

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





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REC'D MAR 1 5 2011 SAC Armanded
Return of Organization Exempt From Income Tax

Under section 501(c) (except black

OMB No 1545-0047

Departm	ent c	f the	Trea	3Sur
Internal	Reve	nue :	Servi	ceti

► The organization may have to use a c

5. 527. or 4947(a)(1) of the Internal Revenue Code	2007
c), 527, or 4947(a)(1) of the Internal Revenue Code k lung benefit trust or private foundation) use a copy of this return to satisfy state reporting requirements	Openito Públic Inspection
use a copy of this return to satisfy state reporting requirements	Inspection

HΑ̈́		tne 2007 calen	dar year,	or tax year	beginning 3/	/ 01	, 2007,	and (	enaing	4/3	· -		ntification Number	
ISSUE		of applicable	Please use	•	ים בים ביו וויים ביו וויים ביים ביים ביי	/CDCTTV					l .	-		
ល	$\coprod'$	ddress change	IRS label or print	TORAL RO	BERTS UNIV OUTH LEWIS,	DB-300						-073 phone nu		
Ŵ	Ц١	lame change	or type. See	TULSA	OK 74171	, 10 209					1			
	∐"	nitial return	specific Instruc-	TODOII,	011 / 11 / 1								5-6402	
STATUTE	Цī	ermination	tions.								F Acce	ounting nod:	Cash 2	Accrual
5	Χ	mended return	Ĺ									Other (sp	ecify) >	
E		pplication pending	• Section	on 501(c)(3)	organizations	and 4947(a)(	1) nonexempt						organizations	_
$\leq$			charit (Form	table trusts 1 990 or 990	must attach a c	ompleted So	chedule A			Is this a grou				X No
	184-1-	<b>TITTD</b>	•		•					If 'Yes,' enter			s <b>~</b>	$\overline{}$
	web	site: ► HTTP	://www	.ORU.ED	<u>U</u>		<del></del> -		H (c)	Are all affilia			Yes	∐ No
2		anization type		<u>ত</u>			<u> </u>			(If 'No,' attac				
_	_	ck only one)		X 501(c)	3 <b>⊲</b> (mse		47(a)(1) or	527	H (d)	Is this a sepa organization		•		X No
K					ot a 509(a)(3) su									A No
	gros	s receipts are i	normally i es to file	<b>no</b> t more tha a return, be	an \$25,000. A re sure to file a co	eturn is not r omplete retu	requirea, but it rn		1	Group Ex	<del>- '-</del>			
_									M			_	ation is not requir ), 990-EZ, or 990-f	
L		s receipts: Add				► 170,23		10100					<u> </u>	17.
R	nt O				Changes in		s or Fund E	salar	ices	(See the	Instru	ICTION:	S.)	<del></del>
	1				milar amounts re	eceived			1					
	8	<ul> <li>Contributions</li> </ul>	to donor	advised fun	ds			1 a				30.5		
	1	Direct public			•			1 b		81,024,	<u>, 493.</u>			
	(	Indirect public	c support	(not include	ed on line 1a)			10				3,3		
Ħ					(not included of			1 d	<u> </u>	1,318,	,500.	. 722		
2011	•	! Total (add lines 1a through 1d) (ca	ash \$	82,23	7,300. noncas	h \$	105,693					1e	82,342	<u>, 993.</u>
8	2	Program serv	ice reven	ue including	government fe	es and contr	acts (Fold Pa	JVE	INM	B)[		2	71,360	<u>,317.</u>
=	3	Membership (					REC	E	VE	D		3		
	4	Interest on sa	avings and	temporary	cash investmen	nts.						4	795	,736.
APR	5	Dividends and	•	, -			APR	12	2011			5		,152.
	1	Gross rents						6a	1	7,595,	. 597.			
SCANNED STATES	-	Less rental e	ynenses				Car	7.66 b	1	10,716,				
۲			•	neel Subtra	ct line 6b from	line 6a	N PA	<b>GDE</b>		, , , , , ,		6 c	-3,120	. 958.
冕		Other investm	•	•		iiic va	•		-14		)	7		,,,,,,,
SER .	1			•	, —	(A)	Securities	I .	T	(B) Othe	<u></u>	10.00		
PA E	8a	Gross amoun		es of assets	other	<del></del>	,040,491.	8 a	<del> </del>		300.			
N	١.	than inventory	•	ic and calor	, ,		, 995, 229.	86		1,133,		3		
E	ł	Less cost or		_	TATEMENT 1		45, 262.	80	+	-998,				
	1	: Gain or (loss) (at		•			43,202.	00	·L	330,	, 007.	8d	-053	, 345.
		-			c, columns (A) a ch schedule) If a		ic from <b>comin</b>	a ch	ack bo	.ro. ▶[	7	8868	900	, 545.
	1	Gross revenu					contributions	y, ciii	ECK III	L				
	١	reported on li		idding 🗸			contributions	9 a	1					
	l m	•	-	other than fu	undraising expe	nses		9 b				2019		
	1				events Subtract		n line 9a		1			9с		
					ns and allowan			10 a	.1					
		Less cost of		-	no and anoman	•••		10 b						
	1		-		(attach schedule)	Subtract line 10	h from line 10a		1			10 c		
	1					Subu act iiiie 10	D HOIH IIIC 10a					11	1,908	064
	11	Other revenue				)a 10a and	11					12	152,388	
	12				4, 5, 6c, 7, 8d, 9	c, ruc, and	11					13	69,766	
Ē	13	Program serv				***						14	25,675	
Ê	14	-			e 44, column (C	·))						15		
Ņ	15	Fundraising (1										<del></del>	1,277	, 901.
EXPESSES	16	Payments to										16	06 310	2 F 4
	17				44, column (A)	<del></del>						17	96,719	
Ą	18	Excess or (de	ticit) for t	ne year. Su	btract line 17 fro	om line 12						18	55,669	
N S	19	HEGSING.	fund bala	nces at beg	inning of year (	trom line 73	, column (A)) _			D./D.:-	•	19	69,240	
ŦĘ	20	Other change	s in net a	ssets or fun	d balances (atta	ach explanat	•	EE S	TAT	EMENT 2	۷.	20	-13,857	
	<b>1</b> 21	Net assets or	fund bala	nces at end	of year Combi	ine lines 18,	19, and 20					21	111,053	
BA	<b>A</b> Fo	r Privacy Act à	ind Paper	work Reduc	tion Act Notice	, see the sep	parate instruct	tions.		Ŧ	EEA0109	12/27/	07 Form <b>99</b> <i>Cl<sub>1</sub></i> /フ	0 (2007)
													-177 /	

Par	Statement of Functional E for section 501(c)(3) and (4) orga	xpense	S All organizations must and section 4947(a)(1)	ust complete column (/	A) Columns (B), (C), and trusts but optional for o	d (D) are required thers (See instruct)
D	not vinclude amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a	Grants paid from donor advised					
	funds (attach sch)					
	(cash \$					
	non-cash \$) If this amount includes					
	foreign grants, check here	22 a			,	
22 b	Other grants and allocations (att sch) SEE ST	M 3				
	(cash \$ 17390333.				, ,	
	·				di P	
	If this amount includes foreign grants, check here	22 b	17,390,333.	17,390,333.	, gerge	
23	Specific assistance to individuals				,	
	(attach schedule)	23			,	
24	Benefits paid to or for members (attach schedule)	24				
25 =	Compensation of current officers,					·
	directors, key employees, etc. listed	25 a	2,212,731.	0.	2,212,731.	0.
L	Compensation of former officers,	238	2,212,131.		2,212,131.	
D	directors, key employees, etc listed		00 037		02 027	0
_	in Part V-B Compensation and other distributions, not	25 b	92,837.	0.	92,837.	0 .
٠	included above, to disqualified persons (as					
	defined under section 4958(f)(1)) and persons described in section		_			•
	4958(c)(3)(B)	25 c	0.	0.	0.	0.
26	Salaries and wages of employees not included on lines 25a, b, and c	26	30,154,371.	24,406,347.	5,173,454.	574,570
27	Pension plan contributions not		30/101/3111	21/100/01//	5,215,101	
21	included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27	28	4,581,652.	2,973,690.	1,447,231.	160,731
29	Payroll taxes	29	2,262,211.	1,614,854.	582,647.	64,710
	Professional fundraising fees	30				
31	Accounting fees	31	502,031.		502,031.	
32	Legal fees	32	1,322,375.	7,425.	1,314,450.	500
33	Supplies	33	1,550,419.	1,081,091.	467,145.	2,183
34	Telephone	34	199,022.	167,045.	17,452.	14,525
35	Postage and shipping	35	647,692.	275,454.	361,217.	11,021
	Occupancy	36	11,654,550.	8,349,484.	3,301,646.	3,420 7,561
	Equipment rental and maintenance	37	499,673. 203,957.	245,305. 118,036.	55,094.	30,827
	• •	38	2,880,636.	2,631,019.	98,843.	150,774
	Travel Conferences, conventions, and meetings.	40	608,859.	317,714.	89,725.	201,420
		41	2,955,380.	311,114.	2,955,380.	201, 120
41 42	Interest Depreciation, depletion, etc (attach schedule)	42	3,206,939.	2,260,745.	946,194.	
	Other expenses not covered above (itemize)	-	-,200,303.			=
а	SEE STATEMENT 4	43a	13,793,586.	7,927,674.	5,810,193.	55,719.
b		43b				
С		43 c				
d		43d				
e		43e				
f		43f				
g		43 g				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	96,719,254.	69,766,216.	25,675,077.	1,277,961

Are any joint costs from a combined educational campaign and fundraising so	olicitation reported in <b>(B)</b> Program services?
If 'Yes,' enter (i) the aggregate amount of these joint costs \$	, (ii) the amount allocated to Program services
\$; (iii) the amount allocated to Management and ger	neral \$, and (iv) the amount allocated
to Fundraising \$	

Part III	Statement of Program Service Accomplishments (See the instructions.)	
organizatio	s available for public inspection and, for some people, serves as the primary or sole source of information about. How the public perceives an organization in such cases may be determined by the information presented of such that return is complete and accurate and fully describes, in Part III, the organization's programs and accurate and fully describes.	n its return. Therefore,
What is the	organization's primary exempt purpose? > CEE CTATEMENT E	Program Service Expenses

BAA		Form <b>990</b> (2007)
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	<b>&gt;</b>	69,766,216.
(Grants and allocations \$ 13,331.) If this amount includes foreign grants, check here	$oxed{oxed}$	1,820,838.
e Other program services SEE STATEMENT 6		
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶	·   [	308,154.
d RESEARCH - COSTS INCURRED TO CONDUCT BIOMEDICAL, ACADEMIC AND OTHER RELATED RESEARCH	-	_
(Grants and allocations \$ 4, 647.) If this amount includes foreign grants, check here ▶	[	19,783,026.
c AUXILIARY ENTERPRISES - COSTS INCURRED TO PROVIDE ROOM & BOARD AND OTHER AUXILIARY SERVICE TO THE STUDENT RESIDENT POPULATION		
(Grants and allocations \$ 17,353,457.) If this amount includes foreign grants, check here	1	23,622,988.
6 STUDENT SERVICES, SCHOLARSHIPS & GRANTS - COSTS INCURRED TO EASE THE ADMINISTRATIVE AND FINANCIAL BURDEN OF STUDENTS' EDUCATION		
(Grants and allocations \$ 18,898.) If this amount includes foreign grants, check here ▶	·   1_L	24,231,210.
a INSTRUCTION & ACADEMIC SUPPORT - COSTS INCURRED TO INSTRUCT AND PROVIDE ACADEMIC SUPPORT TO THE 5,000 STUDENTS		
What is the organization's primary exempt purpose? SEE STATEMENT 5  All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)		rogram Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
please make sure the return is complete and accurate and fully describes, in Fart III, the organizations programs and		<del></del>

Page 4

Part IV Balance Sheets (See the instructions.) (B) End of year Where required, attached schedules and amounts within the description (A) Beginning of year column should be for end-of-year amounts only 34,273,610. 2,729,412. 45 Cash — non-interest-bearing 46 544,671 Savings and temporary cash investments 47a Accounts receivable 47 a 2,855,899 47 b 232,752 1,683,004 47 c 1,623,147. b Less: allowance for doubtful accounts 48 a 474,356 48a Pledges receivable 2,808,675 48 c 474,356. 48b b Less: allowance for doubtful accounts 49 49 Grants receivable. 50 a Receivables from current and former officers, directors, trustees, and key 50 a employees (attach schedule) b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) 50 b 51 a Other notes and loans receivable 27, 256, 028 SEE ST 7 51 a (attach schedule) 51 b 2,531,900 23, 234, 985 51 c 24,7<u>24,</u>128. **b** Less allowance for doubtful accounts 52 52 Inventories for sale or use 1,033,679. 1,605,129. 53 53 Prepaid expenses and deferred charges X FMV 4,573,886. 5,499,597. 54 a 54a Investments - publicly-traded securities STMT 8 X FMV Cost 54 b b Investments - other securities (attach sch) 121,452,870 55a Investments - land, buildings, & equipment basis 55 a b Less accumulated depreciation (attach schedule) STATEMENT 9 55 b 86,052,195 37,365,500 55 ( 35,400,675. 56 4,395,092 3,456,854. SEE STMT 10 56 Investments - other (attach schedule) 57a Land, buildings, and equipment basis 57 a 142,676,707 e . b Less accumulated depreciation STATEMENT 11 76,668,542 79,102,874 66,008,165. 57 b 57 c 58 Other assets, including program-related investments 4,262,458. SEE STATEMENT 12 4,705,425 58 162,177,203 59 177,328,119. Total assets (must equal line 74) Add lines 45 through 58 59 10,838,283. 60 12,757,993. Accounts payable and accrued expenses 61 61 Grants payable 2,238,074 62 5,193,015. 62 Deferred revenue Loans from officers, directors, trustees, and key 63 employees (attach schedule) 64 a 64a Tax-exempt bond liabilities (attach schedule) 77,226,906 45,691,530. SEE STATEMENT 13 64 b **b** Mortgages and other notes payable (attach schedule) 2,633,098. 2,632,088. SEE STATEMENT 14 65 65 Other liabilities (describe ► 92,936,361. 66,274,626. 66 Total liabilities. Add lines 60 through 65 66 X and complete lines 67 Organizations that follow SFAS 117, check here through 69 and lines 73 and 74. 19, 198, 497 67 56,707,781. 67 Unrestricted 16,394,430. 16,030,407. 68 Temporarily restricted 34,011,938. 37,951,282. Permanently restricted 69 Organizations that do not follow SFAS 117, check here and complete lines R 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 72 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 69,240,842 **73** 111,053,493. 72. (Column (A) must equal line 19 and column (B) must equal line 21) 162,177,203. Total liabilities and net assets/fund balances. Add lines 66 and 73 74 177,328,119.

	orm 990 (2007) ORAL ROBERTS UNI						9626	Page
P	art IV-A Reconciliation of Revenu	ue per Audited Financia	l Statemen	ts with	Revenue per Re	turn	(See the	
	instructions.)	•						
а	Total revenue, gains, and other support	t per audited financial stateme	ents			a	148,64	1,047
b	Amounts included on line a but not on l	•						
	1Net unrealized gains on investments			b1	-79,019.			
	2Donated services and use of facilities			b2		1		
	3Recoveries of prior year grants			b3	······································	1		
	460	• •				1 1		
	CEE COM 15			b4	-15,333,424.			
	Add lines b1 through b4			1 04	13, 333, 424.		-15,412	113
_	Subtract line <b>b</b> from line <b>a</b>				•	c	164,05	
C						1	104,05	3,430
d	Amounts included on Part I, line 12, bu			d1		1		
	1 Investment expenses not included on P			- 41		1		
				امرا	11 CCA F31			
			- <b></b>	d2	-11,664,531.		11 66	
	Add lines d1 and d2				_	a	-11,664	
e	Total revenue (Part I, line 12) Add line		1.61-1		<u> </u>	e	152,388	<u> 959</u>
P	art IV-B   Reconciliation of Expens	ses per Audited Financia	al Stateme	nts with	Expenses per i	Ketu	rn	
а	Total expenses and losses per audited to					a	93,026	<u>, 116</u>
b	Amounts included on line a but not on F	Part I, line 17						
	1 Donated services and use of facilities			b1				
	2Prior year adjustments reported on Part	1, line 20		b2		1 1		
	3Losses reported on Part I, line 20			b3				
	4Other (specify)			]				
	SEE STMT 17			b4	13,565,623.			
	Add lines b1 through b4					ь	13,565	<u>623</u>
С	Subtract line <b>b</b> from line <b>a</b>					С	79,460	493
d	Amounts included on Part I, line 17, but	not on line a:						
	1 Investment expenses not included on Pa			d1				
	20ther (	. <b></b>						
	CEE COMT 10			d2	17,258,761.			
	Add lines d1 and d2		<del></del>	<u> </u>		d	17,258	3.761
е	Total expenses (Part I, line 17) Add lin	es c and d			•	-	96,719	<u> </u>
_	art V-A Current Officers, Director		mployoos	<u> </u>				
• •	or key employee at any time du						cer, director,	trustee,
		(B) Title and average hours	(C) Compe		(D) Contributions		<b>(E)</b> Expe	nse
	(A) Name and address	per week devoted	(if not s	oaid,	employee benefit	ıt	account and	other
	(A) Name and address	to position	enter	-0-)	plans and deferre		allowan	ces
	<del></del>				compensation pla			
	E CHAMENEN 10	i	1 00	1,869.	144,30	اء	0.4	
<u> </u>	E STATEMENT 19		1, 90	1,009.	144,30	0.	- 00	5,556
						- 1		
						T		
						1		
			-					

Form 990 (2007), ORAL · ROBERTS UNIVERSI	TY		73-073962	6	P	age 6			
Part V-A Current Officers, Directors, Tru	istees, and Key En	nployees (continue			Yes	No			
75 a Enter the total number of officers, directors, and trustees p	•	•							
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s) SEE STATEMENT 20									
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees									
listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization'									
If 'Yes,' attach a statement that includes the in	nformation described in	the instructions SE	E STATEMENT 21						
d Does the organization have a written conflict of	1 &			75 d					
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, direct during the year, list that person below a the instructions)	or, trustee, or key emp	lovee received compens	sation or other benefits (de	escribed	below	) e			
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	( <b>E)</b> Ex account a allowa	and ot	her			
FREDERICK H. ANDERSON 7777 S LEWIS AVE	0.	86,240.	6,597.			0.			
TULSA, OK 74171									
		:							
		į							
					-				
<del></del> -									
Part VI Other Information (See the Insti	ructions.)				Yes	No			
76 Did the organization make a change in its activities	vities or methods of co	nducting activities?							
If 'Yes,' attach a detailed statement of each ch			200	76	-	X			
Were any changes made in the organizing or g	, ,	ut not reported to the II	RS?	77		X			
If 'Yes,' attach a conformed copy of the chang		or more during the year	or accurred by this return?	78 a	X	<b> </b>			
<b>78a</b> Did the organization have unrelated business of <b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b>		or more during the year	ar covered by this return?	78 b	X				
				700					
79 Was there a liquidation, dissolution, terminatio year? If 'Yes,' attach a statement				79		Х			
80 a Is the organization related (other than by asso membership, governing bodies, trustees, office	ciation with a statewide	e or nationwide organizations or nonexempt or	ation) through common ganization?	80 a	X	<u> </u>			
<b>b</b> If 'Yes,' enter the name of the organization	· · · · · · · · · · · · · · · · · · ·		~						
		eck whether it is X ex	kempt or nonexempt	- 1.					
81 a Enter direct and indirect political expenditures				).					
b Did the organization file Form 1120-POL for th	ıs year?		•	81 ь		_ X			

BAA

Form 990 (2007)

Part VI Other Information (continued)			Yes	No					
82 a Did the organization receive donated services or the use of materials, equipment, or facilitie substantially less than fair rental value?	s at no charge or at	82 a		Х					
<b>b</b> If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b _ N/A								
83a Did the organization comply with the public inspection requirements for returns and exempti	on applications?	83 a	X						
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?									
84a Did the organization solicit any contributions or gifts that were not tax deductible?									
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were									
not tax deductible?	Ĭ	84 b	N.						
85a 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?		85 a	N,						
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N,	'A					
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless t waiver for proxy tax owed for the prior year.		1. 1							
c Dues, assessments, and similar amounts from members	85 c N/A	Significant of the second							
d Section 162(e) lobbying and political expenditures.	85 d N/A								
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A								
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A								
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	N.	A					
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reaso dues allocable to nondeductible lobbying and political expenditures for the following tax year?	nable estimate of	85 h	N,	/A					
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on									
line 12	86a N/A	j							
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	86b N/A			,					
87 501(c)(12) organizations Enter a Gross income from members or shareholders	87a N/A	1	- 1	}					
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	87b N/A								
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable or an entity disregarded as separate from the organization under Regulations sections 301.7	corporation or partnership, 701-2 and 301 7701-3?	88 a	X						
If 'Yes,' complete Part IX  b At any time during the year, did the organization, directly or indirectly, own a controlled entit section 512(b)(13)? If 'Yes,' complete Part XI	y within the meaning of		Λ						
	To the state of th	88b		<u> X</u>					
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year u section 4911 ►	9550.			^					
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 exce during the year or did it become aware of an excess benefit transaction from a prior year? If explaining each transaction	<u> </u>	89 b	X						
c Enter: Amount of tax imposed on the organization managers or disqualified persons during t year under sections 4912, 4955, and 4958	he STATEMENT 23								
d Enter Amount of tax on line 89c, above, reimbursed by the organization	▶ 0.								
e All organizations. At any time during the tax year, was the organization a party to a prohibite	The state of the s	89 e		Χ_					
f All organizations. Did the organization acquire a direct or indirect interest in any applicable in	nsurance contract?	89f		<u> </u>					
g For supporting organizations and sponsoring organizations maintaining donor advised funds	Did the supporting			İ					
organization, or a fund maintained by a sponsoring organization, have excess business hold	ngs at any time during								
the year?	Ę	89 g		<u>X</u>					
90 a List the states with which a copy of this return is filed - OK CA		<b>-</b>							
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007	1	1	_						
(See instructions)	L.	90b	1,	<u>584</u>					
91 a The books are in care of ► ANNE ELFRINK  Located at ► 7777 S. LEWIS TULSA OK	mber ► 918-495-601 ZIP + 4 ► 74171								
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature financial account in a foreign country (such as a bank account, securities account, or other fi			Yes	No					
financial account in a foreign country (such as a bank account, securities account, or other fill 'Yes,' enter the name of the foreign country		91 ь		X					
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of	l l								
BAA		Form	990 (	2007)					

<u>7</u>3-0739626

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ORAL ROBERTS UNIVERSITY

Form 990 (2007),

Form <b>99</b>	0 (2007) ORAL ROBERTS UNIVE	RSITY				73-0739	626		Page 8
Part \	/I Other Information (continu	ed)						Yes	s No
c At	any time during the calendar year, die	the organiza	tion r	maintain an office	outside of the	United States?	آذ	91 c	<u> </u>
If "	Yes,' enter the name of the foreign count	ry <b>&gt;</b>			<b>_</b>			<b>_</b>	
<b>92</b> Se	ction 4947(a)(1) nonexempt charitable	trusts filing i	Form	990 in lieu of <b>Fo</b> i	<i>m 1041</i> – Chec	k here		N/A	<b>&gt;</b>
	d enter the amount of tax-exempt inte					▶ 92			N/A
Part V	II Analysis of Income-Produc	ing Activit	ies (	See the instru	ictions.)				
		Unrelated	d busi	iness income	Excluded by se	ection 512, 513, or 514		(E)	
Note: Er otherwis	nter gross amounts unless e indicated	(A) Business code	_	(B) Amount	(C) Exclusion code	<b>(D)</b> Amount		(E) ed or ex- tion inco	
	Program service revenue  AUXILIARY SERVICES	541900			3	19,121,866.			
<b>b</b> _1	DAMAGE LOSS RECOVERY								916.
<b>c</b> _l	FEES							2,119,	
d_'	ruition						49	<u>,782,</u>	<u>410.</u>
e_									
f N	Nedicare/Medicaid payments								
-	ees & contracts from government agencies				<u> </u>				
94 N	flembership dues and assessments				<u> </u>				
	nterest on savings & temporary cash invmnts				14	795,736.			
	Dividends & interest from securities				14	56,152.			
	et rental income or (loss) from real estate:			a' .		0.100.050			
	ebt-financed property				17	-3,120,958.			
	ot debt-financed property								
	et rental income or (loss) from pers prop							<del></del>	
<b>99</b> C	Other investment income								
100 G	Gain or (loss) from sales of assets ther than inventory							-953,	345.
101 N	et income or (loss) from special events							<del> </del>	
<b>102</b> G	ross profit or (loss) from sales of inventory		<del></del>						<del></del>
	Other revenue a	\$ 1 \$		**, ***	· * *	- 19 * . "	· ·	<u> </u>	
b_ <u>l</u>	MISCELLANEOUS INCOME				,		1	<u>,908,</u>	<u>064.</u>
c_									
<b>d</b> _	<u> </u>								
e_									
	ubtotal (add columns (B), (D), and (E))	·				16,852,796.		3,193,	
	otal (add line 104, columns (B), (D),					<b>-</b>	70	0,045,	<u>966.</u>
	ne 105 plus line 1e, Part I, should equ				<del></del>				
Part V	III Relationship of Activities to								
Line No	of the organization's exempt purpo	ses (other th	an by	providing funds	for such purpose	es).	accom	ıplıshme 	nt
93 (B)	REIMBURSEMENT FOR FLOO								
93 (C)	TO PROVIDE TRAINING OF								
93 (D)	TO INSTRUCT INDIVIDUA	LS FOR IM	IPRO	VEMENT OF T	HEIR CAPAI	BILITIES THROUG	<u> </u>	IBERA	<u>L</u>
	ARTS EDUCATION	<del></del>					<del></del>		
Part I	K Information Regarding Tax		diari				<u>ions.)</u>		
	(A)	(B)		(C	<b>;</b> )	(D)		(E)	
Nam p	e, address, and EIN of corporation, artnership, or disregarded entity	Percentage ownership in		Nature of	activities	Total income	Er	nd-of-yea assets	ar 
SEE ST	CATEMENT 24		¥						
			ક						
			왕						
		<u></u>	a B						
Part )	Information Regarding Tra	nsfers Ass	ocia	ted with Perso	onal Benefit (	Contracts (See the			
	the organization, during the year, receive any fu the organization, during the year, pa		-				Y		No No
Note	: If 'Yes' to <b>(b),</b> file Form 8870 <b>and</b> Fo	rm 4720 (see	ınstr	uctions)					
BAA						TEEA0108L 12/27/0	7 Fe	orm 990	(2007)

<sub> </sub> ମ୍ପ	<u> </u>	Information Regarding Transfers To at organization is a controlling organization	nd From Controlled Ei In as defined in section	ntiti <b>es.</b> Comp n 512(b)(13).	ilete only if the	e		
106	Dıd 'Ye	the reporting organization make any transfers to a s,' complete the schedule below for each controlle	a controlled entity as define		2(b)(13) of the Co	de? If	Yes	No X
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descri	C) ption of nsfer	(E Amount o	)) I trans	sfer
а								
b				· · · · · · · · · · · · · · · · · · ·				
С								
		Totals						
107	Did 'Ye:	the reporting organization <b>receive</b> any transfers fr	om a controlled entity as d	efined in section	n 512(b)(13) of th	e Code? If	Yes	No X
		(A) Name, address, of each controlled entity	(B) Employer Identification Number		C) ption of isfer	(D Amount o	) f trans	sfer ——
а	<b></b> -							
b	<del></del> 		:					
с	<del>-</del>							
		Totals		A	و د د ا			
108	Dıd ann	the organization have a binding written contract in uities described in question 107 above?	effect on August 17, 2006,	covering the in	terest, rents, roya	alties, and	Yes	No X
Pleas Sign Here		Under penalties of perjury, I declare that I have examined this returne, correct, and complete Declaration of pregarer (other than off Signature of officer  MICHELLE FINLEY, EXEC VICE PEType or print name and title		: 1	nd to the best of my knowledge  3//o // Date		lief, it is	
Paid Pre- pare		Preparer's signature  Firm's name (or	Date	l	Check if self-employed	reparer's SSN or eneral Instructio	PTIN (S	See
Use Only		yours if self- employed), address, and ZIP + 4			EIN Phone no		·	
BAA						Form	990 (2	2007)

#### SCHEDULE A (Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

2007

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Name of the organization Employer identification number 73-0739626 ORAL\_ROBERTS UNIVERSITY Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (c) Compensation (d) Contributions (b) Title and average (e) Expense to employee benefit employee paid more than \$50,000 account and other hours per week devoted to position allowances compensation SCOTT SUTTON 7777 S LEWIS AVE TULSA, OK 74171 19,084 BASKTBALL COAC 40 380,188 1,143. JERRY FINKBEINER 7777 S LEWIS AVE TULSA, OK 74171 40 13,985 2,364. BASKTBALL COAC 157,896 MARSHALL WRIGHT 7777 S LEWIS AVE TÜLSA, OK 74171 40 12,083 BUSINESS DEAN 149,138 0. SCOTT HIGGINS 7777 S LEWIS AVE TÜLSA, OK 74171 40 12,329 1,462. ATHLETIC MKTG 112,175 JAMES R RUSSELL 7777 S LEWIS AVE TÜLSA, OK 74171 BUSINESS CHAIR 40 109,344 13,592 Total number of other employees paid over \$50,000 130 Part II - A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
MOYERS MARTIN SANTEE IMEL & TETRICK		-
401 S BOSTON AVE, SUITE 1100 TULSA, OK 74103	LEGAL COUNSEL	563,749.
STANFIELD & O'DELL		
3211 S LAKEWOOD AVE TULSA, OK 74135	AUDITOR	491,105.
MILLER AND CHEVALIER		
655 15TH ST NW, SUITE 900 WASHINGTON, DC 20005-5701	LEGAL COUNSEL	403,007.
DAVID RILEY ASSOCIATES		
3184-L AIRWAY AVENUE COSTA MESA, CA 92626	ADVERTISING DESIGN	270,590.
SCHNAKE TURNBO FRANK		
400 S BOSTON, SUITE 500 TULSA, OK 74103	PUBLIC RELATIONS	177,989.
Total number of others receiving over \$50,000 for professional services	3	· · · · · · · · · · · · · · · · · · ·

Part II - B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SODEXHO		
PO BOX 536922 ATLANTA, GA 30353	FOOD/CATERING	527,422.
SUNGARD SCT INC.		
14083 COLLECTIONS CENTER DR CHICAGO, IL 60693	SOFTWARE MAINTENANCE	158,492.
ALLIED WASTE SERVICE		
18500 NORTH ALLIED WAY PHOENIX, AZ 85054	REFUSE SERVICE	129,800.
KARA K. JOHNSTON		
RT 1, BOX 872 BUNCH, OK 74931	PAINTING	_ 95,000.
JOE LAND CARPET CLEANERS		
2810 E 39TH ST TULSA, OK 74105	CARPET CLEANING	90,515.
Total number of other contractors receiving over \$50,000 for other services	4	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2007

Pa	Statements About Activities (See instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any atte to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid	empt		
	or incurred in connection with the lobbying activities \$ N/A	_		۱
	(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1	7558	<u> </u>
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or wit taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or pri beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)	th any ncipal		
ā	Sale, exchange, or leasing of property?	2a		<u>x</u>
t	Lending of money or other extension of credit?	<u>2b</u>		<u>X</u> _
ď	Furnishing of goods, services, or facilities?  SEE FORM 990, PART V	2c		Х_
c	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Х	<u> </u>
e	Transfer of any part of its income or assets?	2e		x
3 <i>a</i>	Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments)  STM	T 25 3a	Х	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	Х	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement	Зс		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4 a	Did the organization maintain any donor advised funds $^{9}$ If 'Yes,' complete lines 4b through 4g If 'No,' complete li 4f and 4g	nes 4a		х
b	Did the organization make any taxable distributions under section 4966?	4b	N,	/A_
C	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N,	/A
d	Enter the total number of donor advised funds owned at the end of the tax year	<b>-</b>	<del></del>	N/A
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	<b>-</b>		N/A
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	<b>-</b>		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year	<b>-</b>		0.

ORAL ROBERTS UNIVERSITY

73-0739626

Page 2

Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007

Page 3

BAA

	tify that the organization is not a private	<del>-</del>	<u> </u>	pplicable bo	x )	<del></del>
5	A church, convention of churches,	or association of churches	Section 170(b)(1)(A)(i)			
6	X A school Section 170(b)(1)(A)(ii)	(Also complete Part V.)				
7	A hospital or a cooperative hospital	al service organization. Sec	ction 170(b)(1)(A)(iii).			
8	A federal, state, or local government	ent or governmental unit. S	section 170(b)(1)(A)(v)			
9	☐ A medical research organization o and state ►	perated in conjunction with	n a hospital. Section 170(b)	(1)(A)(III). <b>E</b>	inter the hos	pital's name, city,
10	An organization operated for the b (Also complete the Support Scheo	enefit of a college or unive	ersity owned or operated by	a governm	ental unit Se	ection 170(b)(1)(A)(iv)
11 a	An organization that normally rece Section 170(b)(1)(A)(vi). (Also con	eives a substantial part of it inplete the <b>Support Schedu</b>	ts support from a governme lie in Part IV-A)	ental unit or	from the ger	neral public
11 b	A community trust. Section 170(b)	(1)(A)(vi) (Also complete t	the <b>Support Schedule</b> in Pa	art (V-A )		
12	An organization that normally rece from activities related to its charita from gross investment income and organization after June 30, 1975	ible, etc, functions – subje I unrelated business taxabl	ct to certain exceptions, ar e income (less section 511	id <b>(2) no m</b> o tax) from b	ore than 33-1 Jusinesses ac	/3% of its support
13	An organization that is not controll requirements of section 509(a)(3)	ed by any disqualified pers	sons (other than foundation	managers)	and otherwis	se meets the
	Type I Type II  Provide the		onally Integrated  out the supported organiz	Type III		)
	(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c)	Is the si organizati the sup organi	d) upported on listed in porting zation's rning nents?	(e) Amount of support
				Yes	No	
				<u> </u>		
Total	·				<b>•</b>	0.
14	An organization organized and ope	erated to test for public safe	ety Section 509(a)(4) (Sec	e instruction	ıs )	

Page 4

Note	: Yoù may use the worksheet in t	he instructions for coi	nverting from the a	ccrual to the cash n	nethod of accounting	ng	
	ndar year (or fiscal year nning in)	<b>(a)</b> 2006	<b>(b)</b> 2005	<b>(c)</b> 2004	<b>(d)</b> 2003		<b>(e)</b> Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28.)	N/A					
16	Membership fees received .						
	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose.						
18	Gross income from interest, dividends, antis rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalities, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975						
19	Net income from unrelated business activities not included in line 18						
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets						
	Total of lines 15 through 22						
	Line 23 minus line 17						P*
	Enter 1% of line 23		00/ /		l N/A ►	<del>,  </del>	· 2 20 30 -
	Organizations described on line: Prepare a list for your records to show the					26a	<del></del>
	supported organization) whose total gifts f return. Enter the total of all these excess	for 2003 through 2006 excee	ded the amount shown is	n line 26a. <b>Do not file th</b>	is list with your	26 b	
	Total support for section 509(a)(1				•	26c	
d	Add Amounts from column (e) for	or lines 18 22		19 26 b		26 d	
_	Public support (line 26c minus lir			200		26e	
	Public support percentage (line		led by line 26c (der	nominator))	•	26f	%
27	Organizations described on line	12: N/A			· ·	1 7 7 1	
а	For amounts included in lines 15 name of, and total amounts receisuch amounts for each year:	ived in each year fron	n, each 'disqualified	d person ' <b>Do not fil</b>	e this list with you	ır return. E	nter the sum of
	(2006)						
t	For any amount included in line 1 to show the name of, and amoun \$5,000. (Include in the list organi After computing the difference be differences (the excess amounts)	It received for each ye izations described in letween the amount re of for each year.	ear, that was more ines 5 through 11b ceived and the larg	than the <b>larger</b> of ( , as well as individu jer amount describe	1) the amount on linds of the second of the	ine 25 for the sistem of the sum	he year or <b>(2)</b> your return. of these
	(2006)	(2005)	(2004)		<sup>(2003)</sup>	-	
С	Add. Amounts from column (e) fo	or lines: 15		16	<del></del>	اء دو ا	
	Add Line 27a total	20	d line 27b total			27 c	
	Public support (line 27c total min	<del></del>				27e	
	Total support for section 509(a)(2	•	from line 23, colum	nn (e). ► 27f			
	Public support percentage (line				<b>•</b>	-, 9	કૃ
_	Investment income percentage (	•	•	•	nator))	27 h	8
28	Unusual Grants: For an organiza list for your records to show, for on nature of the grant Do not file th	each vear, the name (	of the contributor, t	he date and amoun	it of the grant, and	03 through a brief des	2006, prepare a scription of the

Part IV-A | Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.

Private School Questionnaire (See Instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	x	<u></u>
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	х	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that			
	makes the policy known to all parts of the general community it serves?  If 'Yes,' please describe, if 'No,' please explain. (If you need more space, attach a separate statement)  ORAL ROBERTS UNIVERSITY IS A CHRISTIAN UNIVERSITY THAT ADMITS STUDENTS  WITHOUT REGARD TO RACE, COLOR, SEX, AGE, DISABILITY, NATIONAL ORIGIN,  OR STATUS AS A VETERAN.	31_	Х	
	Does the organization maintain the following  a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a	Х	
	<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b	Х	
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions? .  If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement)	32 d	<b>A</b>	m de
33	Does the organization discriminate by race in any way with respect to	.y.		¥_3
,	a Students' rights or privileges?	33 a		Χ
	b Admissions policies?	33 b		X
,	c Employment of faculty or administrative staff?	33 c		X
	d Scholarships or other financial assistance?	33d		Х
•	e Educational policies?	33e		Х
1	f Use of facilities?	33 f		Х
9	g Athletic programs?	33 g		Х
١	h Other extracurricular activities?	33 h		Х
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement.)			
34 :	a Does the organization receive any financial aid or assistance from a governmental agency? .	34a	Х	
ł	b Has the organization's right to such aid ever been revoked or suspended?  SEE STATEMENT 26  If you answered 'Yes' to either 34a or b, please explain using an attached statement.	34b		Х
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35	х	

N/A

Chec	ck - a   If the organi	zation belongs to an af	filiated group Check	► b If yo	u checl	ked 'a' and 'l	imited	contr	ol' provisions apply
		imits on Lobbying	•			Affiliate	a) d grou als	ip	(b) To be completed for all electing
			amounts paid or incurre	<del>-</del>	T			$\longrightarrow$	organizations
36	, , ,								
37	Total lobbying expendit					<del>_</del>			
38	Total lobbying expendit				$\longrightarrow$				
39	Other exempt purpose			•	39				
40	Total exempt purpose e	•			40				
41	Lobbying nontaxable an					4		- 1	
	If the amount on line 40		lobbying nontaxable a					- 1	
	Not over \$500,000	20%	of the amount on line	40		7			
	Over \$500,000 but not over \$1	,,	000 plus 15% of the excess o						
	Over \$1,000,000 but not over \$	\$1,500,000 \$175,	000 plus 10% of the excess o	ver \$1,000,000	41			$\longrightarrow$	
	Over \$1,500,000 but not over \$	\$17,000,000. \$225,	000 plus 5% of the excess ov	er \$1,500,000			-		
	Over \$17,000,000	\$1,0	000,000						
42	Grassroots nontaxable	amount (enter 25% of I	ine 41).		42				
43	Subtract line 42 from lin	ne 36 Enter -0- if line 4	12 is more than line 36		43				
44	Subtract line 41 from lin				44				
	Caution: If there is an a	amount on either line 4	3 or line 44, you must f	ile Form 4720		<u> </u>			
	(Some organ	izations that made a se	Averaging Period lection 501(h) election detection for line	o not have to c	omplete	l(h) e all of the fi	ve col	umns	below
			Lobbying Expend	ditures During	4 -Year	Averaging F	Period		
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2006	(c) 2005			<b>d)</b> )04		<b>(e)</b> Total
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))		4 **	**		3)° \$		١,	<u> </u>
<b>47</b>	Total lobbying expenditures								_
48	Grassroots non- taxable amount								
49	Grassroots ceiling amount (150% of line 48(e))								
50	Grassroots lobbying expenditures								
	(For reporting of	only by organizations th	ing Public Charitie at did not complete Par	rt VI-A) (See in			· · · · · ·		N/A
Durir atter	ng the year, did the orgain npt to influence public of	nization attempt to influ pinion on a legislative r	uence national, state or natter or referendum, th	nrough the use	n, inclu of	ding any	Yes	No	Amount
	Volunteers							$\vdash\vdash\vdash$	
	<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> .).								
	c Media advertisements								
	Mailings to members, le	•		•			ļ	$\vdash \vdash$	
	Publications, or publish						ļ	$\vdash \vdash \vdash$	
	Grants to other organization							$\vdash \vdash \vdash$	
_	Direct contact with legis					•		$\vdash \vdash$	
	Rallies, demonstrations			or any other me	ans .		<u> </u>	Щ	
i	Total lobbying expendit								
	If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities								

# Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

of the	Code (other than section	n 501(c)(3)	organizations)	or in section 527, rela	ating to political organizations?	scribed in secti		
<b>a</b> Trans	fers from the reporting o	rganızatıon	to a noncharita	ible exempt organizat	ion of		Yes	No
(i)Cash .						51 a (i)		X
(ii)O	ther assets			•		a (ii)		_X_
<b>b</b> Other	transactions:					1 .		
<b>(i)</b> Si	ales or exchanges of ass	ets with a r	ioncharitable ex	kempt organization.		b (i)		<u>X</u>
• •	urchases of assets from		•	ganızatıon		b (ii)		X
` '	ental of facilities, equipm		er assets			b (iii)		X
(iv)R	eimbursement arrangem	ents				b (iv)		X
• •	oans or loan guarantees					b (v)		X
, ,	erformance of services o		•	~		b (vi)		<u>X</u>
¢ Sharir	ng of facilities, equipmen	t, mailing li	sts, other asset	s, or paid employees	وطلا بينوطع ويتونيا والباديات الماريخ	four manifest val		X
the go	answer to any of the abo ods, other assets, or sei ansaction or sharing arra	rvices given angement, s	by the reporting the flow in column	ollowing schedule. Co ig organization If the (d) the value of the g	olumn (b) should always show the organization received less than fa goods, other assets, or services re	ir market value eived	ue or	
(a) Line no	(b) Amount involved		(c)	exempt organization	(d) Description of transfers, transactions			ts
N/A	· · · · · · · · · · · · · · · · · · ·							
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descril	organization directly or i bed in section 501(c) of complete the following	the Code (o	iliated with, or ther than section	related to, one or mo on 501(c)(3)) or in sec	re tax-exempt organizations ction 527?	► ☐ Ye	s X	No
	(a)			(b)	(c) Description of re			
	Name of organization		Туре о	f organization	Description of re	lationship		
N/A								
		_						
				<u> </u>				
				<u></u>				
					1			

## FEDERAL STATEMENTS

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**ORAL ROBERTS UNIVERSITY** 

73-0739626

**STATEMENT 1** FORM 990, PART I, LINE 8 **NET GAIN (LOSS) FROM NONINVENTORY SALES** 

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: COST OR OTHER BASIS: 6,040,491. 5,994,725.

EXPENSES OF SALE:

504.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ 45,262.

OTHER ASSETS

DESCRIPTION:

1994 EZ-GO GOLF CART

DATE ACQUIRED: HOW ACQUIRED:

7/01/2001 PURCHASE

DATE SÕLD: TO WHOM SOLD: 9/20/2007 CLASSIC GOLF CART

GROSS SALES PRICE:

500. 1,400.

COST OR OTHER BASIS: BASIS METHOD:

COST

**DEPRECIATION:** 

851.

GAIN (LOSS) -49.

**DESCRIPTION:** 

2000 FORD CROWN VICTORIA

DATE ACQUIRED: HOW ACQUIRED:

7/01/2002 **PURCHASE** 10/03/2007

DATE SOLD: TO WHOM SOLD:

UNKNOWN

GROSS SALES PRICE:

800.

COST OR OTHER BASIS: BASIS METHOD:

16,234.

COST

**DEPRECIATION:** 

14,610.

GAIN (LOSS)

-824.

DESCRIPTION:

1999 FORD CROWN VICTORIA

DATE ACQUIRED: HOW ACQUIRED:

9/01/1999 PURCHASE 2/07/2008

DATE SOLD: TO WHOM SOLD:

ANDY ISAACS 900.

GROSS SALES PRICE: COST OR OTHER BASIS:

21,503.

BASIS METHOD:

COST

DEPRECIATION:

19,353.

GAIN (LOSS)

-1,250.

DESCRIPTION:

2003 NISSAN ALTIMA

DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

7/01/2003 **PURCHASE** 2/21/2008

TO WHOM SOLD: GROSS SALES PRICE: STEVEN HINKLE 3,615.

COST OR OTHER BASIS: BASIS METHOD:

COST

**DEPRECIATION:** 

18,969.

22,186.

GAIN (LOSS)

398.

DESCRIPTION:

1994 FORD RANGER XLT PICKUP

DATE ACQUIRED:

8/01/1997

**PURCHASE** HOW ACQUIRED:

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**ORAL ROBERTS UNIVERSITY** 

73-0739626

STATEMENT 1 (CONTINUED)
FORM 990, PART I, LINE 8
<b>NET GAIN (LOSS) FROM NONINVENTORY SALES</b>

DATE SOLD: TO WHOM SOLD: GROSS SALES PRICE:

4/09/2008 LARRY DORRIS 500.

COST

COST

COST OR OTHER BASIS:

6,949.

1977 CHEVY PICKUP

BASIS METHOD:

**DEPRECIATION:** 

6,254.

GAIN (LOSS)

-195.

DESCRIPTION: DATE ACQUIRED:

5/01/1998 HOW ACQUIRED: **PURCHASE** DATE SOLD: 7/24/2007

TO WHOM SOLD: GROSS SALES PRICE: POEBOY AUTO SALVAGE 125.

COST OR OTHER BASIS: BASIS METHOD:

5,000.

DEPRECIATION:

4,500.

GAIN (LOSS) -375.

**DESCRIPTION:** DATE ACQUIRED:

1994 FORD E350 1 TON PICKUP 3/01/1999 **PURCHASE** 

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD:

7/24/2007 POEBOY AUTO SALVAGE

2003 NISSAN ALTIMA

GROSS SALES PRICE: COST OR OTHER BASIS:

400. 9,500.

BASIS METHOD: **DEPRECIATION:** 

COST

8,550.

GAIN (LOSS) -550.

**DESCRIPTION:** DATE ACQUIRED:

7/01/2003 **PURCHASE** 2/05/2008

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD: VEHICLE TOTALED AND DISPOSED OF

GROSS SALES PRICE: COST OR OTHER BASIS: 11,248. 22,186.

BASIS METHOD:

COST **DEPRECIATION:** 

14,976.

GAIN (LOSS)

4,038.

DESCRIPTION:

VERSAMATIC WATER PUMP DATE ACQUIRED: 7/01/1988 **PURCHASE** HOW ACQUIRED: DATE SOLD: 3/01/2008

TO WHOM SOLD: GROSS SALES PRICE: REPLACED DUE TO AGE Ο. 1,155.

COST OR OTHER BASIS: BASIS METHOD:

COST

821.

GAIN (LOSS) -334.

DESCRIPTION: DATE ACQUIRED:

**DEPRECIATION:** 

GRAPHIC EQUALIZER 3/01/2003 **PURCHASE** 3/01/2008

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD:

REPLACED DUE TO AGE GROSS SALES PRICE: 0.

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**ORAL ROBERTS UNIVERSITY** 

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**STATEMENT 1 (CONTINUED)** FORM 990, PART I, LINE 8 **NET GAIN (LOSS) FROM NONINVENTORY SALES** 

COST OR OTHER BASIS:

551.

BASIS METHOD:

COST

DEPRECIATION:

471.

GAIN (LOSS)

-80.

**DESCRIPTION:** 

POWERMAC G4 COMPUTER 9/01/2003

DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

**PURCHASE** 3/01/2008

TO WHOM SOLD:

REPLACED DUE TO AGE

GROSS SALES PRICE: COST OR OTHER BASIS:

0. 2,017.

BASIS METHOD:

COST

**DEPRECIATION:** 

1,815.

GAIN (LOSS)

-202.

**DESCRIPTION:** DATE ACQUIRED: 2003 NISSAN ALTIMA 7/01/2003

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD:

**PURCHASE** 3/31/2008 **NELSON NISSAN** 

GROSS SALES PRICE: COST OR OTHER BASIS:

4,910. 22,186.

BASIS METHOD:

COST

DEPRECIATION:

18,969.

GAIN (LOSS) 1,693.

DESCRIPTION:

2006 FORD EXPEDITION 8/01/2006

DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

**PURCHASE** 4/18/2008

TO WHOM SOLD:

CHEROKEE NEAFUS

GROSS SALES PRICE: COST OR OTHER BASIS:

30,932.

BASIS METHOD:

COST

COST

DEPRECIATION:

5,568.

GAIN (LOSS) -25,364.

DESCRIPTION:

TO WHOM SOLD:

76TH & S LEWIS EASEMENT

DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

4/01/1968 **PURCHASE** 9/04/2007 CITY OF TULSA

GROSS SALES PRICE: COST OR OTHER BASIS: 80,062. 3,200.

BASIS METHOD: COST

GAIN (LOSS)

76,862.

**DESCRIPTION:** DATE ACQUIRED:

2 HANDHELD MICS & RECEIVER 4/01/2004 **PURCHASE** 

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD:

4/01/2008 REPLACED DUE TO AGE

GROSS SALES PRICE: COST OR OTHER BASIS:

0.

BASIS METHOD:

2,877.

DEPRECIATION:

2,589.

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-288.

GAIN (LOSS)

STATEMENT 1 (CONTINUED)
FORM 990, PART I, LINE 8
<b>NET GAIN (LOSS) FROM NONINVENTORY SALES</b>

DESCRIPTION: MABEE CENTER MARQUEE

DATE ACQUIRED: 7/01/1994
HOW ACQUIRED: PURCHASE
DATE SOLD: 4/01/2008

TO WHOM SOLD: REPLACED DUE TO AGE

GROSS SALES PRICE:

COST OR OTHER BASIS: 337,400.

BASIS METHOD: COST

DEPRECIATION: 118,428.

GAIN (LOSS) -218,972.

DESCRIPTION: DYNATRON 950+
DATE ACQUIRED: 7/01/2001
HOW ACQUIRED: PURCHASE
DATE SOLD: 8/24/2007

TO WHOM SOLD: CORNISH MEDICAL ELECTRONICS

GROSS SALES PRICE: 1,034.
COST OR OTHER BASIS: 3,145.

BASIS METHOD: COST

DEPRECIATION: 764.

GAIN (LOSS) -1,347.

DESCRIPTION: DYNATRON 950
DATE ACQUIRED: 7/01/2001
HOW ACQUIRED: PURCHASE
DATE SOLD: 8/24/2007

TO WHOM SOLD: CORNISH MEDICAL ELECTRONICS

GROSS SALES PRICE: 391. COST OR OTHER BASIS: 2,296.

BASIS METHOD: COST

DEPRECIATION: 558.

GAIN (LOSS) -1,347.

DESCRIPTION: SCANNER
DATE ACQUIRED: 7/01/2001
HOW ACQUIRED: PURCHASE
DATE SOLD: 4/01/2008

TO WHOM SOLD: REPLACED DUE TO AGE

GROSS SALES PRICE:

COST OR OTHER BASIS: 1,085.

BASIS METHOD: COST DEPRECIATION:

GAIN (LOSS) -108.

977.

DESCRIPTION: 2 COMPUTERS
DATE ACQUIRED: 7/01/2001
HOW ACQUIRED: PURCHASE
DATE SOLD: 4/01/2008

TO WHOM SOLD: REPLACED DUE TO AGE

GROSS SALES PRICE: 0.

COST OR OTHER BASIS: 1,704.

BASIS METHOD: COST DEPRECIATION: 1,534.

DEPRECIATION: 1,534.
GAIN (LOSS) -170.

DESCRIPTION: DIGITAL VIDEO BATTERY CAMERA

## FEDERAL STATEMENTS

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**ORAL ROBERTS UNIVERSITY** 

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**STATEMENT 1 (CONTINUED)** FORM 990, PART I, LINE 8

**NET GAIN (LOSS) FROM NONINVENTORY SALES** 

DATE ACQUIRED: HOW ACQUIRED:

7/01/2001 PURCHASE 4/01/2008

DATE SOLD: TO WHOM SOLD:

REPLACED DUE TO AGE

GROSS SALES PRICE: COST OR OTHER BASIS:

0. 2,550.

BASIS METHOD:

COST

**DEPRECIATION:** 

2,295.

2001 FORD ECONOLINE VAN

GAIN (LOSS)

GAIN (LOSS)

-255.

DESCRIPTION: DATE ACQUIRED:

7/01/2001 **PURCHASE** HOW ACQUIRED: DATE SOLD: 4/01/2008 TO WHOM SOLD: UNKNOWN

GROSS SALES PRICE:

COST OR OTHER BASIS:

14,272.

BASIS METHOD: **DEPRECIATION:** 

COST

12,845.

-1,427.

DESCRIPTION: DATE ACQUIRED: 1999 YAMAHA GOLF CART 7/01/2003 **PURCHASE** 

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD:

8/17/2007 CLASSIC GOLF CART

GROSS SALES PRICE: COST OR OTHER BASIS:

400. 2,500.

BASIS METHOD:

2,138.

**DEPRECIATION:** 

GAIN (LOSS)

38.

**DESCRIPTION:** DATE ACQUIRED: 1996 EZ-GO GOLF CART 7/01/2003

HOW ACQUIRED: DATE SOLD:

PURCHASE 8/17/2007

TO WHOM SOLD: GROSS SALES PRICE: CLASSIC GOLF CART 200.

COST OR OTHER BASIS:

2,000.

BASIS METHOD:

COST

COST

**DEPRECIATION:** 

486.

GAIN (LOSS) -1,314.

DESCRIPTION: DATE ACQUIRED:

LIBRARY MATERIALS VARIOUS **PURCHASE VARIOUS** 

HOW ACQÜIRED: DATE SOLD: TO WHOM SOLD:

**VARIOUS** 

COST

GROSS SALES PRICE: COST OR OTHER BASIS:

53,604.

BASIS METHOD: DEPRECIATION:

45,563.

GAIN (LOSS)

-8,041.

**DESCRIPTION:** 

PRINT JOURNALS

**VARIOUS** PURCHASE **VARIOUS** 

DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

## FEDERAL STATEMENTS

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**ORAL ROBERTS UNIVERSITY** 

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**STATEMENT 1 (CONTINUED)** FORM 990, PART I, LINE 8 **NET GAIN (LOSS) FROM NONINVENTORY SALES** 

TO WHOM SOLD:

OUT-OF-DATE DELETIONS

GROSS SALES PRICE: COST OR OTHER BASIS:

540,078.

BASIS METHOD:

COST

**DEPRECIATION:** 

183,389.

**DESCRIPTION:** DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

TV EQUIPMENT VARIÕUS **PURCHASE VARIOUS** 

TO WHOM SOLD: GROSS SALES PRICE: **OBSOLETE DISPOSITIONS** 

COST OR OTHER BASIS:

COST

BASIS METHOD: DEPRECIATION:

217,722.

92,097.

GAIN (LOSS)

GAIN (LOSS)

-125,625.

-356,689.

**DESCRIPTION:** DATE ACQUIRED: HOW ACQUIRED: DATE SOLD:

TV EQUIPMENT **VARIOUS PURCHASE** 4/30/2008

TO WHOM SOLD: GROSS SALES PRICE: OBSOLETE DISPOSITIONS

308, 325.

COST OR OTHER BASIS: BASIS METHOD:

COST

GAIN (LOSS)

-308,325.

**DESCRIPTION:** DATE ACQUIRED: HOW ACQUIRED:

CHRIST CHAPEL LOWER ROOF **VARIOUS** 

**PURCHASE** DATE SOLD: **VARIOUS** DISPOSITION DUE TO DAMAGE TO WHOM SOLD:

GROSS SALES PRICE: COST OR OTHER BASIS:

50,500.

BASIS METHOD:

COST DEPRECIATION:

3,030.

GAIN (LOSS) -47,470.

DESCRIPTION:

WARREN COUNTY, MO PROPERTY

DATE ACQUIRED: **VARIOUS** HOW ACQUIRED: DONATED DATE SOLD: 5/01/2007

TO WHOM SOLD: GROSS SALES PRICE: LAKE SHERWOOD ESTATES ASSOCIATION

11,250.

COST OR OTHER BASIS: BASIS METHOD:

COST

COST

GAIN (LOSS)

-11,250.

**DESCRIPTION:** 

GAIN ON BUSINESS SETTLEMENTS

DATE ACQUIRED: **VARIOUS** HOW ACQUIRED: **PURCHASE** DATE SOLD: **VARIOUS** TO WHOM SOLD: **VARIOUS** 

GROSS SALES PRICE:

30,215. 0.

COST OR OTHER BASIS: BASIS METHOD:

### FEDERAL STATEMENTS

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**ORAL ROBERTS UNIVERSITY** 

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**STATEMENT 1 (CONTINUED)** FORM 990, PART I, LINE 8 **NET GAIN (LOSS) FROM NONINVENTORY SALES** 

GAIN (LOSS)

30,215.

TOTAL GAIN (LOSS) OTHER ASSETS \$ -998,607.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ -953,345.

**STATEMENT 2 FORM 990, PART I, LINE 20** OTHER CHANGES IN NET ASSETS OR FUND BALANCES

AUD ADJ-PERM RESTR ASSETS NET UNREALIZED LOSS PRIOR YRS-AUDIT ADJ-TEMP RESTR ASSETS PRIOR YRS-AUDIT ADJ-UNRESTR ASSETS

\$ 3,176,523. -79,019. -109,844. -16,844,714. TOTAL \$ -13,857,054.

#### **STATEMENT 3** FORM 990, PART II, LINE 22B OTHER GRANTS AND ALLOCATIONS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

SCHOLARSHIPS/FELLOWSHIPS

**STUDENTS** 

NOT APPLICABLE TULSA, OK 74171

RELATIONSHIP OF DONEE: STUDENTS

AMOUNT GIVEN:

\$ 17,390,333.

TOTAL GRANTS AND ALLOCATIONS \$ 17,390,333.

#### **STATEMENT 4** FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) <u>FUNDRAISING</u>
ADVERTISING AFFILIATE BAD DEBT ALLOW BAD DEBT ALLOWANCE COST OF FOOD SALES	471,497. 2,005,945. 1,136,779. 4,405,597.	410,269. 10,149. 4,405,597.	59,018. 2,005,945. 1,126,630.	2,210.
INFORMATION TECHNOLOGY INSURANCE	1,028,947. 805,557.	474,592. 219,094.	549,113. 586,463.	5,242.
MEMBERSHIPS MISCELLANEOUS EXPENSES PMTS TO LIFE INCOME BENEFICIAR	227,943. 549,043. 413,535.	125,894. 433,494.	101,400. 106,824. 413,535.	649. 8,725.

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	ORAL ROBERTS UNI	VERSITY	······	73-073962
STATEMENT 4 (CONTINUED) FORM 990, PART II, LINE 43 OTHER EXPENSES				
	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) <u>FUNDRAISING</u>
PROFESSIONAL FEES PURCHASED SERVICES STUDENT AID PROGRAM COSTS	824,084. 1,422,306. 502,353. TOTAL \$13,793,586. \$	183,184. 1,167,798. 497,603. 7,927,674.	215,615.	38,893. \$ 55,719.
	101AL \$13,793,586. \$	1,921,614.	\$ 5,810,193.	\$ 55,719.
STATEMENT 6 FORM 990, PART III, LINE E STATEMENT OF PROGRAM SER	PVICE ACCOMPLISHMENTS			
FORM 990, PART III, LINE E STATEMENT OF PROGRAM SER	RVICE ACCOMPLISHMENTS		GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
FORM 990, PART III, LINE E STATEMENT OF PROGRAM SER				SERVICE EXPENSES
FORM 990, PART III, LINE E STATEMENT OF PROGRAM SER . DES	SCRIPTION	GN GRANTS:	ALLOCATIONS _ 13,331.	SERVICE EXPENSES 1,820,838.
FORM 990, PART III, LINE E STATEMENT OF PROGRAM SER . DES	SCRIPTION INCLUDES FOREI	IGN GRANTS:	ALLOCATIONS _ 13,331.	SERVICE EXPENSES 1,820,838.

LOANS TO STUDENTS

VARIOUS VARIOUS

STUDENT

0.01%

NOTES AND LOANS RED BORROWER'S NAME: BORROWER'S TITLE: DATE OF NOTE: MATURITY DATE: REPAYMENT TERMS: INTEREST RATE: SECURITY PROVIDED: PURPOSE OF LOAN:

BORROWER RELATIONSHIP:

CONSIDERATION:

CONSIDERATION FMV: ORIGINAL AMOUNT: BALANCE DUE: DOUBTFUL ACCT. ALLOW.:

\$ 27,256,028.

2,531,900.

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#### **ORAL ROBERTS UNIVERSITY**

73-0739626

STATEMENT 7 (CONTINUED) FORM 990, PART IV, LINE 51 OTHER NOTES AND LOANS RECEIVABLE

TOTAL NOTES AND LOANS REPORTED SEPARATELY \$ 27,256,028. \$ 2,531,900.

TOTAL NET RECEIVABLES \$ 24,724,128.

STATEMENT 8 FORM 990, PART IV, LINE 54A INVESTMENTS - PUBLICLY TRADED SECURITIES

OTHER PUBLICLY TRADED SECURITIES

VALUATION METHOD

AMOUNT

**SECURITIES** 

MARKET VALUE

\$ 5,499,597.

TOTAL \$ 5,499,597.

PUBLICLY TRADED SECURITIES \$ 5,499,597.

STATEMENT 9 FORM 990, PART IV, LINE 55B INVESTMENTS - LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
MACHINERY AND EQUIPMENT BUILDINGS LAND	\$ 28,108,885. 90,528,841. 2,815,144. TOTAL \$ 121452870.	\$ 15,857,474. 70,194,721. \$ 86,052,195.	20,334,120. 2,815,144.

STATEMENT 10 FORM 990, PART IV, LINE 56 INVESTMENTS - OTHER

DESCRIPTION OF INVESTMENT	VALUATION METHOD			BOOK VALUE
ENDOWMENT TRUST MARKETABLE SECURITIES INVESTMENT IN SUBSIDIARY	COST COST	mom. r	\$	2,740,962. 715,892.
		TOTAL	<u>\$</u>	<u>3,456,854.</u>

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#### **ORAL ROBERTS UNIVERSITY**

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STATEMENT 11	
FORM 990, PART IV, LINE 57	
LAND, BUILDINGS, AND EQUI	<b>PMENT</b>

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
AUTOMOBILES / TRANSPORTATION EQUIPMENT MACHINERY AND EQUIPMENT BUILDINGS LAND MISCELLANEOUS TOTAL	\$ 1,383,745. 37,637,487. 86,137,057. 1,214,301. 16,304,117. \$ 142676707.	\$ 927,369. 28,956,562. 37,197,496.	\$ 456,376. 8,680,925. 48,939,561. 1,214,301. 6,717,002. \$ 66,008,165.

#### STATEMENT 12 FORM 990, PART IV, LINE 58 OTHER ASSETS

INT IN ASSETS OF ALUMNI FUND INT IN ASSETS OF GOLDEN EAGLE CLUB ROCK/MINERAL/ARTIFACT COLLECTION

\$ 1,888,896. 970,396. 1,403,166. TOTAL \$ 4,262,458.

#### STATEMENT 13 FORM 990, PART IV, LINE 64B MORTGAGES AND OTHER NOTES PAYABLE

OTHER NOTES PAYABLE

LENDER'S NAME: BALANCE DUE: NOTES PAYABLE

\$ 23,729,151.

LENDER'S NAME: BALANCE DUE:

BALANCE DUE:

REFUNDABLE FED STUDENT LOANS

LENDER'S NAME: PAYABLE TO AFFILIATE:

\$ 20,117,401.

PAYABLE TO AFFILIATES

\$ 1,844,978. TOTAL \$ 45,691,530.

#### STATEMENT 14 FORM 990, PART IV, LINE 65 OTHER LIABILITIES

LIFE LOAN PAYABLE RESERVE FOR GIFT ANNUITIES

\$ 876,404. TOTAL \$ 2,632,088.

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	ORAL ROBERTS UNIVERSITY	73-0739626
STATEMENT 15 FORM 990, PART IV-A, LIN OTHER AMOUNTS REVENUE OF SUBSIDIARI SCHOLARSHIPS NET IN R	ES	\$ 1,925,337. -17,258,761. \$ -15,333,424.
STATEMENT 16 FORM 990, PART IV-A, LIN OTHER AMOUNTS  COMMERCIAL REAL ESTAT INSITUTION EXP NETTED INSITUTION EXP NETTED INTEREST EXPENSE NETT LOSS ON SALE/DISPOSAL OTHER EXP NETTED TO M	E EXPENSES TO AUX SALES/SVCS TO MISC INCOME ED TO RENTAL INCOME OF ASSETS	\$ -12,099,795. 93,033. 653,200. -610,473. -11,250. 310,754. TOTAL \$ -11,664,531.
STATEMENT 17 FORM 990, PART IV-B, LIN OTHER AMOUNTS  COMMERCIAL REAL ESTAT EXPENSES OF SUBSIDIAR INSITUTION EXP NETTED INSITUTION EXP NETTED INT EXP NETTED TO REN LOSS ON SALE IN OTHER OTHER EXP NETTED TO M	E EXPENSE IES CONSOL ON F/S TO AUX SALES/SVCS TO MISC INCOME TAL INCOME ON T/R EXPENSE ON F/S	\$ 12,099,795. 1,901,092. -93,033. -653,200. 610,473. 11,250. -310,754. TOTAL \$ 13,565,623.
STATEMENT 18 FORM 990, PART IV-B, LINI OTHER AMOUNTS  SCHOLARSHIPS NETTED I		TOTAL \$ 17,258,761.

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**ORAL ROBERTS UNIVERSITY** 

73-0739626

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
G. ORAL ROBERTS	CHANCELLOR 5.00	\$ 0.	\$ 0.	\$ 147.
TULSA, OK 74171	0.00			
RALPH B. FAGIN	INTER PRESIDENT 40.00	169,771.	10,163.	12,854.
TULSA, OK 74171	40.00			
RICHARD L. ROBERTS	PRESIDENT & CEO 40.00	207,608.	8,176.	0.
TULSA, OK 74171	40.00			
JEFF OGLE	VP ACADEMIC ADV 40.00	100,175.	11,292.	7,528.
TULSA, OK 74171	40.00			
D. MICHAEL BERNARD	VP/ASST. SEC. 40.00	83,458.	10,204.	647.
TULSA, OK 74171	40.00			
DAVID ELLSWORTH	EVP/SEC/ASST TR 40.00	204,148.	11,876.	18,846.
TULSA, OK 74171	40.00			
DAVID WAGNER	VP UNIV RELATNS	113,016.	12,835.	2,143.
TULSA, OK 74171	40.00			
MIKE CARTER	ATHLETIC DIRECT 40.00	299,544.	15,914.	39,822.
TULSA, OK 74171	40.00			
TIM PHILLEY	VP AUXIL SVCS 40.00	252,482.	11,465.	2,658.
TULSA, OK 74171	40.00			
NANCY BRAINARD	VP ENROLL SVCS	134,757.	14,830.	103.
TULSA, OK 74171	40.00			
GEORGE PAUL	AVP ALUM REL	85,758.	7,158.	168.
* TULSA, OK 74171	40.00			
MARK LEWANDOWSKI * TULSA, OK 74171	EVP ACADEMIC 40.00	201,361.	15,227.	1,169.

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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
MARIAN BAUMGARDNER * TULSA, OK 74171	ASST SECRETARY 40.00	\$ 39,436.	\$ 5,537.	\$ 0.
DEBRA SOWELL * TULSA, OK 74171	INT VP ACADEMIC 40.00	90,355.	9,629.	471.
MART GREEN * OKLAHOMA CITY, OK 73179	BOARD CHAIR 30.00	0.	0.	0.
WILLIAM M. WILSON  * CLEVELAND, TN 37320	VICE CHAIRMAN 32.00	0.	0.	0.
GLENDA PAYAS * TULSA, OK 74135	SECRETARY 15.00	0.	0.	0.
JAY BETZ * TULSA, OK 74137	TREASURER 5.00	0.	0.	0.
RICHARD FENIMORE * TULSA, OK 74137	TRUSTEE 15.00	0.	0.	0.
RUSS SPITTLER  * PASADENA, CA 91107	TRUSTEE 4.00	0.	0.	0.
CHARLES MCKINNEY  * FORT MYERS, FL 33965	TRUSTEE 4.00	0.	0.	0.
RON LUCE * GARDEN VALLEY, TX 75771	TRUSTEE 4.00	0.	0.	0.
MICHAEL A. HAMMER  * LOS ANGELES, CA 90025	TRUSTEE 5.00	0.	0.	0.
LYNETTE LEWIS * CARY, NC 27519	TRUSTEE 5.00	0.	0.	0.

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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		CONTRI- BUTION TO EBP & DC	
ROB HOSKINS	TRUSTEE 4.00	\$	0. \$ 0.	\$ 0.
POMPANO BEACH, FL 33069				
DON ARGUE	TRUSTEE 5.00	(	0.	0.
KIRKLAND, WA 98296				
HAL DONALDSON	TRUSTEE 2.00	(	0.	0.
SPRINGFIELD, MO 65802	2000			
STANLEY M. BURGESS	TRUSTEE 5.00	(	0.	0.
CHESAPEAKE, VA 23323				
FREDDY BOSWELL, JR.	TRUSTEE 4.00	(	0.	0.
DALLAS, TX 75236	4.00			
SCOTT HOWARD	TRUSTEE 25.00	(	0.	0.
LAS VEGAS, NV 89103	25.00			
SCOTT CORDRAY	TRUSTEE 3.00	C	0.	0.
TULSA, OK 74137	3.00			
MARY BANKS	TRUSTEE 4.00	C	0.	0.
HOUSTON, TX 77273	4.00			
BILLY JOE DAUGHERTY	INTER PRESIDENT 30.00	C	0.	0.
TULSA, OK 74136	30.00			
GEORGE PEARSONS	REGENT CHAIR 30.00	C	0.	0.
NEWARK, TX 76071	30.00			
COLEEN BARKER	VP PARTNER COMM	(	0.	0.
TULSA, OK 74171	U			
LINDSAY ROBERTS	REGENT	C	0.	0.
*TULSA, OK 74171	0			

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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DAVID DEL ZOTTO	REGENT 3.00	\$ 0.	\$ 0.	\$ 0.
SCOTIA, NY 12302				
PETE SUMRALL * SOUTH BEND, IN 46614	REGENT 20.00	0.	0.	0.
CHARLES GREEN * BATON ROUGE, LA 70835	REGENT 25.00	0.	0.	0.
CREFLO DOLLAR * COLLEGE PARK, GA 30349	REGENT 3.00	0.	0.	0.
KARL STRADER * LAKELAND, FL 33809	REGENT 3.00	0.	0.	0.
ELDON THORMAN * CLAY CENTER, KS 67432	REGENT 3.00	0.	0.	0.
CHARLES TREBILCOCK * WARREN, OH 44484	REGENT 3.00	0.	0.	0.
CHARLES E. WATSON * LEBANON, OH 45036	REGENT 3.00	0.	0.	0.
RALPH WILKERSON * DANA POINT, CA 92629	REGENT 3.00	0.	0.	0.
JAMES E. WINSLOW, JR. * CHICKASHA, OK 73018	REGENT 3.00	0.	0.	0.
JOHN C. HAGEE * SAN ANTONIO, TX 78258	REGENT 3.00	0.	0.	0.
DON BULLARD * TEMPLETON, CA 93465	REGENT 3.00	0.	0.	0.

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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	 COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
HENRY A. PENIX * TULSA, OK 74132	REGENT 3.00	\$ 0.	\$ 0.	\$ 0.
JAMES BLANCHETT  * SUNRISE, FL 33313	REGENT 3.00	0.	0.	0.
KENNETH COPELAND  * FORT WORTH, TX 76192	REGENT 3.00	0.	0.	0.
RICHARD PEARSON * BRANTFORD, ONTARIO N3T 5L7 CANADA	REGENT 3.00	0.	0.	0.
KAREN ARUTUNOFF * TULSA, OK 74114	REGENT 20.00	0.	0.	0.
BILL SCHEER * TULSA, OK 74145	REGENT 3.00	0.	0.	0.
JERE D. MELILLI * BATON ROUGE, LA 70809	REGENT 3.00	0.	0.	0.
JESSE G. DUPLANTIS * HAMMOND, LA 70404	REGENT 3.00	0.	0.	0.
ULF EKMAN * UPPSALA, 75103 SWEDEN	REGENT 3.00	0.	0.	0.
MICHAEL REID  * BRENTWOOD, CM14 15 PS UNITED KING	REGENT 3.00 GDOM	0.	0.	0.
JERRY SAVELLE * CROWLEY, TX 76036	REGENT 5.00	0.	0.	0.
JOHN MEARES * UPPER MARLBORO, MD 20772	REGENT 3.00	0.	0.	0.

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STATEMENT 19 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
MYLES E. MUNROE * NASSAU, BAHAMAS	REGENT 3.00	\$ 0.	\$ 0.	\$ 0.
TERRY LAW * TULSA, OK 74101	REGENT 2.00	0.	0.	0.
OZRO T. JONES, JR. * PHILADELPHIA, PA 19139	REGENT 0	0.	0.	0.
I.V. HILLIARD  * HOUSTON, TX 77067	REGENT 3.00	0.	0.	0.
FRANK HOLDER * TUCSON, AZ 85718	REGENT 3.00	0.	0.	0.
BENNY HINN * IRVING, TX 75016	REGENT 0	0.	0.	0.
MARILYN HICKEY * ENGLEWOOD, CO 80111	REGENT 4.00	0.	0.	0.
BARRY HON * FOOTHILL RANCH, CA 92610	REGENT 4.00	0.	0.	0.
*STREET ADDRESS OMITTED	0	0.	0.	0.
	TOTAL	\$1,981,869.	\$ 144,306.	<u>\$ 86,556.</u>

STATEMENT 20 FORM 990, PART V-A, LINE 75B COMPENSATION PAID TO RELATED INDIVIDUALS

NAME AND RELATIONSHIP

RICHARD L. ROBERTS

RICHARD E. ROBERTS
RICHARD ROBERTS IS THE SON OF ORAL ROBERTS AND THE HUSBAND OF LINDSAY ROBERTS.

LINDSAY ROBERTS

# STATEMENT 20 (CONTINUED) FORM 990, PART V-A, LINE 75B **COMPENSATION PAID TO RELATED INDIVIDUALS**

LINDSAY ROBERTS IS THE WIFE OF RICHARD ROBERTS AND THE DAUGHTER-IN-LAW OF ORAL ROBERTS.

KENNETH COPELAND

KENNETH COPELAND IS THE FATHER-IN-LAW OF GEORGE PEARSONS.

GEORGE PEARSONS

GEORGE PEARSONS IS THE SON-IN-LAW OF KENNETH COPELAND.

G. ORAL ROBERTS

ORAL ROBERTS IS THE FATHER OF RICHARD ROBERTS AND THE FATHER-IN-LAW OF LINDSAY ROBERTS.

#### **STATEMENT 21 FORM 990, PART V-A, LINE 75C** INDIVIDUALS COMPENSATION BY RELATED ORGANIZATIONS

RICHARD L. ROBERTS

RELATED ORGANIZATION: ORAL ROBERTS EVANGELISTIC ASSN

FEIN: 73-0568096

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND RELATIONSHIP EXPLANATION:

DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

COMPENSATION PAID: \$ 51,928.

\$ 6,854. \$ 67,016. BENEFIT PLAN CONTRIBUTIONS: **EXPENSE ACCOUNT:** 

COMPENSATION ARRANGEMENT: COMPENSATION FOR ADDITIONAL SERVICES.

TRACO ADVERTISING, INC. RELATED ORGANIZATION:

FEIN: 73-0699944

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND RELATIONSHIP EXPLANATION:

DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

COMPENSATION PAID: \$ 109,000.

\$ 6,975.

BENEFIT PLAN CONTRIBUTIONS: EXPENSE ACCOUNT: \$ 0.

COMPENSATION FOR ADDITIONAL SERVICES. COMPENSATION ARRANGEMENT:

D. MICHAEL BERNARD

RELATED ORGANIZATION: ORAL ROBERTS EVANGELISTIC ASSN

73-0568096 FEIN:

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND RELATIONSHIP EXPLANATION: DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

COMPENSATION PAID: \$ 60,208.

BENEFIT PLAN CONTRIBUTIONS: \$ 4,606.

**EXPENSE ACCOUNT:** \$ 0.

COMPENSATION FOR ADDITIONAL SERVICES. COMPENSATION ARRANGEMENT:

COLEEN BARKER

RELATED ORGANIZATION: ORAL ROBERTS EVANGELISTIC ASSN

73-0568096 FEIN:

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STATEMENT 21 (CONTINUED) FORM 990, PART V-A, LINE 75C INDIVIDUALS COMPENSATION BY RELATED ORGANIZATIONS

RELATIONSHIP EXPLANATION:

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND

DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

COMPENSATION PAID:

BENEFIT PLAN CONTRIBUTIONS:

EXPENSE ACCOUNT:

COMPENSATION ARRANGEMENT:

\$ 110,861. \$ 11,498. \$ 0.

BASE PAY.

73-0568096

\$ 61,785.

\$ 5,381.

LINDSAY ROBERTS

RELATED ORGANIZATION:

FEIN:

RELATIONSHIP EXPLANATION:

COMPENSATION PAID:

**EXPENSE ACCOUNT:** 

COMPENSATION ARRANGEMENT:

BENEFIT PLAN CONTRIBUTIONS:

\$ 717. BASE PAY.

RELATED ORGANIZATION:

FEIN:

RELATIONSHIP EXPLANATION:

COMPENSATION PAID: BENEFIT PLAN CONTRIBUTIONS:

EXPENSE ACCOUNT:

COMPENSATION ARRANGEMENT:

TRACO ADVERTISING, INC.

ORAL ROBERTS EVANGELISTIC ASSN

73-0699944

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND

DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

\$ 103,300.

\$ 6,774.

\$ 0.

BASE PAY.

DAVID J. ELLSWORTH

RELATED ORGANIZATION:

FEIN:

RELATIONSHIP EXPLANATION:

COMPENSATION PAID:

BENEFIT PLAN CONTRIBUTIONS: **EXPENSE ACCOUNT:** 

COMPENSATION ARRANGEMENT:

ORAL ROBERTS EVANGELISTIC ASSN

73-0568096

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

\$ 16,295.

\$ 1,247.

\$ 0.

COMPENSATION FOR ADDITIONAL SERVICES.

RELATED ORGANIZATION:

FEIN:

RELATIONSHIP EXPLANATION:

TRACO ADVERTISING, INC.

73-0699944

COMMON CONTROL: A MAJORITY OF THE OFFICERS AND DIRECTORS ARE THE SAME FOR BOTH ORGANIZATIONS.

COMPENSATION PAID:

BENEFIT PLAN CONTRIBUTIONS:

**EXPENSE ACCOUNT:** 

COMPENSATION ARRANGEMENT:

\$ 16,760.

\$ 1,282. ŝΟ.

COMPENSATION FOR ADDITIONAL SERVICES.

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#### STATEMENT 22 FORM 990, PART VI, LINE 80B RELATED ORGANIZATIONS

NAME OF ORGANIZATION	<u>EXEMPT</u>	NONEXEMPT
GOLDEN EAGLE COMMUNICATIONS, INC.	Х	
ORAL ROBERTS EARLY LEARNING CENTER	X	
ORAL ROBERTS EVANGELISTIC ASSOCIATION	Х	
ORAL ROBERTS UNIVERSITY EACADEMY	Х	
ORAL ROBERTS UNIVERSITY EDUC FELLOWSHIP	X	
ORU ALUMNI FOUNDATION	X	
ORU GOLDEN EAGLE CLUB	X	
UNIVERSITY VILLAGE, INC.	X	
·		

#### STATEMENT 23 FORM 990 , PART VI, LINE 89B 501(C)(3) AND 501(C)(4) ORGANIZATIONS

SEE STATEMENT 28 TO AMENDED 2006 FORM 990.

#### STATEMENT 24 FORM 990, PART IX INFORMATION REGARDING TAXABLE SUBSIDIARIES

NAME, ADDRESS AND EIN OF CORPORATION, PARTNERSHIP, OR DISREGARDED ENTITY	% OF OWNER INT.	NATURE OF ACTIVITIES	TOTAL INCOME	END OF YEAR ASSETS
GOLDEN EAGLE COMM., INC. 7777 S LEWIS AVE TULSA, OK 74171 73-1507869	100.00%	SERVICE	-30,207.	-1,592,628.
MABEE CENTER PRODUCTIONS, INC. 7777 S LEWIS AVE TULSA, OK 74171 73-1507871	100.00%	SERVICE	6,139.	67,754.
ORM SERVICES, INC. 7777 S LEWIS AVE TULSA, OK 74171 73-1477340	100.00%	MANAGEMENT SVCS	-675.	-14,330.
TOWER REALTY GROUP, INC. 7777 S LEWIS AVE TULSA, OK 74171 73-1520958	100.00%	PROPERTY MGMT	0.	-250.
UNIVERSITY BROADCASTING, INC. 7777 S LEWIS AVE TULSA, OK 74171 73-1493165	100.00%	TV BROADCASTING	53,848.	403,650.
AUGUST PROMOTIONS, INC. 7777 S LEWIS AVE TULSA, OK 74171	100.00%	EVENT PROMOTER	-749.	-247,307.

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STATEMENT 24 (CONTINUED)
FORM 990, PART IX
INFORMATION REGARDING TAXABLE SUBSIDIARIES

NAME, ADDRESS AND EIN OF CORPORATION, PARTNERSHIP, OR DISREGARDED ENTITY % OF OWNER INT.

NATURE OF ACTIVITIES

TOTAL INCOME

END OF YEAR ASSETS

73-1507872

STATEMENT 25 SCHEDULE A, PART III, LINE 3A QUALIFICATIONS OF RECIPIENTS RECEIVING GRANTS OR LOANS

SCHOLARSHIPS, GRANTS, AND LOANS ARE AWARDED TO INDIVIDUAL STUDENTS OF ORAL ROBERTS UNIVERSITY.

STATEMENT 26 SCHEDULE A, PART V, LINE 34 EXPLANATION

ORAL ROBERTS UNIVERSITY PARTICIPATES IN THE FOLLOWING U.S. DEPARTMENT OF EDUCATION STUDENT FINANCIAL AID PROGRAMS:

FEDERAL PERKINS LOANS FEDERAL WORK STUDY FEDERAL SEOG GRANTS FEDERAL PELL GRANTS FEDERAL ACG GRANTS FEDERAL SMART GRANTS