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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Ā	For th	ne 200	8 cale	ndaı	r year, or ta	x year be	ginning		01/	/01 ·	2009 a	and e	ending			09/30	, 20 0	9	
В	Check if a	pplicable	Please	CN	ame of organiz	ation CHO	CTAW H	HOME E	FINANC	CE_C	ORPOR	ATI	ON	D Emplo	yer ide	ntification	numbe	r	
	Addr		use IRS label or		oing Business A	_								27-0	0030	542			
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		cation	F Na	ame	and address	of principal	officer .TC	OHN B	ARREE					H(a) Is the		p return for		es.	X No
_	pend	iing			20 205 C				I I (DDD					affilia H(b) Are a		es induded?	Πv	es	No
<u> </u>	Tax-ex	xempt sta		$\frac{20}{x}$	501(c) (3			4947(a	ı)(1) or	5	27			⊢ ``		halist (see	_		
<u>.</u>				1	OCTAWHOU			1	.,(., •.					⊣		tion number			
ĸ		of organi		x	Corporation	Trust	Associa	ation	Other 1			TE,	Year of form	ation 2002	_			cile	ОК
_	art l		nmary		Corporation	11,0001	7.0000	u	104.0.					2002	2 ***				<u>OR</u>
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Ver														12D		-			
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οδ <i>υ</i>	3				members of				_			r.	ECE	···	/%/	3			<u>5</u>
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	7 a	Total (gross u	nrela	ated business	revenue fro	m Part VI	III, line 12	2, column	(C) .		بـا.	man!			7a			
	b	Net ur	related	d bus	siness taxable	e income fro	m Form 9	990-T, lin	e 34		<u>)</u>	<u>}</u>	UGP	EN, UT	<u> </u>	7b			
												-		Prior \	'ear		Curre	ıt Ye	ar
Revenue	, 8	Contri	bution	and	grants (Part \	/III, line 1h)							L	1,485	5,25	5.	1,0	04,	697.
	9	Progra	am sen	исе г	evenue (Part	VIII, line 2g)	٠						L	732	2 , 39	3.	5	92,	124.
Š	10	Invest	ment ır	ncom	ne (Part VIII, o	column (A),	lines 3, 4,	, and 7d)					. . L	148	3,91	7.		13,	881.
u	11	Other	revenu	ie (P	art VIII, colur	nn (A), lines	5, 6d, 8c	, 9c, 10c	, and 11e	e)				25	5,61	5.		26,	578.
	12				dd lines 8 thr									2,392					280.
	13	Grants	s and s	ımıla	ar amounts pa	ıd (Part IX,	column (A), lines 1	-3)						2,45		_		616.
	14				r for member											NE			NONE
v.	15	Saları	es, oth	er co	mpensation,	employee b	enefits (P	art IX, co							NE	NC			
a Si	16a				Iraising fees (I											NE			NONE
Exnenses	. L				expenses, Pa														
ú	17				Part IX, colun			_						918	3,06	5	6	93	454.
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<u>=</u>	22				d balances									17, 22	7,32				
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		addres	ss, and a	ZIP +		S. YAL			JLSA,					Phone no		918-	<u> 584 -</u>	<u> 29</u> ()0
Ma	y the	IRS dis	cuss th	nis re	eturn with the	preparer sh	own abov	e? (See i	instruction	ns)						x	Yes	- 1	No

Form 990 (2008) 71

742,070. (Must equal Part IX, Line 25, column (B))

Form 990 (2008)

4e Total program service expenses ▶ \$

JSA 8E 1020 1 000

Form 990 (2008)

JSA 8E1021 1 000

Part	IV Checklist of Required Schedules			- 3 -
			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	X	1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		x.
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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, 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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	}		
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
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 U S?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	l i		
4-	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	l	,	
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18 19	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	18		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19		X
20 21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	20	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5,? <i>If</i> "Yes," <i>complete</i>			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	<u> </u>		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		Х
b	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 any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			<u> </u>
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule I., Part III	27	l	v

Part IV Checklist of Required Schedules (continued) Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, X Have a family member who had a direct or indirect business relationship with the organization? If "Yes," 28b Х Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L. Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 34 Х 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Х 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

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

Form 990 (2008)

37

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c		
2a	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 La NONE			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		ļ
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	-	-	
	this return?	3a		Х
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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		X
b	If "Yes," enter the name of the foreign country ▶	İ		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
_	and Financial Accounts	5a		!
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	36		_^_
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6.	Did the organization solicit any contributions that were not tax deductible?	6a		х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
J	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а		7 a		<u>x</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		'
	benefit contract?	7e		X
f	3 , 11 , 1	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?			
0	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			'
	organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	- 1		
1	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			,
	amounts due or received from them)	120		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	148		
D	ii ies, einei trie amount of tax-exempt interest received of accided during trie year 120		000	<u> </u>

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sect	ion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, process, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
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 of officers, directors or trustees, or key employees to a management company or other person?	3	Х	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	- ^	Х
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The assumption had O	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Done the organization have local chapters, branches, or affiliates?	9a	^_	Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	<u> </u>		
-	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		х
11	Is there any officer, director or 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 in Schedule O	11		х
Secti	on B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does 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		
b		15b		
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	on 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 (or 1024 if applicable), 990, and 990-T (501(c)(3):	only)	1	
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter	est		
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	e		
	organization ▶JOHN FERGUSON 1005 S FIFTH ST HUGO, OK 74743		- <i>-</i>	
	580-326-7521			

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- · List all of the organization's current officers, directors, trustees (whether individuals 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.

X Check this box if the organization did not compensate any officer, director, trustee, or key employee (F) (B) (E) Name and Title Average Position (check all that apply) Reportable Reportable Estimated Individual trustee or director compensation Officer compensation hours per amount of Institutional **₩** Highest compensated week from from related other employee the organizations compensation (W-2/1099-MISC) organization from the (W-2/1099-MISC) organization trustee and related organizations JOHN BARBEE NONE NONE CHAIRMAN GEORGE ROBISON MEMBER Х NONE NONE VICKIE MCCLURE X NONE NONE VICE CHAIRMAN HERBERT JESSIE Χ NONE NONE MEMBER KAYE GREEN MEMBER Х NONE NONE BILLIE RUTH ROBERTS MEMBER Х NONE NONE

Part VII Section A. Officers, Directors, Tru	1	<u> </u>			C)		3	(D)			3		
· (A)	(B) Average	Base .	ior '		•	that ac-	nh.A	Reportable	(E) Reportab	ا ما	E	(F) timate	a
Name and title	hours per	Posit				that ap		compensation	compensa	tion	am	ount c	_
	week	Individual to	Institutional	Officer	Key employee	ploy	Former	from the	from relat organizatio			other oensat	ıon
		호류	iona		탕	8 6	`	organization	(W-2/1099-N			om the	
		trustee	돌		ee	npe	ŀ	(W-2/1099-MISC)			_	inizati	
) iii	trustee			Highest compensated employee						l relate nızatıo	
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	<u>l</u>	<u> </u>											
1b Total							<u> </u>	NONE					<u>NONE</u>
2 Total number of individuals (including thos organization ► NONE	e in 1a) w	vno r	ece	ived	ım	ore t	nan	\$100,000 in rej	oortable con	npens	ation fi	om t	ne
NOINE												Yes	No
3 Did the organization list any former office	cer, directo	or or	tru	ıste	e, I	кеу є	emp	loyee, or highest	compensa	ted			
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ınd	ıvıdı	ual							3		<u> </u>
4 For any individual listed on line 1a, is the													
the organization and related organizations individual										ucn 	4	-	Х
5 Did any person listed on line 1a receiv services rendered to the organization? If "Yes,"											5		Х
Section B. Independent Contractors	- comprete c	30,100		<u> </u>		on po.		<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	· · · · · ·			
Complete this table for your five highest compensation from the organization	compensat	ted in	dep	enc	dent	con	trac	tors that received	more than	n \$10	0,000	of	
(A)							Т	(B)	- 		(C)		
Name and business add	ress						\perp	Description of sei	vices	С	ompens		
							+		-				
							\perp						
							+	<u> </u>					
2 Total number of independent contractors (including th	hose	ın	1) v	who	rece	eive	d more than \$10	0,000 in				
	NONE								j				

Pai	rt VII	Statement of Revenue			27-0030542		
•	,	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats st	1a	Federated campaigns		-			:
gifts, grants llar amounts	b	Membership dues		-			
an,	С	Fundraising events		-			
igi.	d	Related organizations		-			
ons	е	Government grants (contributions)	<u>1e</u>	-			
outi Je r	f	All other contributions, gifts, grants,					
Contributions, and other simi		and similar amounts not included above		- i			
a Co	g	Noncash contributions included in lines		li .	-	-	
e	n_	Total. Add lines 1a-1f	Business Cod				
Program Service Revenue	20	MORTGAGE INTEREST INCOME	525990	592, 124.	l i	-	
Re	2a b	HORTOFOLD TWILDINGST TREOFIL		332,124.	552, 124.		
/ice							†
Ser	٦						
E	e						
gra	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f		▶ 592,124.		<u> </u>	
	3	Investment income (including divid	lends, interest, and				
		other similar amounts)	STMT.1	▶ 67,700.			67,700.
	4	Income from investment of tax-exe		,			ļ
	5	Royalties) Real (II) Personal	NONE			-
		- 0) Real (II) Personal	_			
	6a			4			į
	b	Less rental expenses		_			
	C d	Rental income or (loss)		NONE			<u>-</u>
	"	· · ·	Securities (II) Other	NONE			
	7 a	Gross amount from sales of	96, 50	-			
	ь	assets other than inventory Less cost or other basis	70, 30	-	i		
	"	and sales expenses	150, 32	8			
	c	Gain or (loss)		 1			
	ď	Net gain or (loss)			-53,819.		
	8a	Gross income from fundrai	sing				ļ
ne	ľ	events (not including \$					
ven	,	of contributions reported on line 1c)				
Other Revenue		See Part IV, line 18	a				
her	b	Less direct expenses					i
ō	C	Net income or (loss) from fundraising	-	NONE			
	9 a	Gross income from gaming activitie See Part IV, line 19	a				
	b	Less direct expenses					
	C	Net income or (loss) from gaming a		NONE			
	10a	Gross sales of inventory, returns and allowances					,
	b	Less cost of goods sold			-		
		Net income or (loss) from sales of ii Miscellaneous Revenue	Business Cod				
							
	11a		900099_	26,578.	26, 578.		
	b						
	C	All other and					
	ď	All other revenue		26, 578			
	1 2	Total Revenue. Add lines 1h, 2g, 3		20,318			<u> </u>
	Ľ.	9c, 10c, and 11e		1,637,280	564,883.		67,700.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) Program service (A) Total expenses (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . 31,509 31,509 Grants and other assistance to individuals in the U.S. See Part IV, line 22 17,107 17,107 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 NONE Benefits paid to or for members NONE Compensation of current officers, directors, trustees, and key employees NONE Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . NONE Other salaries and wages NONE 7 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions). . NONE 9 NONE NONE 10 Fees for services (non-employees) 520,516. 520,516. NONE NONE Lobbying NONE d NONE Professional fundraising services See Part IV, line 17 NONE NONE g NONE 12 293. 293. 13 NONE Information technology 14 Royalties....... NONE 15 NONE 16 17 NONE Payments of travel or entertainment expenses 18 for any federal, state, or local public officials NONE Conferences, conventions, and meetings NONE 19 20 NONE 21 NONE 22 Depreciation, depletion, and amortization 1,150. 1,150. NONE 23 Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a TAX_EXPENSE_____ 41,000. <u>41,0</u>00. b OTHER_EXPENSES_____ 188. 188. c PROVISION_EOR_BAD_DEBTS____ 130,307 130,307 f All other expenses _____ Total functional expenses. Add lines 1 through 24f 742,070 742,070 If following Joint Costs. Check here ▶ SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising

solicitation

Form 990 (2008)

Pa	rt X	Balance Sheet					
	•		(A) Beginning of year		En	(B) d of yea	ar
	1	Cash - non-interest-bearing	1,899,225.	1	1	,155,	314.
	2	Savings and temporary cash investments	3,711,876.	2		,779,	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key					
		employees, or other related parties Complete Part II of Schedule L		5			
	6	Receivables from other disqualified persons (as defined under section					
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II					
		of Schedule L		6			
ts	7	Notes and loans receivable, net	11,563,200.	7	13	,256,	385.
Assets	8	Inventories for sales or use		8			
4	9	Prepaid expenses and deferred charges	222.	9			222.
		Land, buildings, and equipment cost basis 10a 15, 331.					
	b	Less accumulated depreciation. Complete					
		Part VI of Schedule D	52,378.	10c		13,	798.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities See Part IV, line 11 · · · · · · · · · · · · · · ·		12			
	13	Investments - program-related See Part IV, line 11		13			
	14	Intangible assets · · · · · · · · · · · · · · · · · · ·		14			
	15	Other assets. See Part IV, line 11 · · · · · · · · · · · · · · · · · ·	235 , 601.	15			992.
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	17,462,502.	16	18	,309,	
	17	Accounts payable and accrued expenses	133,679.	17		138,	970.
	18	Grants payable		18			
	19	Deferred revenue		19			
es	20	Tax-exempt bond liabilities		20			
	21	Escrow account liability Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,					
iab	•	highest compensated employees, and disqualified persons Complete Part II					
_		of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D	103,649.				407.
	26	Total liabilities. Add lines 17 through 25	237, 328.	26		462,	377.
Fund Balances		Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.					
an	27	Unrestricted net assets	17,131,617.	27	17	,843,	111.
Ва	28	Temporarily restricted net assets	93,557.	28		4,	273.
pu	29	Permanently restricted net assets		29			
or Fu	·	Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.					
sts	30	Capital stock or trust principal, or current funds		30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	_	31			
t A	32	Retained earnings, endowment, accumulated income, or other funds		32			
Net	33	Total net assets or fund balances	17,225,174.	33	17	,847,	384.
	34	Total liabilities and net assets/fund balances	17,462,502.	34	18	,309,	761.
Pa	rt XI	Financial Statements and Reporting					
1	Acco	ounting method used to prepare the Form 990 Cash X Accrual Othe	er			Yes	No
2a	Were	e the organization's financial statements compiled or reviewed by an independent account	tant?		2	a	x
b		e the organization's financial statements audited by an independent accountant? \dots				b X	
С		es" to lines 2a or 2b, does the organization have a committee that assumes responsibility					
	audıt	t, review, or compilation of its financial statements and selection of an independent accou	ntant?		2	c X	
3a	As a	result of a federal award, was the organization required to undergo an audit or audits as s	et forth in				
	the S	Single Audit Act and OMB Circular A-133?			<u>3</u>	а	X
b	If "Yo	es," did the organization undergo the required audit or audits?			3	b	1

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

CHOCTAW HOME FINANCE CORPORATION

Employer identification number

CHOC	TA		INANCE CORP								30542
Part	_			ity Status (All organ					e instru	ctions)	
The g	rga		-	dation because it is (P		-	-	-			
1		A church, co	onvention of chu	rches, or association	of churches	described	ın sectio	n 170(b)((1)(A)(i).		
2	_	A school de	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sched	ule E)					
3		A hospital o	r a cooperative	hospital service organ	ization desc	cribed in se	ction 170	(b)(1)(A)	(iii). (Atta	ich Sched	ule H)
4	_]	A medical	research organiz	zation operated in co	njunction v	with a hos	pıtal des	cribed in	section	170(b)(1)	(A)(iii). Enter the
_			ame, city, and sta								
5		•	•	or the benefit of a col	lege or un	iversity ow	ned or o	perated b	oy a gove	ernmental	unit described in
_	_		(b)(1)(A)(iv). (C								
6	_			vernment or governme							
7	X	•		Ily receives a substan	•	its support	from a g	governme	ental unit	or from t	the general public
Г	_			(1)(A)(vi). (Complete F							
8	_		•	d in section 170(b)(1)							
9 [_		Ily receives (1) more							
		•		ted to its exempt fun		-		-			
			_	ment income and un				-		511 tax)	from businesses
٦ ٦	\neg		_	n after June 30, 1975						/ ·	
10	\dashv	-	-	and operated exclusive	-		-				
11 [J	_	_	and operated exclus ublicly supported orga	-						
			•	at describes the type o					•	-	
		a Typ	_	— — · · ·		e III - Func			mics i ie		pe III - Other
e	\neg			ertify that the organiz			•	•	irectly by		•
		•	•	ion managers and oth				•			•
		•	r section 509(a)(-		0 01 1170.0	p a a	, , , , , , , , , , , , , , , , , , ,	a organiz	41.01.0 40	
f			, , ,	-, d a written determina	tion from	the IRS tha	atıtıs a	Type I.	Type II o	r Type III	supporting
		_	n, check this box					• •	.,,,		
g		_		the organization acce					the		
3		following pe		9	, , , , ,			,			
				or indirectly controls	, either ale	one or tog	ether wit	h person	s descrit	oed in (ii)	Yes No
			•	erning body of the sup				-			11g(i)
		(ii) A famıl	y member of a p	erson described in (i) a	bove?						11g(n)
		(iii) A 35%	controlled entity	of a person described	d in (i) or (ii)						11g(m)
h		Provide the	following inform	ation about the organi	zations the						
		of supported	(ii) EIN	(iii) Type of organization		organization		ou notify		s the	(vii) Amount of
	orga	inization		(described on lines 1-9 above or IRC section		sted in your document?		nization in of your	organizat	tion in col ized in the	support
				(see instructions))		,		oort?	Ϋ́U	S?	
					Yes	No	Yes	No	Yes	No	
											· · · · · · · · · · · · · · · · · · ·
								ļ			
											
Total											

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.)

loss from the sale of capital assets (Explain in Part IV)	Sec	tion A. Public Support						
membership fees received (Co not include any "unusual grants"). 1, £81, 780. 946, 553. 1, 696, 311. 1, 455, 255. 1, 004, 597. 5, 818, 206. 2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf. 3 The value of services or facilities furnished by a governmental unt to the organization without charge. 1, £84, 780. 946, 953. 1, £96, 311. 1, 455, 255. 1, 004, 597. 5, 818, 206. 5 The portion of total contributions by each person (other than a governmental unt or publicly supported organization) induced on line 1 that exceeds 2% of the amount shown on line 11, column (f) . 6. Public support Subtrate line 5 from line 4.	Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(¢) 2007	(d) 2008	(e) 2008	(f) Total
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 1-3	1	membership fees received (Do not	1,684,780.	946,963.	1,696, <u>5</u> 11.	1,485,255.	1,004,697.	6,818,206.
## Total Add lines 1-3	2	benefit and either paid to or expended on						
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)	3	furnished by a governmental unit to the						
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)	4	Total. Add lines 1-3	1,684,780.	946, 963.	1,696,511.	1,485,255.	1,004,697.	6,818,206.
on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support, Subtract line 5 from line 4. 7 Amounts from line 4. 7 Amounts from line 4. 8 Gross income from linest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 1 and 1 a	5	person (other than a governmental unit or						
6, 818, 205. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) 7 Amounts from line 4								
Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 4		shown on line 11, column (f)						
Calendar year (or fiscal year beginning in)	$\overline{}$, .			6,818,206.
7 Amounts from line 4			4-1 222-	T 763	4-5	(1)	(1) 0000 T	(D. TAI
8 Gross income from interest, dividends, payments received on secunities loans, rents, royalhies and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carned on. 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV). 11 Total support. Add lines 7 through 10. 12 4,592,359. 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)). 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f. 16 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization. 18	Cale	endar year (or fiscal year beginning in)						
9 Net income from unrelated business activities, whether or not the business is regularly carried on		Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	1,684,780.	946, 963.	1,696,511.			
loss from the sale of capital assets (Explain in Part IV)	9	Net income from unrelated business activities, whether or not the business is				233,223	0.,	
12 Gross receipts from related activities, etc (See instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f. 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	10	loss from the sale of capital assets						
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	11	Total support. Add lines 7 through 10						7,034,823.
Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	12	•	•				12	4,502,359.
Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	13							<u> </u>
Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))								▶ 🔛
Public support percentage from 2007 Schedule A, Part IV-A, line 26f	Sec						1.1	
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	14	., .		•				
and stop here. The organization qualifies as a publicly supported organization								
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	16a							
box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see								
17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization	b	* •	-					1 I
is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization					-			
in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization	17a							
b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		•						
b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<u> </u>			_	•		- 1 1
15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		-						
Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	D		-					iine
supported organization								ah.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see						-		
	1 2							
	10	•						_

		<u> </u>	<u> </u>
Part III	Support Schedule for Organizations Described in Section 509(a)	(2)	-
_	(Complete only if you checked the box on line 9 of Part I.)		

Sect	ion A. Public Support						
Ca	lendar 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		1				
	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						
	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						
c	Add lines 7a and 7b		1				
8	Public support (Subtract line 7c from						
	line 6)						
Sec	tion B. Total Support				•		·
Ca	llendar year (or fiscal year beginning ın) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
С	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,			,			
	whether or not the business is regularly carried on		_				
12							
	loss from the sale of capital assets						
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,		ļ				1
	and 12)			L			<u></u>
14	First five years. If the Form 990 is for	the organizatio	n's first, second,	third, fourth, or	fifth tax year a	s a section 501	(c)(3)
	organization, check this box and stop here	<u></u>	<u></u>	<u> </u>			▶
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2008 (line 8					15	%
16	Public support percentage from 2007 Sche	edule A, Part IV-A	, line 27g	<u></u>		16	<u>%</u>
Sec	tion D. Computation of Investmen					, .	
17	Investment income percentage for 2008 (li			13, column (f))		17	
18	Investment income percentage from 2007					18	%
19a	33 1/3% support tests - 2008. If the org						
	17 is not more than 33 1/3 %, check this bo						
b	33 1/3% support tests - 2007. If the orga						
	line 18 is not more than 33 1/3 %, check thi	s box and stop h	ere The organiza	tion qualifies as a j	publicly supporte	d organization	▶ []
20	Private foundation. If the organization did	not check a box	on line 14, 19a, c	r 19b, check this t	oox and see instru	ctions	

Schedule A (Form 990 or 990-EZ) 2008		27-0030	542	Page 4
Part IV	Supplemental Information Part II, line 17a or 17b; or	on. Complete this part to r Part III, line 12. Provide a	provide the explanation	n required by Part II, line	10;
					.
					-
					- -
		 			
					- -
					- -
					.
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 രെക

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

ZUU8
Open to Public
Inspection

Name	of the organization		Employer identification number	
<u>CHC</u>	CTAW HOME FINANCE CORPORATION		27-0030542	
Pa		ised Funds or Other Similar Fu m 990, Part IV, line 6.	nds or Accounts. Complete if	
		(a) Donor advised funds	(b) Funds and other accounts	
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a	dvisors in writing that the assets he	eld in donor advised	
				No
6	funds are the organization's property, subject to the organization's exclusive legal control? Yes Note that organization inform all grantees, donors, and donor advisors in writing that grant funds may be			
	used only for charitable purposes and not for the b			
	impermissible private benefit?			lo
Pa	Conservation Easements. Complete if	the organization answered "Ye	s" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the			
	Preservation of land for public use (e.g., recre	ation or pleasure) Preser	ation of an historically importantly land are	ea
	Protection of natural habitat	·	vation of certified historic structure	
	Preservation of open space			
2	Complete lines 2a-2d if the organization held a qua	alified conservation contribution in	he form of a conservation easement	
	on the last day of the tax year			
			Held at the End of the Yea	ar
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified			
d	Number of conservation easements included in (c	acquired after 8/17/06	2d	
3	Number of conservation easements modified, trans	sferred, released, extinguished, or	terminated by the organization during	
	the taxable year ▶			
4	Number of states where property subject to conse			
5	Does the organization have a written policy regard			
	enforcement of the conservation easements it hold			
6	Staff or volunteer hours devoted to monitoring, ins			
7	Amount of expenses incurred in monitoring, inspec	-		_
8	Does each conservation easement reported on lin			
	170(h)(4)(B)(i) and $170(h)(4)(B)(ii)$?			lo
9	In Part XIV, describe how the organization reports			
	balance sheet, and include, if applicable, the text of	_	financial statements that describes	
Da	the organization's accounting for conservation easi till Organizations Maintaining Collections		r Other Similar Assets	
	Complete If the organization answered	"Yes" to Form 990, Part IV, line	8.	
1 a	If the organization elected, as permitted under SF, art, historical treasures, or other similar assets helprovide, in Part XIV, the text of the footnote to its f	d for public exhibition, education, o	r research in furtherance of public service.	
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held fo provide the following amounts relating to these items.	r public exhibition, education, or re		
	(i) Revenues included in Form 990, Part VIII, line		▶ \$	
	(ii) Assets included in Form 990, Part X		▶\$	
2	If the organization received or held works of art, hi	storical treasures, or other similar	assets for financial gain, provide the	
	following amounts required to be reported under S	FAS 116 relating to these items	-	
а	Revenues included in Form 990, Part VIII, line 1 .		> \$	
b	Assets included in Form 990, Part X		> \$	
For I	Privacy Act and Paperwork Reduction Act Notice, see the Instruc	tions for Form 990.	Schedule D (Form 990) 2	2008

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	- (1	1) .	(1 I T	4/

Par	Organizations Maintaining Colle	ections of	Art, Hi	storica	I Treasures	s, or (Other Similar A	ssets (d	continued)
							.		
3	Using the organization's accession and othe	r records,	спеск а	ny of th	e following to	hat are	e a significant us	e of its c	ollection
	items (check all that apply)				_				
а	Public exhibition		d	Ш		chang	e programs		
b	Scholarly research		е		Other				·
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections a	and expl	ain how	they further	the o	rganization's exe	mpt pur	pose in
	Part XIV								
5	During the year, did the organization solicit								
	assets to be sold to raise funds rather than t								
Par	Trust, Escrow and Custodial Are Part IV, line 9, or reported an are						nswered "Yes"	to Form	990,
									.
1 a	Is the organization an agent, trustee, custod								
	ıncluded on Form 990, Part X?							L	Yes No
b	If "Yes," explain the arrangement in Part XIV	and comp	lete the	followi	ng table			 .	
							Aı	mount	
	Beginning balance								
	Additions during the year								
	Distributions during the year								
f	Ending balance				. .	1f			
2a	Did the organization include an amount on I	Form 990,	Part X,	line 21?				L	Yes No
b	If "Yes," explain the arrangement in Part XIV								
Par	Endowment Funds. Complete if	organizat	tion ans	swered	"Yes" to Fo	orm 9			
		ent Year	(b) Pri	or year	(c) Two ye	ars bacl	k (d) Three yea	rs back	(e) Four years back
	Beginning of year balance								
b	Contributions								
С	Investment earnings or losses								
d	Grants or scholarships								***
е	Other expenditures for facilities .								
	and programs								- 1
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the year	ar end bala	nce held	l as					
а	Board designated or quasi-endowment ▶_		_%						
b	Permanent endowment ▶ %								
¢	Term endowment ▶%								
3 a	Are there endowment funds not in the poss	ession of t	he orga	nızatıon	that are hele	d and	administered for	the	
	organization by								Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations								3a(ii)
b	If "Yes" to 3a(II), are the related organization								3b
4	Describe in Part XIV the intended uses of the								
Par	t VI Investments - Land, Buildings, a	nd Equip	ment. S	See Fo	rm 990, Pa	rt X, I	ine 10		
	Description of investment	(a) Cost or (inves	other bas stment)	ils	(b) Cost or other basis (other)		(c) Depreciation	(0	d) Book value
1 a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment				15,33	31.	1,533.		13,798.
е	Other								
Tota	I. Add lines 1a-1e (Column (d) should equal	Form 990, I	Part X,	column	(B), line 10(c,	<u>)).</u> .			13,798.
			-					Sched	ule D (Form 990) 2008

Part VII	Investments - Other Securities. See	Form 990, Part X, lin	ie 12	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year marki	
Financial dei	rivatives and other financial products			
	equity interests			
-			<u> </u>	
				
		 		
				
- -				
	n (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related. See	T		
	(a) Description of investment type	(b) Book value	(c) Method of valuati Cost or end-of-year marke	
 -				
				
	(b) should equal Form 990, Part X, col (B) line 13)		<u> </u>	
Part IX	Other Assets. See Form 990, Part X,) Description		(b) Book value
	\(\alpha\)	Description		(b) Book value
	· · · · · · · · · · · · · · · · · · ·			
Total. (Columi	n (b) should equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part			
	Other Liabilities. See Form 330, Fait			
	(a) Description of liability	(b) Amount		
Federal inco	(a) Description of liability	(b) Amount 314,000.		
	(a) Description of liability	†		
	(a) Description of liability me taxes	314,000.		
	(a) Description of liability me taxes	314,000.		
	(a) Description of liability me taxes	314,000.		
	(a) Description of liability me taxes	314,000.		
	(a) Description of liability me taxes	314,000.		
Federal inco	(a) Description of liability me taxes	314,000.		
	(a) Description of liability me taxes	314,000.		
	(a) Description of liability me taxes	314,000.		
DUE TO I	(a) Description of liability me taxes	314,000.		

JSA 8E1270 1 000

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008	27-0030542	Page 5
Part XIV Supplemental Information (continued)		
. <u>2</u>		
:	·	-
SCHEDULE D, PART XII, LINE 4B		
LOSS ON REPOSSESSED HOMES (53,819	<u>')</u>	
_3		
SCHEDULE D, PART XIII, LINE 2D		
SCUEDOTE OF EAST VILLE DIME SO		
LOSS ON REPOSSESSED HOMES 53,819		
		_

Schedule D (Form 990) 2008

SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the U.S.

OMB No 1545-0047	2008
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Open to Public

PROPERTY & EQUIPMENT PROPERTY & EQUIPMENT 2 (h) Purpose of grant or assistance Inspection Employer identification number Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on 27-0030542 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) NET BOOK VALUE ► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. (d) Amount of cash grant (e) Amount of non-cash assistance 31, 509. ► Attach to Form 990. Use Part IV and Schedule I-1 (Form 990) if additional space is needed CHOCTAW HOUSING Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 73-0762144 (b) EIN CHOCTAW HOME FINANCE CORPORATION 1 (a) Name and address of organization or government CHOCTAW HOUSING AUTHORITY 1005 S 5TH HUGO, OK 74743 Department of the Treasury Name of the organization Internal Revenue Service Part II Part I

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

Enter total number of other organizations

Schedule I (Form 990) 2008

8E1288 2 000

Schedule 1 (Form 990) 2008

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) INDIVIDUALS GET MORTGAGES. THE AMOUNTS GIVEN TO THE INDIVIDUALS REPRESENT THE NONCASH ASSISTANCE IS GIVEN TO AN AFFILIATE WHO USES THE EQUIPMENT CLOSING COSTS. THE INDIVIDUALS ARE SELECTED BASED ON AN APPLICATION (d) Amount of non-cash assistance THE PURPOSE OF THE ORGANIZATION IS TO HELP LOW AND MODERATE INCOME. 17, 107. (c) Amount of cash grant Use Schedule I-1 (Form 990) if additional space is needed (b) Number of recipients 16 FOR FURTHERING ITS PURPOSE. SCHEDULE_I.PART_I._LINE_2. (a) Type of grant or assistance CLOSING COST ASSISTANCE PROCESS. Part IV Part III

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

Name of the organization	Employer identification number
CHOCTAW HOME FINANCE CORPORATION	27-0030542
_1	
FORM 990, PART VI, LINE 6	
EACH MEMBER MUST BE QUALIFIED AND APPROVED BY THE BOARD OF	T TRUSTERS FACH
_ BACK_ NEMBER_ NOST_DE_QUARTITED_AND_ALINOVED_DI_INE_BOAND_OR	
MEMBER IS ENTITLED TO ONE VOTE.	

Name of the organization	Employer identification number
CHOCTAW HOME FINANCE CORPORATION	27-0030542
_2	
FORM 990, PART VI, LINE 7A	
THE CHIEF OF THE CHOCTAW NATION OF OKLAHOMA APPOINTS THE TRUSTEES	
 -	
	
	

Schedule O (Form 990) 2008	Page Z
Name of the organization	Employer identification number
CHOCTAW HOME FINANCE CORPORATION	27-0030542
_3	
FORM 990, PART VI, LINE 10	
THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM. THE RETUR	<u>N_I</u> S
DESTRUCT INTERNALLY DRICE TO PLITAGE STRUCTURE IDC	
REVIEWED INTERNALLY PRIOR TO FILING WITH THE IRS.	

Name of the organization	Employer identification number
CHOCTAW HOME FINANCE CORPORATION	27-0030542
_4	
FORM 990, PART VI, LINE 12C	
A CONFLICT OF INTEREST POLICY IS REQUIRED TO BE COMPLETED BY ALL	ROARD
_v_confitted_of_inipupoi_ionici_io_infotupo_io_pp_confittinip_if_win_	DOMO
MEMBERS ANNUALLY.	
*	
	*
	

Schedule O (Form 990) 2008	Page 2
Name of the organization	Employer identification number
CHOCTAW HOME FINANCE CORPORATION	27-0030542
•	
_5	
FORM 990, PART VI, LINE 19	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTER	EST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQ	OFSI.
	
	

FORM 990, PART VIII - INVESTMENT INCOME

(D) EXCLUDED REVENUE	 	67,700.	1 6 8 1 1 1 1 1 1 1 1	67,700.	
(C) UNRELATED BUSI NESS REV.					
(B) RELATED OR EXEMPT REVENUE					
(A) TOTAL REVENUE		67,700.		67,700.	
DESCRIPTION		INTEREST INCOME		TOTALS	