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Compensation of Officers, Directors, Trusless, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether ind ividuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 and/or Box 7 of Form 1099-MISC) 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

\overline{X} Check this box if the organization did not compensate a		irector,	tru			key en	plo			r
(A)	(B) (C)							(D)	(E)	(F)
Name and Title	Average hours per week	itt di	I t nr s t t s i t	Office	all the year ployee	H c e I om h p l e e o s n y t s e t e d	F	Reportabing compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Es imated amount of other compensation from the organization and related organizations
JAVONNA EARSOM										
1126 W BROADWAY	1			X				0	0	0
JOANN POINDEXTER						1				
624 W LIVEOAK	1	ļ	_	X	_			0	0	0
MARY JO BULLIS					1	}	}			1
RT 1 BOX 9	1		_	X		<u> </u>		0	0	0
MARIE JONES						ļ	ļ			
1109 E 2ND ST	1	<u> </u>		X		ļ		0	0	0
MARY BACON										
502 N CHICKASAW	1	ļ		X	1	ļ		0	0	0
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SCHEDULE, A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

nonexempt charitable trusts

OMB No 1545-0047 2008

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions

. Inspection

Employer identification number

KL	AHON	1A HOME & COMM	UNITY EDUCATI	ON					13-6	0110/46		_	
Pa	rt	Reason for	Public Charit	y Status (All organiza	ations mus	t complete	e this part)	(see instr	uctions)				
The	orga			use it is (Please check o									
1		A church, conventio	n of churches, or a	ssociation of churches d	escribed in	section 1	170(b)(1)(A	(ı)					
2		A school described	ın section 170(b)(1)(A)(II) (Attach Schedule	εE)								
3		A hospital or a coop	erative hospital sei	vice organization descri	bed in sec t	ti <mark>on 170</mark> (b)(1)(A)(III)	(Attach So	hedule H)			
4	$\overline{\Box}$	A medical research	organization opera	ted in conjunction with a	hospital d	escribed ii	n section 1	170(b)(1)(A)(m) Ente	r the hospi	tal's nan	ie,	
		city, and state											
5		An organization ope	erated for the benef	it of a college or universi	ity owned o	or operate	d by a gov	ernmental	unit descri	bed in			
		section 170(b)(1)(A)(ıv). (Complete Pa	rt II)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v)											
7	\mathbf{x}												
		described in section 170(b)(1)(A)(vi) (Complete Part II)											
8		A community trust d	escribed in section	170(b)(1)(A)(vi). (Comp	lete Part II)							
9	\sqcap	An organization that	t normally receives	(1) more than 33 1/3%	of its supp	ort from co	ontributions	s, members	ship fees, i	and gross			
				empt functions - subject									
		·		and unrelated business									
				30, 1975 See section				·					
10	\Box			ed exclusively to test for p				a)(4) (see	instruction	s)			
11	\sqcap	•	•	d exclusively for the ber		•		• • •		•			
			•	orted organizations desc	•				•				
		509(a)(3). Check the	e box that describes	s the type of supporting of	organizatio	n and com	nplete lines	11e throu	gh 11h				
		a Type!	b Typ		Type III-				-	Type	II-Other		
е		By checking this box	x, I certify that the c	organization is not contro	lled directl	y or indire	ctly by one	or more d					
		persons other than	foundation manage	ers and other than one or	more pub	licly suppo	orted organ	nizations de	escribed in	section			
		509(a)(1) or section	509(a)(2)										
f		If the organization re	eceived a written de	etermination from the IR	S that it is a	a Type I, T	ype II, or T	Type III sup	porting				
		organization, check	this box · · · ·										
g		Since August 17, 20	006, has the organi	zation accepted any gift	or contribu	tion from a	any of the						
		following persons?		, , , ,			•						
		(I) A person who	directly or indirectly	controls, either alone or	together v	vith persoi	ns describe	ed in (ii)				Yes	No
		and (III) below,	the governing bod	y of the supported organ	ization?						11g(ı)		1
		(II) A family memb	er of a person des	cribed in (i) above?							11g(II)		
		(III) A 35% controll	ed entity of a perso	in described in (i) or (ii) a	above? .						11g(m)		
h		Provide the followin	g information about	t the organizations the or	rganization	supports					(**5()		
	(i) Nis	ime of supported	(n) EIN	(iii) Type of organization	(ns) is the s	raspiration	AA Dida	iou potifu	(VI)	is the	()	A	
organization		• • •			(iv) is the organization (v) Did you in col (i) listed in your the organization			ation in col organization in col			(vii) Amount of support		λ OI
				above or IRC section	governing document?		(i) of your	suppon?	(i) organized in the UIS ?		į.		
				(see instructions))	Yes	No	Yes	No	Yes	No	}		
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SCHEDULF A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

OMB No 1545-0047

Openito Rublic

Department of the Treasury Internal Revenue Service nonexempt charitable trusts.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

Employer identification number Name of the organization OKLAHOMA HOME & COMMUNITY EDUCATION 73-6110746 Reason for Public Charity Status (All organizations must complete this part) (see instructions) Part The organization is not a private foundation because it is (Please check only one organization) 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) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III) (Attach Schedule H) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 |X| An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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) 8 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). (see instructions) 10 11 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 that describes the type of supporting organization and complete lines 11e through 11h Type III-Other b Type II c Type III-Functionally integrated a Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(ı) 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(III) Provide the following information about the organizations the organization supports (vi) Is the (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vii) Amount of (i) Name of supported organization in col the organization in col organization (described on lines 1-9 in col (i) listed in your support (i) organized in the above or IRC section governing document? (i, of your support? (see instructions)) Nο Yes Nο Yes Yes No

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

	tion A. Public Support		T				
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 performed, 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 business under section 513 •						
4	Tax revenues levied for the organization'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 1-5						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000		-				
С	Add lines 7a and 7b · · · · · · · · · · · · · · · · · ·						
8	Public support (Subtract line 7c from line 6)	是,我们就是	10 Sept. 10	1341.5		的影響的	424
	tion B. Total Support	T	T		1 ("		
Gale 9	endar year (or fiscal year beginning in) Amounts from line 6	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
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						
С	Add lines 10a and 10b · · · · · · · · · · ·						
11	Net income from unrelated business activities not included in 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 IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	正规则	The state of the s		以及通過	(是認識量)	AŠŠI
14	First five years. If the Form 990 is for the organization check this box and stop here	•		•	a section 501(c)		tion, · · · · · · ▶ □
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2008 (line 8, column				• • • • • • •	15	%
16	Public support percentage from 2007 Schedule A, I			<u> </u>	• • • • • • • •	16	%
<u>Sec</u> 17	tion D. Computation of Investment Inc. Investment Income percentage for 2008 (line 10c, or			mn (f)) · · ·		17	<u>%</u>
18	Investment income percentage from 2007 Schedule	` '	•			18	
19a	33 1/3% support tests - 2008. If the organization did						
	not more than 33 1/3%, check this box and stop he					• • • •	▶ □
b	33 1/3% support tests - 2007 If the organization did	=				3 1/3%, and	line 18
	is not more than 33 1/3%, check this box and stop	here The organi	zation qualifies a	is a publicly supp	ported organizati	on •••	• • • • • • □
20	Private Foundation: If the organization did not ched	ck a box on line 1	14, 19a, or 19b, o	check this box ar	nd see instruction	s · · ·	• • • • • • •