)(3)	10,000.	0.			GENERAL OPERATIONS		
CENTRAL OKLAHOMA HUMANE SOCIETY PO BOX 18471 OKLAHOMA CITY, OK 73154	20-8446621	501(C)(3)	15,000.	0.			GENERAL OPERATIONS		
CHICKASHA AREA ARTS COUNCIL P.O. BOX 505 CHICKASHA, OK 73018	73-1385017	501(C)(3)	20,000.	0.			GENERAL OPERATIONS		
CHISHOLM TRAIL ARTS COUNCIL, INC. 810 W. WALNUT DUNCAN, OK 73533	73-1028488	501(C)(3)	11,063.	0.			GENERAL OPERATIONS		
CHISHOLM TRAIL CHURCH OF CHRIST 3204 W BEECH AVE DUNCAN, OK 73533	73-1194152	501(C)(3)	10,248.	0.			GENERAL OPERATIONS		
CHISHOLM TRAIL HERITAGE CENTER ASSOCIATION - 1000 CHISHOLM TRAIL PARKWAY - DUNCAN, OK 73533	14-1896825	501(C)(3)	224,633.	0.			GENERAL OPERATIONS		
CHISHOLM TRAIL MUSEUM INC 605 ZELLERS AVE KINGFISHER, OK 73750	73-0744386	501(C)(3)	6,363.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHRIST THE KING CATHOLIC CHURCH 8005 DORSET DRIVE NICHOLS HILLS, OK 73120	73-0717670	501(C)(3)	9,500.	0.			GENERAL OPERATIONS		
CHRISTIAN HELPING HANDS PO BOX 536 COMANCHE, OK 73529	73-1449013	501(C)(3)	147,000.	0.			GENERAL OPERATIONS		
CHRISTMAS DIRECT OKC, INC. 607 N. BROADWAY OKLAHOMA CITY, OK 73102	46-2681614	501(C)(3)	77,520.	0.			GENERAL OPERATIONS		
CIMARRON CONSTRUCTION COMPANY 3501 NE 63RD ST OKLAHOMA CITY, OK 73121	73-1194867	501(C)(3)	121,880.	0.			GENERAL OPERATIONS		
CITY CARE 2000 N CLASSEN BLVD BOX 3050 OKLAHOMA CITY, OK 73106	26-0420981	501(C)(3)	400,000.	0.			GENERAL OPERATIONS		
CITY CARE, INC. 6001 N CLASSEN BOULEVARD BUILDING OKLAHOMA CITY, OK 73118	5 73-1497381	501(C)(3)	8,700.	0.			GENERAL OPERATIONS		
CITY OF TAHLEQUAH 401 S. WATER AVE TAHLEQUAH, OK 74464	73-6005455	501(C)(3)	85,000.	0.			GENERAL OPERATIONS		
CLAREMORE MUSEUM OF HISTORY, INC. 121 N. WEENONAH AVENUE CLAREMORE, OK 74017	81-1207692	501(C)(3)	7,494.	0.			GENERAL OPERATIONS		
CLEVELAND COUNTY HABITAT FOR HUMANITY - 1835 INDUSTRIAL BLVD NORMAN, OK 73069	73-1422362	501(C)(3)	1,180,000.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CLINTON PUBLIC SCHOOL FOUNDATION PO BOX 822 CLINTON, OK 73601	73-1302466	501(C)(3)	37,212.	0.			GENERAL OPERATIONS		
CLUTCH CONSULTING GROUP LLC 9450 PINECROFT SUITE 9851 THE WOODLANDS, TX 77387	83-1576612	501(C)(3)	60,000.	0.			GENERAL OPERATIONS		
COLORADO SCHOOL OF MINES-FINANCIAL AID - 1600 MAPLE STREET - GOLDEN, CO 80401	84-6000551	501(C)(3)	7,000.	0.			GENERAL OPERATIONS		
COMMUNITY DEVELOPMENT SUPPORT ASSOCIATION - 114 S INDEPENDENCE - ENID, OK 73701	73-1116755	501(C)(3)	110,000.	0.			GENERAL OPERATIONS		
COMMUNITY FOUNDATION FOR NANTUCKET P.O. BOX 204 NANTUCKET, MA 02554	13-4316755	501(C)(3)	11,000.	0.			GENERAL OPERATIONS		
COMMUNITY RENEWAL OF POTTAWATOMIE COUNTY - 1000 N. KICKAPOO - SHAWNEE, OK 74801	47-5359151	501(C)(3)	1,100,000.	0.			GENERAL OPERATIONS		
CORBIN, MERZ, & HANEY P.O. BOX 3314 ENID, OK 73702	73-1290711	501(C)(3)	6,056.	0.			GENERAL OPERATIONS		
CREOKS HEALTH SERVICES, INC. PO BOX 700360 TULSA, OK 74170	73-1108774	501(C)(3)	590,000.	0.			GENERAL OPERATIONS		
CROHN'S AND COLITIS FOUNDATION, INC 733 THIRD AVENUE, SUITE 510 - NEW YORK CITY, NY 10017	13-6193105	501(C)(3)	10,000.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	, α,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DARTMOUTH COLLEGE DEVELOPMENT 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	02-0222111	501(C)(3)	30,000.	0.			GENERAL OPERATIONS
DAVIS PUBLIC SCHOOL FOUNDATION PO BOX 333 DAVIS, OK 73030	73-1390242	501(C)(3)	7,615.	0.			GENERAL OPERATIONS
DELTA COMMUNITY ACTION FOUNDATION, INC 308 SW 2ND STREET - LINDSAY, OK 73052	73-0775109		10,000.	0.			GENERAL OPERATIONS
DIRECT PRIMARY CARE OF OKLAHOMA 16416 MUIRFIELD PLACE SUITE A EDMOND, OK 73013	84-4662952	501(C)(3)	10,665.	0.			GENERAL OPERATIONS
DIVERSION HUB, INC. 220 NW 10TH ST OKLAHOMA CITY, OK 73103	84-2538013	501(C)(3)	150,000.	0.			GENERAL OPERATIONS
DOUGLAS EASTSIDE SENIOR CITIZENS CENTER - PO BOX 2082 - DUNCAN, OK 73534	73-1019436	501(C)(3)	10,000.	0.			GENERAL OPERATIONS
DUNCAN PUBLIC SCHOOLS PO BOX 1548 DUNCAN, OK 73534	73-6021226	501(C)(3)	14,701.	0.			GENERAL OPERATIONS
DUNCAN PUBLIC SCHOOLS FOUNDATION P.O. BOX 1882 DUNCAN, OK 73534-1468	73-1341146	501(C)(3)	38,290.	0.			GENERAL OPERATIONS
DUNCAN REGIONAL HOSPITAL HEALTH FOUNDATION - 2210 DUNCAN REGIONAL LOOP ROAD - DUNCAN, OK 73533	20-2772056	501(C)(3)	139,204.	0.			GENERAL OPERATIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
DUNCAN SENIOR CITIZENS CENTER								
1110 N. 7TH STREET								
DUNCAN, OK 73533	73-0775679	501(C)(3)	18,861.	0.			GENERAL OPERATIONS	
-			,					
EAST CENTRAL UNIVERSITY								
1100 EAST 14TH								
ADA, OK 74820		501(C)(3)	32,387.	0.			GENERAL OPERATIONS	
EQUAL JUSTICE INITIATIVE								
122 COMMERCE STREET	62 4425004	504 (5) (2)	10.015					
MONTGOMERY, AL 36104	63-1135091	501(C)(3)	10,015.	0.			GENERAL OPERATIONS	
FIELDS AND FUTURES FOUNDATION								
7001 NW 164TH								
EDMOND, OK 73013	46-4569055	501(C)(3)	68,309.	0.			GENERAL OPERATIONS	
FIRST BAPTIST CHURCH (APACHE)								
PO BOX 327								
APACHE, OK 73006	73-0621888	501(C)(3)	7,500.	0.			GENERAL OPERATIONS	
FIRST BAPTIST CHURCH OF ANADARKO								
700 W PETREE RD								
ANADARKO, OK 73005	73-0676330	501(C)(3)	35,500.	0.			GENERAL OPERATIONS	
FIRST CHRISTIAN CHURCH								
912 W. WALNUT								
DUNCAN, OK 73533	73-0661826	501(C)(3)	6,361.	0.			GENERAL OPERATIONS	
DONCAN, OK 75555	73 0001020	501(0)(5)	0,301.	<u> </u>			GENERAL OFERATIONS	
FIRST UNITED METHODIST CHURCH OF								
ANADARKO - PO BOX 803 - ANADARKO,								
OK 73005		501(C)(3)	7,500.	0.			GENERAL OPERATIONS	
FOOD AND SHELTER INC								
201 REED AVE.								
NORMAN, OK 73071	73-1222111	501(C)(3)	26,163.	0.			GENERAL OPERATIONS	

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FOR THE VILLAGE, INC									
PO BOX 721824									
OKLAHOMA CITY, OK 73172	85-1888230	501(C)(3)	7,500.	0.			GENERAL OPERATIONS		
FORT COBB BAPTIST CHURCH									
PO BOX 87									
FORT COBB, OK 73038	73-0621888	501(C)(3)	11,500.	0.			GENERAL OPERATIONS		
FREEDOM CHURCH									
PO BOX 188									
PIEDMONT, OK 73078	73-1571631	501(C)(3)	19,501.	0.			GENERAL OPERATIONS		
-									
FREEDOM HOUSE FELLOWSHIP									
1091 WEST INDEPENDENCE RD BOX 523									
HEAVENER, OK 74937		501(C)(3)	15,000.	0.			GENERAL OPERATIONS		
FRENCH FAMILY CHARITABLE									
FOUNDATION - 209 FRENCH PARK PLACE	72 1546605	E01/G)/2)	F2 726	0.			GENERAL OPERATIONS		
STE 101 - EDMOND, OK 73034	73-1546685	501(C)(3)	53,736.	0.			GENERAL OPERATIONS		
FRIENDS OF THE DUNCAN PUBLIC									
LIBRARY - 2211 N. HIGHWAY 81 -									
DUNCAN, OK 73533	73-1355845	501(C)(3)	16,194.	0.			GENERAL OPERATIONS		
FRIENDS OF THE WILL ROGERS LIBRARY									
1515 N. FLORENCE AVE									
CLAREMORE, OK 74017	26-0135494	501(C)(3)	13,290.	0.			GENERAL OPERATIONS		
GARRIEL 'G HOHGE									
GABRIEL'S HOUSE P.O. BOX 883									
DUNCAN, OK 73533	73-1573021	501(C)(3)	9,580.	0.			GENERAL OPERATIONS		
Donoin, on 1999	73 1373021	501(6)(5)	5,380.	<u> </u>			PERENTIONS		
GALLION EXCAVATING CO LLC DBA									
TWISTED OAK PRODUCTS - 5649 N									
BRYANT AVENUE - EDMOND, OK 73034	73-1569861	501(C)(3)	69,875.	0.			GENERAL OPERATIONS		

(a) Name and address of	(b) EIN (c) IRO	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(5) = 114	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
SARBER ALUMNI ASSOCIATION							
PO BOX 236							
GARBER, OK 73738-0236	82-2390078	501(C)(3)	10,480.	0.			GENERAL OPERATIONS
,							
GARBER COMMUNITY FOUNDATION							
19907 E. PHILLIPS RD.							
GARBER, OK 73738	73-1551433	501(C)(3)	5,365.	0.			GENERAL OPERATIONS
GRACE CHRISTIAN FELLOWSHIP							
PO BOX 56							
ANADARKO, OK 73005	73-1161618	501(C)(3)	7,500.	0.			GENERAL OPERATIONS
00.110 - 1.110 MONTH - 110.1.00							
GRAND LAKE MENTAL HEALTH							
114 W DELAWARE AVE NOWATA, OK 74048	73-1039733	E01/G\/3\	350,000.	0.			GENERAL OPERATIONS
NOWATA, OR 74040	73-1033733	501(0)(3)	330,000.	0.			GENERAL OFERATIONS
GROUND ROOT DEVELOPMENT LLC							
PO BOX 11042							
OKLAHOMA CITY, OK 73117	43-7239969	501(C)(3)	30,000.	0.			GENERAL OPERATIONS
·							
HALO PROJECT							
401 E. MEMORIAL RD. SUITE 600							
OKLAHOMA CITY, OK 73114	81-3947545	501(C)(3)	14,000.	0.			GENERAL OPERATIONS
HARD LUCK AUTOMOTIVE SERVICES							
161 MURRAY DRIVE			1.5				
CHOCTAW, OK 73020	83-3318265	501(C)(3)	16,500.	0.			GENERAL OPERATIONS
HEARTLAND FORWARD							
PO BOX 2030							
BENTONVILLE, AR 72712	84-2515642	501(C)(3)	10,000.	0.			GENERAL OPERATIONS
	04 2010042	551(5)(5)	10,000.	0.			SELECTED STERMING
HFSD, INC DBA HOWARD-FAIRBAIRN							
SITE DESIGN - 3100 NW 149TH STREET							
- OKLAHOMA CITY, OK 73134	73-1336228	501(C)(3)	29,600.	0.			GENERAL OPERATIONS

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HINTON PUBLIC SCHOOLS 708 N. BROADWAY AVENUE		E04 (G) (2)	10.000						
HINTON, OK 73047		501(C)(3)	12,000.	0.			GENERAL OPERATIONS		
HOLDENVILLE EDUCATION FOUNDATION P.O. BOX 641	90-0539732	501/0)/3)	13,173.	0.			GENERAL OPERATIONS		
HOLDENVILLE, OK 74848	30-0333732	501(0)(3)	13,173.	0.			GENERAL OPERATIONS		
HOLY FAMILY CLASSICAL SCHOOL 820 S BOULDER AVENUE		501/g)/2)	40 501				CENTED A COURT OF COMME		
TULSA, OK 74119		501(C)(3)	49,581.	0.			GENERAL OPERATIONS		
HOMELESS ALLIANCE 1724 NW 4TH STREET OKLAHOMA CITY, OK 73106	11-3718005	501/0)/3)	1,132,872.	0.			GENERAL OPERATIONS		
OKIMIOMA CITT, OK 75100	11 3/10003	301(0)(3)	1,132,072.	<u> </u>			GENERAL OF ERATIONS		
I'M-POSSIBLE, INC., DBA THE MISSION - 925 WEST ARKANSAS -									
DURANT, OK 74701		501(C)(3)	243,000.	0.			GENERAL OPERATIONS		
INDIANA UNIVERSITYPURDUE UNIVERSITY INDIANAPOLIS (SCHOLARSHIPS) - PO BOX 6035 -									
INDIANAPOLIS, IN 46206-6035		501(C)(3)	6,000.	0.			GENERAL OPERATIONS		
INFANT CRISIS SERVICES, INC. 4224 N. LINCOLN BLVD									
OKLAHOMA CITY, OK 73105	73-1378766	501(C)(3)	30,809.	0.			GENERAL OPERATIONS		
JOHNSTON COUNTY VETERANS CENTER INC - PO BOX 71 - TISHOMINGO, OK									
73460	90-0718334	501(C)(3)	10,000.	0.			GENERAL OPERATIONS		
KINGFISHER COMMUNITY COLLABORATIVE, INC 414 HILL	02 0555562	E01/G)/2)	10.000						
DRIVE - KINGFISHER, OK 73750	82-0557760	DOT(C)(3)	10,000.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
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KINGFISHER EDUCATION FOUNDATION PO BOX 24 KINGFISHER, OK 73750	73-1275143	501(C)(3)	41,236.	0.			GENERAL OPERATIONS		
KINGFISHER MEALS ON WHEELS, INC. 201 S. 6TH STREET KINGFISHER, OK 73750	73-1017223	501(C)(3)	10,915.	0.			GENERAL OPERATIONS		
KINGFISHER TRAILS, INC. 110 E. BROADWAY KINGFISHER, OK 73750	33-1041811	501(C)(3)	267,610.	0.			GENERAL OPERATIONS		
KRAMER SCHOOL OF NURSING 2501 N. BLACKWELDER AVE OKLAHOMA CITY, OK 73106		501(C)(3)	25,000.	0.			GENERAL OPERATIONS		
LANGSTON UNIVERSITY PO BOX 668 LANGSTON, OK 73050		501(C)(3)	7,000.	0.			GENERAL OPERATIONS		
LAST FRONTIER COUNCIL BOY SCOUTS 3031 NW 64TH STREET OKLAHOMA CITY, OK 73116	73-0580263	501(C)(3)	7,377.	0.			GENERAL OPERATIONS		
LAWTON PHILHARMONIC SOCIETY, INC. PO BOX 1473 LAWTON, OK 73502	73-6103649	501(C)(3)	13,537.	0.			GENERAL OPERATIONS		
LAWTON PUBLIC SCHOOLS FOUNDATION, INC P.O. BOX 2323 - LAWTON, OK 73502	73-1386496	501(C)(3)	21,683.	0.			GENERAL OPERATIONS		
LEGACY EQUITY MANAGEMENT LLC PO BOX 3105 EDMOND, OK 73083	81-5432583	501(C)(3)	191,556.	0.			GENERAL OPERATIONS		

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LEGAL AID SERVICES OF OKLAHOMA 3800 N. CLASSEN BLVD SUITE 230 OKLAHOMA CITY, OK 73118	73-1022203	501(C)(3)	2,574,255.	0.			GENERAL OPERATIONS	
LIFESQUIRE 811 N. BROADWAY OKLAHOMA CITY, OK 73102	45-3172390	501(C)(3)	54,310.	0.			GENERAL OPERATIONS	
LIGHTHOUSE BEHAVIORAL WELLNESS CENTERS - 901 12TH AVE NW - ARDMORE, OK 73401	73-0618672	501(C)(3)	1,000,000.	0.			GENERAL OPERATIONS	
LWPB ARCHITECTURE 3817 NW EXPRESSWAY SUITE 840 OKLAHOMA CITY, OK 73112	73-0726456	501(C)(3)	70,200.	0.			GENERAL OPERATIONS	
MABEE-GERRER MUSEUM OF ART 1900 W. MACARTHUR DRIVE SHAWNEE, OK 74804	73-1392868	501(C)(3)	8,722.	0.			GENERAL OPERATIONS	
MARY ABBOTT CHILDREN'S HOUSE 251 E SYMMES ST NORMAN, OK 73069-5028	73-1512416	501(C)(3)	7,346.	0.			GENERAL OPERATIONS	
MATRIX MECHANICAL CONTRACTING P.O. BOX 1429 BETHANY, OK 73008	46-0496346	501(C)(3)	9,686.	0.			GENERAL OPERATIONS	
MEALS ON WHEELS 528 E. MAIN STREET NORMAN, OK 73070	73-0931924	501(C)(3)	10,321.	0.			GENERAL OPERATIONS	
MENTAL HEALTH ASSOCIATION OKLAHOMA 5330 EAST 31ST STREET SUITE 1000 TULSA, OK 74135	73-0657931	501(C)(3)	3,452,022.	0.			GENERAL OPERATIONS	

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MERCY HEALTH CENTER FOUNDATION								
13321 NORTH MERIDIAN SUITE 206								
OKLAHOMA CITY, OK 73101	46-3184231	501(C)(3)	15,000.	0.			GENERAL OPERATIONS	
MID-AMERICA CHRISTIAN UNIVERSITY								
3500 S.W. 119TH STREET								
OKLAHOMA CITY, OK 73170	74-1196134	501(C)(3)	7,000.	0.			GENERAL OPERATIONS	
MIDWEST COOLING TOWERS								
1156 E HIGHWAY 19								
CHICKASHA, OK 73018	32-0429810	501(C)(3)	89,785.	0.			GENERAL OPERATIONS	
MISSION MEMBICS IIC								
MISSION METRICS LLC 1142 W MADISON STREET SUITE 2650								
CHICAGO, IL 60607	46-2670478	501(C)(3)	12,000.	0.			GENERAL OPERATIONS	
, 22 3333								
MISSIONARY SUPPORT SERVICES								
PO BOX 15579								
COLORADO SPRINGS, CO 80935	26-3259373	501(C)(3)	7,289.	0.			GENERAL OPERATIONS	
MOORE CHAMBER FOUNDATION								
305 W MAIN STREET								
MOORE, OK 73160	88-1042937	501(C)(3)	26,986.	0.			GENERAL OPERATIONS	
MODE TOWNS TOWN								
MORE FOUNDATION								
301 W. MAIN, SUITE 510 ARDMORE, OK 73401	73-1373231	501/C)/3)	102,237.	0.			GENERAL OPERATIONS	
ARDMORE, OR 75401	75-1575251	501(0)(3)	102,237.	0.			GENERAL OFERALIONS	
MURRAY STATE COLLEGE								
ONE MURRAY CAMPUS								
rishomingo, ok 73460	30-0885267	501(C)(3)	26,500.	0.			GENERAL OPERATIONS	
MUSTANG UNITED METHODIST CHURCH								
P.O. BOX 180								
MUSTANG, OK 73064		501(C)(3)	30,000.	0.			GENERAL OPERATIONS	

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NATIONAL COWBOY & WESTERN HERITAGE MUSEUM - 1700 N. E. 63RD STREET - OKLAHOMA CITY, OK 73111	30-0341029	501(C)(3)	36,000.	0.			GENERAL OPERATIONS		
NATIONAL MARINE SUPPLIERS 2800/2810 SW 2ND AVE FORT LAUDERDALE, FL 33315		501(C)(3)	32,430.	0.			GENERAL OPERATIONS		
NEIGHBORHOOD SERVICES ORGANIZATION, INC 431 SW 11TH STREET - OKLAHOMA CITY, OK 73109	73-0785944	501(C)(3)	25,000.	0.			GENERAL OPERATIONS		
NEIGHBORLY SOFTWARE 3423 PIEDMONT RD NE, 420 ATLANTA, GA 30305	81-0880368	501(C)(3)	942,500.	0.			GENERAL OPERATIONS		
NEW YORK UNIVERSITY (SCHOLARSHIPS) 383 LAFAYETTE STREET, FIRST FLOOR NEW YORK, NY 10003	13-5562308	501(C)(3)	6,000.	0.			GENERAL OPERATIONS		
NEXUS EQUINE INC PO BOX 54572 OKLAHOMA CITY, OK 73154	81-1990122	501(C)(3)	20,000.	0.			GENERAL OPERATIONS		
NORMAN FIREHOUSE ART CENTER 444 SOUTH FLOOD NORMAN, OK 73069	23-7112097	501(C)(3)	10,468.	0.			general operations		
NORMAN PUBLIC SCHOOLS - ATHLETIC DEPARTMENT - 131 S FLOOD AVENUE - NORMAN, OK 73069	73-6021052	501(C)(3)	9,351.	0.			GENERAL OPERATIONS		
NORTHEASTERN STATE UNIVERSITY 601 N GRAND AVE TAHLEQUAH, OK 74464	91-1898417	501(C)(3)	47,000.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
NORTHERN OKLAHOMA COLLEGE								
1220 E. GRAND AVE.								
TONKAWA, OK 74653		501(C)(3)	13,950.	0.			GENERAL OPERATIONS	
NORTHWEST TECHNOLOGY CENTER								
FOUNDATION - 1801 11TH STREET -								
ALVA, OK 73717-9607	73-1393251	501(C)(3)	17,674.	0.			GENERAL OPERATIONS	
NORTHWESTERN OKLAHOMA STATE								
UNIVERSITY - 709 OKLAHOMA								
BOULEVARD - ALVA, OK 73717	73-0947945	501(C)(3)	23,444.	0.			GENERAL OPERATIONS	
•			,					
OK LIBRARY ASSOCIATION								
1190 MERAMEC STATION RD SUITE 207								
BALLWIN, MO 63021	73-1044902	501(C)(3)	16,248.	0.			GENERAL OPERATIONS	
OKC GOOD, INC.								
12208 DOVER DRIVE				_				
OKLAHOMA CITY, OK 73162	47-2507054	501(C)(3)	14,950.	0.			GENERAL OPERATIONS	
OKC MUSEUM OF ART								
415 COUCH DRIVE								
OKLAHOMA CITY, OK 73102	73-0528431	501(C)(3)	40,385.	0.			GENERAL OPERATIONS	
,								
OKLAHOMA ACADEMY FOR STATE GOALS								
P.O. BOX 968								
NORMAN, OK 73070	73-1255400	501(C)(3)	85,986.	0.			GENERAL OPERATIONS	
OKLAHOMA BAPTIST UNIVERSITY								
500 WEST UNIVERSITY BOX 61207								
SHAWNEE, OK 74804	73-0579264	501(C)(3)	25,000.	0.			GENERAL OPERATIONS	
ONI VIONA GAMMI EMEN'S POSTADAMION								
OKLAHOMA CATTLEMEN'S FOUNDATION								
PO BOX 82395	73-1135528	501(C)(3)	31,530.	0.			GENERAL OPERATIONS	
OKLAHOMA CITY, OK 73148	13-1133328	POT(C)(3)	1 31,530.	ı			GENERAL OFFRALIONS	

Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OKLAHOMA CHRISTIAN UNIVERSITY PO BOX 11000 OKLAHOMA CITY, OK 73136	73-0555460	501(C)(3)	9,400.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY BEAUTIFUL 3535 N. CLASSEN BLVD OKLAHOMA CITY, OK 73118	73-0785200	501(C)(3)	51,000.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY COMMUNITY COLLEGE 7777 S. MAY AVE OKLAHOMA CITY, OK 73159-4444		501(C)(3)	8,000.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY FAMILY JUSTICE CENTER INC - 1140 N HUDSON - OKLAHOMA CITY, OK 73103	47-5502128	501(C)(3)	402,458.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY HOUSING AUTHORITY 1700 NE 4TH STREET OKLAHOMA CITY, OK 73117	73-0751972	501(C)(3)	180,000.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY PLANNING DEPARTMENT 420 W. MAIN STREET, STE. 900 OKLAHOMA CITY, OK 73102		501(C)(3)	30,000.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY PUBLIC SCHOOLS FOUNDATION - 431 WEST MAIN STREET, SUITE E - OKLAHOMA CITY, OK 73102	73-1222182	501(C)(3)	7,500.	0.			GENERAL OPERATIONS		
OKLAHOMA CITY UNIVERSITY 2501 N. BLACKWELDER OKLAHOMA CITY, OK 73106	73-0579265	501(C)(3)	18,173.	0.			GENERAL OPERATIONS		
OKLAHOMA COUNTY DRUG COURT 320 ROBERT S. KERR SUITE 400 OKLAHOMA CITY, OK 73102		501(C)(3)	85,645.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
OKLAHOMA FOUNDATION FOR EXCELLENCE 101 PARK AVE, SUITE 420 OKLAHOMA CITY, OK 73102	73-1260595	501(C)(3)	5,623.	0.			GENERAL OPERATIONS	
OKLAHOMA MESSAGES PROJECT 1409 NW 150TH STREET EDMOND, OK 73013	27-3220448	501(C)(3)	9,795.	0.			GENERAL OPERATIONS	
OKLAHOMA STATE UNIVERSITY 113 STUDENT UNION STILLWATER, OK 74078	73-1383996	501(C)(3)	270,773.	0.			GENERAL OPERATIONS	
OKLAHOMA STATE UNIVERSITY - INSTITUTE OF TECHNOLOGY - 1801 E. 4TH - OKMULGEE, OK 74447	73-1383996	501(C)(3)	7,500.	0.			GENERAL OPERATIONS	
OKLAHOMA STATE UNIVERSITY FOUNDATION - PO BOX 1749 - STILLWATER, OK 74076-1749	73-6097060	501(C)(3)	12,426.	0.			GENERAL OPERATIONS	
OKLAHOMA UNITED METHODIST CIRCLE OF CARE, INC 1501 NW 24TH ST. SUITE 214 - OKLAHOMA CITY, OK 73106	73-0975224	501(C)(3)	247,863.	0.			GENERAL OPERATIONS	
OKLAHOMA YOUTH EXPOSITION, INC. 21 LAND RUSH ST OKLAHOMA CITY, OK 73107	73-1620710	501(C)(3)	72,546.	0.			GENERAL OPERATIONS	
ORAL ROBERTS UNIVERSITY 7777 S. LEWIS AVE. TULSA, OK 74170	73-0739626	501(C)(3)	11,750.	0.			GENERAL OPERATIONS	
ORGANIZATIONAL CFO, LLC 612 N KATE AVENUE OKLAHOMA CITY, OK 73117	46-4524731	501(C)(3)	33,375.	0.			GENERAL OPERATIONS	

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
P&K EQUIPMENT, INC.									
604 EASTGATE STREET									
STILLWATER, OK 74074	73-1259841	501(C)(3)	50,971.	0.			GENERAL OPERATIONS		
PATHS TO INDEPENDENCE									
4620 EAST FRANK PHILLIPS BOULEVARD									
BARTLESVILLE, OK 74006	45-4111813	501(C)(3)	100,000.	0.			GENERAL OPERATIONS		
PAULS VALLEY FOUNDATION FOR									
ACADEMIC EXCELLENCE INC - PO BOX	72 1262011	E01/C)/2)	22 202	0.			GENERAL OPERATIONS		
63 - PAULS VALLEY, OK 73075-0063	73-1362811	501(C)(3)	23,382.	0.			GENERAL OPERATIONS		
PEPPERS RANCH, INC									
3172 PEPPERS RANCH DRIVE									
GUTHRIE, OK 73044	73-1608380	501(C)(3)	5,343.	0.			GENERAL OPERATIONS		
PILLAR CONTRACTING, INC.									
7408 NW 85TH STREET OKLAHOMA CITY, OK 73132	73-1503751	501(C)(3)	571,822.	0.			GENERAL OPERATIONS		
OKIMIOMA CITT, OK 73132	73 1303731	301(0)(3)	371,022.	<u> </u>			GENERAL OFERALIONS		
PIVOT, INC.									
201 N.E. 50TH STREET									
OKLAHOMA CITY, OK 73105-1811	73-0940217	501(C)(3)	101,000.	0.			GENERAL OPERATIONS		
POSITIVE TOMORROWS, INC. PO BOX 61190									
OKLAHOMA CITY, OK 73146	73-1393438	501 (C) (3)	385,000.	0.			GENERAL OPERATIONS		
OKLAHOMA CITT, OK 75140	73-1393430	501(0)(3)	303,000.	<u> </u>			GENERAL OFERALIONS		
POTTAWATOMIE COUNTY JR. LIVESTOCK									
SHOW - PO BOX 234 - TECUMSEH, OK									
74873	73-6006409	501(C)(3)	8,144.	0.			GENERAL OPERATIONS		
PRESTIGE POOLS AND SPAS, INC									
PO BOX 2224 EDMOND, OK 73083	73-1559618	501(C)(3)	12,415.	0.			GENERAL OPERATIONS		
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Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
REAL MINISTRIES FOUNDATION DBA REAL SINGLE MOMS - PO BOX 721853 - OKLAHOMA CITY, OK 73172	46-4948947	501(C)(3)	115,000.	0.			GENERAL OPERATIONS		
RED ANDREWS CHRISTMAS DINNER FOUNDATION - 2513 SW 124TH STREET - OKLAHOMA CITY, OK 73170	80-0865847	501(C)(3)	11,204.	0.			GENERAL OPERATIONS		
RED ROCK BEHAVIORAL HEALTH SERVICES - 4400 N. LINCOLN BLVD OKLAHOMA CITY, OK 73105	73-6111618	501(C)(3)	120,000.	0.			GENERAL OPERATIONS		
REGIONAL FOOD BANK OF OKLAHOMA PO BOX 270968 OKLAHOMA CITY, OK 73137-0968	73-1100380	501(C)(3)	57,494.	0.			GENERAL OPERATIONS		
RETIRED SENIOR VOLUNTEER PROGRAM OF ENID - 602 S. VAN BUREN - ENID, OK 73703	73-1136382	501(C)(3)	300,000.	0.			GENERAL OPERATIONS		
RETURN TO HOPE 1044 E. PINE STREET TULSA, OK 74106	84-4153241	501(C)(3)	75,000.	0.			GENERAL OPERATIONS		
RICHBURG STONE AND SUPPLY CO, INC. 7000 N SHARTEL AVENUE OKLAHOMA CITY, OK 73116	73-1509277	501(C)(3)	6,392.	0.			GENERAL OPERATIONS		
RITCHIE BROS. IRON PLANET 5667 GIBRALTAR DRIVE SUITE 200 PLEASANTON, CA 94588		501(C)(3)	46,540.	0.			GENERAL OPERATIONS		
ROADBACK, INC. 114 SW A AVE LAWTON, OK 73501	73-0969022	501(C)(3)	210,000.	0.			GENERAL OPERATIONS		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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RUTGERS UNIVERSITY (SCHOLARSHIPS)										
620 GEORGE STREET ROOM 138										
NEW BRUNSWICK, NJ 08901		501(C)(3)	6,000.	0.			GENERAL OPERATIONS			
and the second			1 7,555	•						
SAVANNAH STATION THERAPEUTIC										
RIDING PROGRAM - P.O. BOX 852084 -										
YUKON, OK 73085	47-1943254	501(C)(3)	37,500.	0.			GENERAL OPERATIONS			
,			,							
SAYRE PUBLIC SCHOOL FOUNDATION										
129 EAST MAIN STREET										
SAYRE, OK 73662	73-1439751	501(C)(3)	36,481.	0.			GENERAL OPERATIONS			
SEMINOLE CHAMBER OF COMMERCE										
PO BOX 1190										
SEMINOLE, OK 74818	73-0441200	501(C)(3)	9,810.	0.			GENERAL OPERATIONS			
SEMINOLE HIGH SCHOOL										
PO BOX 1031		504 (5) (2)	10.000							
SEMINOLE, OK 74818		501(C)(3)	10,000.	0.			GENERAL OPERATIONS			
SEMINOLE HUMANE SOCIETY										
300 WEST COLLEGE										
SEMINOLE, OK 74868	73-1337806	501(C)(3)	25,000.	0.			GENERAL OPERATIONS			
DIMINOLI, OK 14000	73 1337000	301(0)(3)	25,000.	٠.			CHARLET OF BEATTIONS			
SEMINOLE STATE COLLEGE										
PO BOX 351										
SEMINOLE, OK 74868		501(C)(3)	5,750.	0.			GENERAL OPERATIONS			
,			<u> </u>							
SHARE MEDICAL CENTER FOUNDATION,										
INC PO BOX 727 - ALVA, OK										
, 73717-0727	73-1608371	501(C)(3)	15,984.	0.			GENERAL OPERATIONS			
SHAWNEE BRIDGES OUT OF POVERTY										
1700 N. KICKAPOO										
SHAWNEE, OK 74804	81-5083402	501(C)(3)	101,120.	0.			GENERAL OPERATIONS			

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SHAWNEE EDUCATIONAL FOUNDATION										
PO BOX 3488										
SHAWNEE, OK 74802	73-1344552	501(C)(3)	5,371.	0.			GENERAL OPERATIONS			
SHAWNEE PUBLIC SCHOOLS 1001 N KENNEDY										
SHAWNEE, OK 74801		501(C)(3)	5,412.	0.			GENERAL OPERATIONS			
SIMMONS CENTER FOUNDATION PO BOX 981										
DUNCAN, OK 73534	73-1344774	501(C)(3)	10,000.	0.			GENERAL OPERATIONS			
SISU YOUTH SERVICES 3131 N PENNSYLVANIA AVE OKLAHOMA CITY, OK 73112	46-5678806	501(C)(3)	158,222.	0.			GENERAL OPERATIONS			
SMART START CENTRAL OKLAHOMA PO BOX 21505 OKLAHOMA CITY, OK 73156	42-1593360	501(C)(3)	12,500.	0.			GENERAL OPERATIONS			
SOL INTERNATIONAL FOUNDATION 8 HUNT HILL PLACE ASHEVILLE, NC 28801	20-4786732		11,200.	0.			GENERAL OPERATIONS			
SOUTHEASTERN OKLAHOMA STATE UNIVERSITY - 425 W UNIVERSITY - DURANT, OK 74701-0609		501(C)(3)	23,000.	0.			GENERAL OPERATIONS			
SOUTHERN METHODIST UNIVERSITY 6425 BOAZ LANE	75 0000000									
DALLAS, TX 75205	75-0800689	DUI(C)(3)	30,000.	0.			GENERAL OPERATIONS			
SOUTHERN OKLAHOMA NUTRITION PROGRAM - 122 S. BROADWAY - ADA,	72 0074147	E01/G)/2)	20.000				GENERAL OPERATIONS			
OK 74820	73-0974147	POT(C)(3)	20,000.	0.			GENERAL OPERATIONS			

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SOUTHWESTERN CHRISTIAN UNIVERSITY 7210 NW 39TH EXPRESSWAY BETHANY, OK 73008	73-0599209	501(C)(3)	13,500.	0.			GENERAL OPERATIONS			
SOUTHWESTERN OKLAHOMA STATE UNIVERSITY - 100 CAMPUS DRIVE - WEATHERFORD, OK 73096	73-1024870	501(C)(3)	48,175.	0.			GENERAL OPERATIONS			
SPECIAL CARE 12201 N. WESTERN AVENUE OKLAHOMA CITY, OK 73114	73-1227079	501(C)(3)	12,021.	0.			GENERAL OPERATIONS			
SRB 100 NE 5TH STREET OKLAHOMA CITY, OK 73104	73-1618943	501(C)(3)	16,000.	0.			GENERAL OPERATIONS			
ST. FRANCIS OF THE WOODS, INC. PO BOX 400 COYLE, OK 73027	73-1221217	501(C)(3)	32,580.	0.			GENERAL OPERATIONS			
STANDARD TESTING AND ENGINEERING COMPANY - 3400 N. LINCOLN BOULEVARD - OKLAHOMA CITY, OK 73105	82-3042789	501(C)(3)	12,400.	0.			GENERAL OPERATIONS			
STEPHENS COUNTY HISTORICAL SOCIETY P.O. BOX 1294 DUNCAN, OK 73534	23-7258111	501(C)(3)	8,041.	0.			GENERAL OPERATIONS			
STEPHENS COUNTY HUMANE SOCIETY PO BOX 669 DUNCAN, OK 73533	73-1202082	501(C)(3)	12,365.	0.			GENERAL OPERATIONS			
STILLWATER MEDICAL FOUNDATION 1201 S ADAMS STILLWATER, OK 74074	73-1173571	501(C)(3)	10,476.	0.			GENERAL OPERATIONS			

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STILLWATER PUBLIC EDUCATION FOUNDATION, INC PO BOX 286 -										
STILLWATER, OK 74076	73-1267401	501(C)(3)	10,975.	0.			GENERAL OPERATIONS			
STRATEGIC ADVISORS LLC 619 WEST MAIN STREET STE 201 OKLAHOMA CITY, OK 73102	87-0931981	501 (C) (3)	10,500.	0.			GENERAL OPERATIONS			
Simmon erri, en 75152	0, 0,01,01	301(0)(0)	10,500.	•						
STRATFORD PUBLIC SCHOOL PO BOX 589										
STRATFORD, OK 74872	73-0761376	501(C)(3)	8,170.	0.			GENERAL OPERATIONS			
STUDIO EIS INC. 68 33RD STREET, UNIT 13 BROOKLYN, NY 11232	11-3024415	501(C)(3)	735,000.	0.			GENERAL OPERATIONS			
SUNBEAM FAMILY SERVICES 1100 NW 14TH ST										
OKLAHOMA CITY, OK 73106	73-0590119	501(C)(3)	21,360.	0.			GENERAL OPERATIONS			
TAHLEQUAH PUBLIC SCHOOL FOUNDATION 225 N WATER AVENUE TAHLEQUAH, OK 74464	73-1365473	501(C)(3)	16,879.	0.			GENERAL OPERATIONS			
TAHLEQUAH PUBLIC SCHOOLS 225 N WATER AVE	73 1303173	501(5)(5)	10,075.							
TAHLEQUAH, OK 74464	73-6026802	501(C)(3)	13,341.	0.			GENERAL OPERATIONS			
TEXAS CHRISTIAN UNIVERSITY TCU BOX 297044										
FORT WORTH, TX 76129	75-0827465	501(C)(3)	30,000.	0.			GENERAL OPERATIONS			
TEXAS TECH UNIVERSITY PO BOX 45011										
LUBBOCK, TX 79409		501(C)(3)	8,000.	0.			GENERAL OPERATIONS			

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HE CARE CENTER							
.403 N. ASHTON PLACE							
OKLAHOMA CITY, OK 73117	73-1393193	501(C)(3)	118,000.	0.			GENERAL OPERATIONS
THE CHILDREN'S CENTER							
REHABILITATION HOSPITAL - 6800 N.							
W. 39TH EXPRESSWAY - BETHANY, OK							
73008	73-0580264	501(C)(3)	42,232.	0.			GENERAL OPERATIONS
THE KILL BOUNDARION							
THE KILN FOUNDATION							
12 E. CALIFORNIA AVENUE	87-2713778	E01/G\/3\	150,000.	0.			GENERAL OPERATIONS
OKLAHOMA CITY, OK 73102	07-2713770	501(C)(3)	150,000.	٠.			GENERAL OPERATIONS
THE OASIS PROJECTS							
1725 N. PEORIA AVENUE							
TULSA, OK 74106	86-3340212	501 (C) (3)	1,083,690.	0.			GENERAL OPERATIONS
1015A, OK 74100	00 3340212	501(0)(3)	1,003,030.	••			GENERAL OLERATIONS
THE RUNNYMEDE							
PO BOX 152							
ALVA, OK 73717	73-1204712	501(C)(3)	12,144.	0.			GENERAL OPERATIONS
,							
THE SPERO PROJECT							
P.O. BOX 2243							
OKLAHOMA CITY, OK 73101	26-4035530	501(C)(3)	700,100.	0.			GENERAL OPERATIONS
•			,				
THE SPRING SHELTER, INC.							
P.O. BOX 1588							
SAND SPRINGS, OK 74063	73-1474319	501(C)(3)	250,000.	0.			GENERAL OPERATIONS
·							
THRIVE (SEXUAL HEALTH COLLECTIVE							
FOR YOUTH) - PO BOX 18292 -							
OKLAHOMA CITY, OK 73154	81-2820895	501(C)(3)	30,320.	0.			GENERAL OPERATIONS
THUNDERBIRD CLUBHOUSE							
PO BOX 1666							
NORMAN, OK 73070	73-1425145	501(C)(3)	6,463.	0.			GENERAL OPERATIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
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TO BY FOR KIDS FOUNDATION DBA										
CLEATS FOR KIDS - 720 W WILSHIRE										
BLVD SUITE 120 - OKLAHOMA CITY, OK 73116	45-3590945	E01/G\/3\	15,000.	0.			GENERAL OPERATIONS			
73116	45-3590945	501(C)(3)	15,000.	0.			GENERAL OPERATIONS			
TODAY'S THERAPY SOLUTIONS 200 NW 66TH ST. SUITE 925										
OKLAHOMA CITY, OK 73116	20-8210278	501(C)(3)	5,625.	0.			GENERAL OPERATIONS			
TOY SHOP OF DUNCAN PO BOX 206										
DUNCAN, OK 73534	51-0200884	501(C)(3)	42,308.	0.			GENERAL OPERATIONS			
TREK ELECTRIC LLC 201 N.W. 142ND STREET SUITE A EDMOND, OK 73013	73-1459682	501(C)(3)	18,500.	0.			GENERAL OPERATIONS			
TULSA CARES										
3712 E 11TH ST.	73-1388569	501/C\/3\	120,000.	0.			GENERAL OPERATIONS			
TULSA, OK 74112	73-1366363	501(C)(3)	120,000.	0.			GENERAL OPERATIONS			
TULSA COMMUNITY COLLEGE 7505 W. 41ST STREET TULSA, OK 74107-8633	35-2544200	501(C)(3)	7,800.	0.			GENERAL OPERATIONS			
TURF TEAM 3500 E. WILSHIRE BLVD.										
OKLAHOMA CITY, OK 73121	85-1776268	501(C)(3)	82,350.	0.			GENERAL OPERATIONS			
UNITED WAY OF CENTRAL OKLAHOMA PO BOX 248919	72 0500000	E01 (G) (2)	10,000	0						
OKLAHOMA CITY, OK 73124	73-0589829	DOT(C)(2)	10,000.	0.			GENERAL OPERATIONS			
UNITED WAY OF STEPHENS COUNTY P.O. BOX 1632 DUNCAN OK 73534	23-7210483	501(C)(3)	22,267.	0.			GENERAL OPERATIONS			
DUNCAN, OK 73534	22 /210403	D01(C/(J/	22,207.	0.	l		PENDIAN OFFICE TONS			

UNIVERSITY OF OKLAHOMA FOUNDATION PO BOX 258856 OKLAHOMA CITY, OK 73156 OKLAHOMA HEALTH SCIENCES CTR/COLLEGE OF NURSING - PO BOX 26901 - OKLAHOMA CITY, OK 73126-0901 UNIVERSITY OF PENNSYLVANIA SCHOOL OF LAW - 3501 SANSOM STREET - PHILADELPHIA, PA 19104 UNIVERSITY OF SCIENCE AND ARTS OF OKLAHOMA - 1727 WEST ALABAMA -	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
213 ARKANSAS UNION PAYETTYLLE, AR 72701 501(C)(3) 9,000, 0. 3ENERAL OPERATIONS UNIVERSITY OF CENTRAL OKLAHOMA 100 N. UNIVERSITY DELVE, BOX 162 EDMOND, OX 73034-0162 73-6108032 501(C)(3) 68,840. 0. 3ENERAL OPERATIONS UNIVERSITY OF COLORADO BOULDER, (SCHOLARSHIPS) - 77 UCB - BOULDER, CS 80309-0077 501(C)(3) 501(C)(3) 6,000. 0. 3ENERAL OPERATIONS UNIVERSITY CAPITAL CENTER 10MA CITY, 1A 52242 501(C)(3) 501(C)(3) 6,000. 0. 3ENERAL OPERATIONS UNIVERSITY OF OKLAHOMA 1000 ASP AVE ROOM 208 NORMAN, OK 73019 73-1377584 501(C)(3) 232,201. 0. 3ENERAL OPERATIONS UNIVERSITY OF OKLAHOMA FOUNDATION PO BOX 258956 UNIVERSITY OF OKLAHOMA FOUNDATION FO BOX 258956 UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CTR/COLLEGE OF NURSING - FO BOX 25891- OKLAHOMA CITY, OK 73126-0901 UNIVERSITY OF PENNSYLVANIA SCHOOL OF LAW - 3501 SANSON STREET - FOR DOX 25891- OKLAHOMA CITY, OK 73126-0901 UNIVERSITY OF PENNSYLVANIA SCHOOL OF LAW - 3501 SANSON STREET - FRILADELIPHIA, FA 19104 23-1352685 501(C)(3) 10,000. 0. 3ENERAL OPERATIONS UNIVERSITY OF SCIENCE AND ARTS OF OKLAHOMA - 1727 WEST ALABAMA -		(b) EIN			noncash	valuation (book, FMV,					
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UNIVERSITY OF SCIENCE AND ARTS OF OKLAHOMA - 1727 WEST ALABAMA -		22 1252605	E01/a)/3)	10 000	_			GENERAL ODERATIONS			
OKLAHOMA - 1727 WEST ALABAMA -	PHILADELPHIA, PA 19104	23-1352685	D01(C)(3)	10,000.	0.			GENERAL OPERATIONS			
OKLAHOMA - 1727 WEST ALABAMA -	IINIVERSITY OF SCIENCE AND APTS OF										
CHICKASHA, OK 73018 73-1031040 501(C)(3) 8,500. 0. GENERAL OPERATIONS	CHICKASHA, OK 73018	73-1031040	501(C)(3)	8,500.	0.			GENERAL OPERATIONS			

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(8) 2.11	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
UNIVERSITY OF TULSA							
800 S TUCKER DRIVE, MCCLURE HALL #1	ì						
TULSA, OK 74104	73-0579298	501 (C) (3)	129,500.	0.			GENERAL OPERATIONS
UNIVERSITY OF WISCONSIN-RIVER	73 0373230	301(0)(3)	123,300.	• •			CHARLET CHARLETONS
FALLS FOUNDATION - 118 NORTH HALL,							
410 SOUTH 3RD STREET - RIVER							
FALLS, WI 54022	39-6064630	501(0)(3)	50,000.	0.			GENERAL OPERATIONS
:ALLS, WI S4022	39-0004030	501(C)(3)	50,000.	0.			GENERAL OPERATIONS
VANDERBILT UNIVERSITY							
110 21ST AVENUE SOUTH PMB 407701							
NASHVILLE, TN 37240	62-0476822	501(0)(3)	6,000.	0.			GENERAL OPERATIONS
NASHVILLE, IN 37240	02 04/0022	501(0)(3)	0,000.	••			GENERAL OFERATIONS
VARIETY CARE FOUNDATION							
3000 N GRAND BLVD							
OKLAHOMA CITY, OK 73107	73-0580273	501(C)(3)	30,000.	0.			GENERAL OPERATIONS
onemom citt, on /510/	73 0300273	301(0)(3)	30,000.	•			
VERDEN FIRST BAPTIST CHURCH							
PO BOX 364							
VERDEN, OK 73092		501(C)(3)	40,000.	0.			GENERAL OPERATIONS
WARFIGHTER SCUBA							
11096 N SCALLI WAY							
PRESCOTT VALLEY, AZ 86315	81-5098164	501(C)(3)	50,000.	0.			GENERAL OPERATIONS
,							
WELCH PUBLIC SCHOOLS ENRICHMENT							
FOUNDATION - PO BOX 129 - WELCH,							
OK 74369	73-1480590	501(C)(3)	16,430.	0.			GENERAL OPERATIONS
			<u> </u>				
WES WELKER FOUNDATION							
P.O. BOX 20777							
OKLAHOMA CITY, OK 73156	65-1303856	501(C)(3)	10,000.	0.			GENERAL OPERATIONS
,				••			
WESTERN PLAINS YOUTH & FAMILY							
SERVICES, INC 202639 E COUNTY							
RD 42 - WOODWARD, OK 73801	73-1042894	501(C)(3)	400,000.	0.			GENERAL OPERATIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WICHITA STATE UNIVERSITY (SCHOLARSHIPS) - 1845 FAIRMOUNT BOX 24 - WICHITA, KS 67260-0024		501(C)(3)	6,000.	0.			GENERAL OPERATIONS			
WILSHIRE CONSULTING GROUP, LLC 2832 W. WILSHIRE BLVD. OKLAHOMA CITY, OK 73116	86-1874935	501(C)(3)	126,930.	0.			GENERAL OPERATIONS			
WORCESTER POLYTECHNIC INSTITUTE (SCHOLARSHIP) - 100 INSTITUTE ROAD - WORCESTER, MA 01609		501(C)(3)	9,000.	0.			GENERAL OPERATIONS			
YALE UNIVERSITY - STUDENT FINANCIAL SERVICES OFFICE - PO BOX 208232 - NEW HAVEN, CT 06520-8232	06-0646973	501(C)(3)	6,000.	0.			GENERAL OPERATIONS			
YUKON FRIENDS OF THE PARK 532 WEST MAIN STREET YUKON, OK 73099	43-2008654	501(C)(3)	10,000.	0.			GENERAL OPERATIONS			
YWCA/OKC 2460 N.W. 39TH OKLAHOMA CITY, OK 73112	73-0579272	501(C)(3)	525,000.	0.			GENERAL OPERATIONS			
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF OKLAHOMA CITY, INC - 1232 N CLASSEN BOULEVARD - OKLAHOMA CITY, OK 73106	73-0636561	501(C)(3)	1,340,000.	0.			GENERAL OPERATIONS			
CATHOLIC CHARITIES TULSA P.O. BOX 6429 TULSA, OK 74148-0429	73-1171950	501(C)(3)	470,000.	0.			GENERAL OPERATIONS			

Schedule I (Form 990) 2021 COMMONTILES FOODBATTON	OF OKLAHOMA				73 1370320 Page
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL	474	1,240,190.	0.		
ERA ASSISTANCE	7495	197,365,197.	0.		
COMMUNITY ASSISTANCE	16	622,610.	0.		
COMMONITY MODIFIEMOR		022,010.			
Down IV Complemental Information Describe the information reserved	vived in Dort Llin	o Or Dort III. ook woo	(b) and any other of	Naitional information	
PART I, LINE 2:	quired in Part I, IIII	e 2, Part III, column	(b), and any other ac	aditional information.	
ANY FISCAL SPONSORSHIP THAT CONSIDERS MAKING GRANT	s TO INDIVIDU	ALS MUST			
DOCUMENT CRITERIA AND SELECTION PROCESS FOR SUCH G	RANTEES. THIS	INFORMATION			
MUST BE INCLUDED IN THE ORIGINAL APPLICATION TO OP	EN THE FUND A	T CFO AND			
APPROPRIATE FORMS TO DOCUMENT THE SELECTION AND TH	E REQUIREMENT	'S OF THE			
GRANTS ARE ALSO ON FILE. AWARD LETTERS ACCOMPANY A	LL PAYMENTS A	ND DESCRIBE			
THE PURPOSE OF THE GRANT AND ANY REPORTING REQUIRE	MENTS.				

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

Open to Public

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information.

COMMUNITIES FOUNDATION OF OKLAHOMA

Employer identification number 73-1396320

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
		_		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
_	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
·	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
Ī	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) TERESA ROSE CROOK	(i)	198,500.	20,600.	0.	6,573.	3,044.	228,717.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0,	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(II)						L	

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
A COMPENSATION SURVEY WAS USED BY THE BOARD TO EVALUATE THE PAY FOR THE
EXECUTIVE DIRECTOR.
PART I, LINE 7:
ALL STAFF RECEIVED A BONUS EQUAL TO THEIR NORMAL MONTHLY PAY. THIS WAS
DECIDED BY THE BOARD.

SCHEDULE L

Department of the Treasury

Internal Revenue Service

Name of the organization

(Form 990)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open To Public Inspection

Employer identification number

COMMUNITIES FOUNDATION OF OKLAHOMA								3-139	6320					
Part I Excess Bene	fit Transaction	ons (section 50	01(c)(3), secti	ion 501(c)(4), and sec	ction 501(c)(29) orgar	nizatio	ns on	ly).					
						o, or Form 990-EZ, Pa								
1,,,,	(b) R	(b) Relationship between disqualified			ified ,	1				(d) Corrected?				
(a) Name of disqualified p	person	person and or	ganiza	ation	(0	(c) Description of transaction				Y	es	No		
2 Enter the amount of tax i section 4958	-	•	-			ing the year under		> \$						
3 Enter the amount of tax,								> \$						
Part II Loans to and	d/or From Inte	erested Pers	sons.											
Complete if the o	organization answ	vered "Yes" on F	orm 9	90-EZ	, Part V, line 38a or F	orm 990, Part IV, line	e 26; d	or if the	e orga	nizatio	n			
reported an amo	unt on Form 990,	Part X, line 5, 6	6, or 22	2.										
(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		from the		(e) Original principal amount	(f) Balance due	(g) defa		(h) App by boo comm	ard or	(i) W agreei	
			То	From			Yes	No	Yes	No	Yes	No		
	1											l		

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990) 2021

Total

Schedule L (Form 990) 2021 COMMUNITI	ES FOUNDATION OF OKLAHOMA		73-139632	20	Page 2				
Part IV Business Transactions Involvi	ing Interested Persons.								
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.							
(a) Name of interested person	(1) Objection of								
				Yes	No				
TOM MCCASLAND III	BOARD MEMBER	291,119.	TOM MCCASLA		Х				
Dort V Ormale as extel lafe and etion									
Part V Supplemental Information.									
Provide additional information for response	onses to questions on Schedule L (see i	nstructions).							
agu i Dibm iu Dugiunga mpingaamiona									
SCH L, PART IV, BUSINESS TRANSACTIONS	INVOLVING INTERESTED PERSONS:								
(A) NAME OF PERSON: TOM MCCASLAND III									
(D) DESCRIPTION OF TRANSACTION: TOM MCC	TAGIAND TIT IG ON THE BOADD O	2							
(b) DESCRIPTION OF TRANSACTION: TOM MCC	CASUAND III IS ON THE BOARD O	-							
DIRECTORS AND TRUST COMMITTEE AT BANCE	RST WHICH IS THE INSTITUTION	л тнат							
HOLDS \$125,557,538 OF THE FOUNDATION'S	INVESTMENTS. THE FOUNDATION	PAID							
INVESTMENT FEES OF \$291,119 DURING THIS	S FISCAL YEAR.								
-									
				_					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization COMMUNITIES FOUNDATION OF OKLAHOMA Employer identification number 73-1396320

Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribe amounts reporte Form 990, Part VIII,	d on	(d) Method of de noncash contribu			S
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	6	69	2,428.	HIGH/LOW ON DATE	REC.		
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other • ()								
26	Other • ()								
27	Other • ()								
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions					
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement	29				
								Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines	1 throug	h 28, that it			
	must hold for at least three years from the date of the initial contribution, and which isn't required to be used for								
	exempt purposes for the entire holding period?								Х
b	b If "Yes," describe the arrangement in Part II.								
31									
32a	a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	CONTRIBUTION CONTR							Х	
	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in co	olumn (c) fo	a type of property	for which column (a	ı) is ched	ked,			
	describe in Part II.								

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2021

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COMMUNITIES FOUNDATION OF OKLAHOMA

Employer identification number

COMMUNITIES FOUNDATION OF ORLAHOMA	73-1390320						
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:							
GRANTS FOR CHARITABLE PROGRAMS AND PROJECTS THROUGHOUT THE STATE OF							
OKLAHOMA AND THROUGHOUT THE UNITED STATES.							
EXPENSES \$ 12,767,422. INCL GRANTS OF \$ 12,767,422. REVENUE \$ 237,491.							
FORM 990, PART VI, SECTION A, LINE 2:							
DIRECTORS DAVID RAINBOLT AND LESLIE RAINBOLT-FORBES ARE SIBLINGS.							
FORM 990, PART VI, SECTION B, LINE 11B:							
A COMPLETE COPY OF THE 990 IS EMAILED TO THE BOARD OF DIRECTORS PRIOR TO							
SIGNATURE BY THE CHAIR. DIRECTORS ARE INSTRUCTED TO REPLY ALL WITH ANY							
QUESTIONS OR COMMENTS BEFORE THE DATE WHEN THE CHAIR WILL SIGN THE RETURN.							
FORM 990, PART VI, SECTION B, LINE 12C:							
THE BOARD OF DIRECTORS ARE PROVIDED A DISCLOSURE FORM AND ASKED TO COMPLETE							
IT EACH YEAR AT THE ANNUAL MEETING. OTHER COMMITTEE MEMBERS ARE PROVIDED A							
DISCLOSURE FORM AT THE FIRST MEETING FOLLOWING THE BEGINNING OF THE FISCAL							
YEAR.							
FORM 990, PART VI, SECTION B, LINE 15A:							
COMPARABLE DATA WAS REVIEWED BY MEMBERS OF THE BOARD TO DETERMINE WAGES FOR							
THE EXECUTIVE DIRECTOR.							
FORM 990, PART VI, SECTION C, LINE 19:							
THIS INFORMATION IS UPLOADED ONTO OUR WEBSITE.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021