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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009 Treated as a Private Foundation Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning 2009, and ending G Check all that apply Initial Return of a former public charity Final return Initial return Amended return Address change Name change Employer identification number Use the THE ROSS CHARITABLE FOUNDATION 20-5309346 IRS label Otherwise, 1140 NORTH 129TH EAST AVENUE R Telephone number (see the instructions) print TULSA, OK 74116 918-234-7675 or type See Specific If exemption application is pending, check here Instructions D 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► Ś (Part I, column (d) must be on cash basis) 721,527 Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books ıncome ıncome for charitable purposes (cash basis only) (see the instructions)) 400,000 Contributions, gifts, grants, etc, received (att sch) 2 Ck If the foundn is not req to att Sch B 3 Interest on savings and temporary 57 57 N/A cash investments Dividends and interest from securities 13,012 13,012 5a Gross rents. b Net rental income or (loss) 35,176 REVENUE 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 259,255 35,176 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 448,245 48,245 0 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages. 15 Pension plans, employee benefits 2,726 2,726 16a Legal fees (attach schedule) SEE ST 1 **b** Accounting fees (attach sch) c Other prof fees (attach sch) 116 116. 17 Interest 401 401 Taxes (attach schedule) See in (ir) 18 19 sch) and depletion Occup and Topfelences, and meetings Travel Printing and publications EXPENSES Other expenses (attaches hedule) 23 2,889 2,889 24 Total operating and administrative expenses. Add lines 13 through 23 6,132 6,132 25 Contributions, gifts, grants paid PART XV 113,863 113,863.

119,995

328,250

26

Total expenses and disbursements.

Subtract line 26 from line 12: a Excess of revenue over expenses

b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter 0-)

Add lines 24 and 25

and disbursements

6,132

42,113

113,863.

Part	<u> </u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	t year
rart	<u></u>	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	114,227.	144,366.	144,366.
	2	Savings and temporary cash investments			
	3	Accounts receivable • 919.			
		Less allowance for doubtful accounts ▶		919.	919.
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
A S		Less. allowance for doubtful accounts ▶			
š	8	Inventories for sale or use.			
ASSET	9	Prepaid expenses and deferred charges			
Š	10 a	Investments – US and state government obligations (attach schedule) STATEMENT 4	215,437.	255,739.	150,866.
	t	Investments — corporate stock (attach schedule). STATEMENT 5		20,011.	30,999.
	C	: Investments — corporate bonds (attach schedule).			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) STATEMENT 6	139,227.	376,106.	394,377.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule).			
	15 16	Other assets (describe) Total assets (to be completed by all filers — see instructions Also, see page 1, item I)	468,891.	797,141.	721,527.
Ļ	17	Accounts payable and accrued expenses			
A	18	Grants payable			
В	19	Deferred revenue			
i L	20	Loans from officers, directors, trustees, & other disqualified persons			
ļ	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	<u> </u>	<u> </u>	
N F E U	24	Unrestricted			
E U	25	Temporarily restricted		,, , <u>, , , , , , , , , , , , , , , , ,</u>	Į
D	26	Permanently restricted			
A B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds	468,891.	797,141.	
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see the instructions)	468,891.	797,141.	
	31	Total liabilities and net assets/fund balances (see the instructions)	468,891.	797,141.	
Part	111	Analysis of Changes in Net Assets or Fund Balance	es		
1	Tota end-	I net assets or fund balances at beginning of year – Part II, colu of-year figure reported on prior year's return)	mn (a), line 30 (must ag	ree with	468,891.
2		r amount from Part I, line 27a		2	328,250.
3		increases not included in line 2 (itemize)		3	, = = 32
4		lines 1, 2, and 3		4	797,141.
5		ases not included in line 2 (itemize)		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), li	ne 30 6	797,141.

Form 990-PF (2009) THE ROSS CHARITABLE FOUNDATION

20-5309346

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(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) (b) How acc P — Purct D — Dona					hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	360.249 FIDELITY SE		VARIOUS	1/21/09			
1a 360.249 FIDELITY SELECT BROKERAGE & INVS MGT.Pb 1200 S&P 500 DEPOSITORY RECEIPTP						1/15/09	7/20/09
	1313 S&P 500 DEPOSI		VARIOUS	8/21/09			
	.269 S&P 500 DEPOSI			<u>Р</u> Р		7/31/09	8/26/09
	CAPITAL GAIN DIVIDE						0, 20, 03
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale					(h) Gain or (e) plus (f) m	(loss) inus (g)
a	10,181.		1	7,750.			-7,569.
				8,416.			15,567.
	105 060			7,887.			27,175.
				26.			2.
		•					
		ing gain in column (h) and owned b	v the foundation on 12/31/69	9		(I) Gains (Coli	uma (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	ı (ı)		ain minus column (l an -0-) or Losses (fr	(), but not less
a	<u> </u>						-7,569.
t							15,567.
	;						27,175.
						-	2.
							1.
_	Capital gain net income or (net	[If (loss), en	o enter in Part I, line 7 iter -0- in Part I, line 7	-	2		35,176.
3	If gain, also enter in Part I, line in Part I, line 8	loss) as defined in sections 1222(5) e 8, column (c) (see the instructions		-	3		35,175.
Par	t V Qualification Under	r Section 4940(e) for Reduce	ed Tax on Net Investme	ent Inco	me		
Was If 'Ye	es,' the foundation does not qual	tion 4942 tax on the distributable ar ify under section 4940(e) Do not con n each column for each year, see the	omplete this part			Yes	☐ No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:			(d) Distribution umn (b) divided	
	2008						
	2007						
	2006						
	2005						
	2004						
	Total of line 1, column (d)		1		2		-
3	Average distribution ratio for th	ne 5-year base period — divide the to n has been in existence if less than			3		
4	•		,	١	4		
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5							
5	Multiply line 4 by line 3				5		
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		<u> </u>
7	Add lines 5 and 6				7		-
8	Enter qualifying distributions fr	·		,	8	l	
	If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI	, line 1b, and complete that	part using	a 1%	tax rate See t	he

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Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruc	tions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.						
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			342.			
	check here. ► _ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable						
	foundations only Others enter -0-)			<u>0.</u>			
3	Add lines 1 and 2		8	342.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		8	<u>342.</u>			
6	Credits/Payments						
а	2009 estimated tax pmts and 2008 overpayment credited to 2009.						
b	Exempt foreign organizations — tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868)						
	Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d			106.			
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			10.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		4	146.			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						
	Enter the amount of line 10 to be Credited to 2010 estimated tax						
Part	VII-A Statements Regarding Activities	1	1				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No			
	participate or intervene in any political campaign?	1 a		X			
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?						
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities						
c	Did the foundation file Form 1120-POL for this year?	1 c	ļ	Х			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
_	(1) On the foundation \$\ \\$ 0. (2) On foundation managers \$\ \\$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	4					
е	foundation managers \blacktriangleright \$ 0.			:			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х			
_	If 'Yes,' attach a detailed description of the activities	<u> </u>					
,							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.	3		X			
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х			
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X			
	If 'Yes,' attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict						
	with the state law remain in the governing instrument?	6		X			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X				
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)						
	OK						
b	olf the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>	8ь	х				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)						
	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		<u> </u>			
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses. SEE STATEMENT 7	10	Х				
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<u>Par</u>	t VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exem	ption application?	13	Х	
	Website address ► N/A				
14	The books are in care of ► TERESA A. SPELTS Teleph	none no. ► 918-	234-7	675	
	Located at ► 1140 NORTH 129TH EAST AVENUE TULSA OK ZIP +				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check h		N/A		$\prod_{i=1}^{n}$
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	-		Yes	No
1	a During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
		Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	H., H.,			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	' I		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No	·		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes XNo			
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instr	d in ructions)?	1 b	N.	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ □			
	a Did the foundation engage in a prior year in any of the acts described in 1a letter than excepted a	note			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted a that were not corrected before the first day of the tax year beginning in 2009?	icis,	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	3			
	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No	,		:
	If 'Yes,' list the years ▶ 20, 20, 20				
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4				
	all years listed, answer 'No' and attach statement — see the instructions)	(-)(-)	2b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the ye	ars here	1		
	► 20 , 20 , 20 , 20				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No	,		
	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundary discussified passages after May 26, 1969, (2) the large of the 5 year payed (or large partial and	ation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period app by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest,	or			
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, t	0	31	NT.	/7
	determine if the foundation had excess business holdings in 2009.)		3ь	l N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its				J.,
	charitable purposes?		4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could				
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of			1	,,
	the tax year beginning in 2009?		4 b		X

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Form 990-PF (2009) THE ROSS CHARITABI Part VII-B Statements Regarding Activiti		4720 May Re Peg	20-530	09346	Page 6
		1 4720 May De Neq	uned (continued)		
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	•	on (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	No				
(3) Provide a grant to an individual for travel,	No				
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instr	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the except ding disaster assistance	tions	5b	N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ []	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi	sibility for the grant?	•	N/A Yes] No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or inc	lirectly, to pay premiums	Yes X	No No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene		6ь	Х
7a At any time during the tax year, was the found	dation a party to a prob	whited tay chalter transa	ction? Yes X	No No	
b If yes, did the foundation receive any proceed	, , ,			7b	N/A
Part VIII Information About Officers, D				1 1	
and Contractors		•			
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	se account, owances
JESSE H. ROSS 1140 NORTH 129TH EAST AVENUE	CHAIRMAN/PRE	0.	0.		0.
TULSA, OK 74116	0				
WARREN E. ROSS 1140 NORTH 129TH EAST AVENUE TULSA, OK 74116	DIRECTOR/SEC 1.00	0.	0.		0.
TERESA A. SPELTS	DIRECTOR/TRE	0.	0.		0.
1140 NORTH 129TH EAST AVENUE TULSA, OK 74116	1.00	0.			
2 Compensation of five highest-paid employee	s (other than those in	cluded on line 1— see in	structions). If none, e	nter 'NONE.'	·
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, owances
NONE					
Total number of other employees paid over \$50,000) TEFA03061	07/05/00	•	<u> </u>	0-PF (2009)
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Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	552,574.
ı	b Average of monthly cash balances	1 b	117,120.
(c Fair market value of all other assets (see instructions)	1 c	
(d Total (add lines 1a, b, and c)	1 d	669,694.
•	e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	669,694.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	10,045.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	659,649.
6	Minimum investment return. Enter 5% of line 5	6	32,982.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation	ating f	oundations
	and certain foreign organizations check here ▶ □ and do not complete this pa	rt.)	
1	Minimum investment return from Part X, line 6	1	32,982.
2	a Tax on investment income for 2009 from Part VI, line 5		
ı	b Income tax for 2009 (This does not include the tax from Part VI)		
(c Add lines 2a and 2b	2 c	842.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	32,140.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	32,140.
6	Deduction from distributable amount (see instructions).	6	,
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	32,140.
Pai	rt XII Qualifying Distributions (see instructions)		
•	Amounts paid (including-administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	113,863.
	b Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
ı	b Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	113,863.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	113,863.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years	her the	foundation

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				32,140.
2 Undistributed income, if any, as of the end of 2009.				
a Enter amount for 2008 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006 37, 780.				
d From 2007 63, 268.	;			
e From 2008 160, 951.	261 000			
f Total of lines 3a through e	261,999.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 113,863.				
a Applied to 2008, but not more than line 2a			0.	
			0.1	
 b Applied to undistributed income of prior years (Election required — see instructions). 		0.		
c Treated as distributions out of corpus (Election required — see instructions).	0.			
d Applied to 2009 distributable amount				32,140.
e Remaining amount distributed out of corpus	81,723.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
,,,,				
6 Enter the net total of each column as			- (ep 4	
indicated below:	242 700			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	343,722.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from			0.	
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2010.				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
,				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010.	242 722			
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9	343,722.			·
a Excess from 2005				
b Excess from 2006 37, 780.				
c Excess from 2007 63, 268.				
d Excess from 2008 160, 951.				
e Excess from 2009 81,723.				
1				C 000 DE (0000)

orm 990-PF (2009) THE ROSS CHARITABLE FOUNDATION 20-5309346 Page								
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A								
1.a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling.								
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(L) 2000	Prior 3 years	(4) 2000	(-) T-4-1			
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total			
b 85% of line 2a								
c Qualifying distributions from Part XII, line 4 for each year listed								
d Amounts included in line 2c not used directly for active conduct of exempt activities								
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the alternative test relied upon								
a 'Assets' alternative test — enter								
(1) Value of all assets.								
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed								
c 'Support' alternative test - enter								
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 								
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)								
(3) Largest amount of support from an exempt organization		1 000						
(4) Gross investment income								
Part XV Supplementary Information assets at any time during to	(Complete this	part only if the	organization ha	ad \$5,000 or mo	re in			
1 Information Regarding Foundation Mana		istructions.)						
a List any managers of the foundation who close of any tax year (but only if they have NONE	have contributed m	ore than 2% of the t than \$5,000) (See	total contributions r section 507(d)(2))	eceived by the foun	dation before the			
b last any management the foundation who	100/	£ 16 - at a at a a a a a		-H. la	Alex acceptance of			
b List any managers of the foundation who a partnership or other entity) of which the NONE	e foundation has a 1	or the stock of a corp 0% or greater intere	oration (or an equest	ally large portion of	tne ownersnip of			
2 Information Regarding Contribution, Gra	unt Citt Laar Cale	Jarohin etc Dussiis						
Check here In the foundation only requests for funds If the foundation makes complete items 2a, b, c, and d	makes contributions	s to preselected char	ritable organization					
a The name, address, and telephone numb	er of the person to	whom applications s	should be addresse	d				
, · · · ·								
SEE STATEMENT 8								
b The form in which applications should be	submitted and info	rmation and materia	ls they should inclu	ıde				
SEE STATEMENT FOR LINE 2A								
c Any submission deadlines								
SEE STATEMENT FOR LINE 2A								
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charital	ble fields, kinds of	institutions, or other	factors			
SEE STATEMENT FOR LINE 2A								
		•						

3. Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
	substantial contributor	recipient						
Name and address (home or business) a Paid during the year SEE STATEMENT 9	śubstantial contributor	recipient						
Total	•	<u> </u>	► 3a	113,863.				
b Approved for future payment								
Total	- 		► 3t					

ter gross amounts unless otherwise indicated.	Unrelated	Unrelated business income Exclude		ection 512, 513, or 514	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a			1		(COO WO MONONO
b					
С					
d	<u> </u>		_ll	· · · · · · · · · · · · · · · · · · ·	
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	57.	
4 Dividends and interest from securities			14	13,012.	
5 Net rental income or (loss) from real estate					
a Debt-financed property	ļ				
b Not debt-financed property					
6 Net rental income or (loss) from personal property			+ +		
7 Other investment income.			10	25 176	
8 Gain or (loss) from sales of assets other than inventory			18	35,176.	
9 Net income or (loss) from special events			-		
Gross profit or (loss) from sales of inventory			-		
11 Other revenue					
a					
b	-		+ +	· · · · · · · · · · · · · · · · · · ·	
d					
d	-		1		
2 Subtotal Add columns (b), (d), and (e)				48,245.	
Total. Add line 12, columns (b), (d), and (e)			1 1	13	48,245
See worksheet in the instructions for line 13 to verify of	calculations)				107210
art XVI-B Relationship of Activities to the	e Accompiis	nment of Exem	pt Purpose	!S	
Line No. Explain below how each activity for which is accomplishment of the foundation's exemp	ncome is report t purposes (othe	ed in column (e) of er than by providing	Part XVI-A co	ontributed important th purposes) (See t	ly to the he instructions)
N/A					
		· ·		·	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

										Yes	No
	descr	ie organization dir ibed in section 50 ng to political orga	1(c) of the Code (o	ngage in any of the follow ther than section 501(c)(3	ving with a 3) organiza	iny oth itions)	er organization or in section 5	n 527,			
				a noncharitable exemption	organizatio	n of					
 a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 								1a(1)		x	
		ther assets							1a (2)		X
	` '	transactions							10 (2)		<u> </u>
			a noncharitable exe	mot organization					16(1)		х
	• •			ble exempt organization					1b(2)	$\vdash \vdash$	X
			equipment, or othe	. •					1 b (3)	├ ─ ─┤	X
		eimbursement arr	• •	1 433013					1 b (4)	\vdash	X
	• • •	pans or loan quar	•						1 b (5)		X
	• •	•		ip or fundraising solicitati	one				1b (6)		X
	• •			its, other assets, or paid					1c		X
	Conam	ng or racinties, eq	diprinerit, mailing is	sis, other assets, or paid	employees	•					
	the go	oods, other assets	s, or services given	complete the following so by the reporting foundati	on If the fo	oundat	tion received le	ess than fair ma	rket value in	ue of	
_		i		how in column (d) the val		-					
_	Line no.	(b) Amount involve	ved (C) Name (of noncharitable exempt organiza	ition	(a) L	Jescription of trans	sfers, transactions, a	nd snaring arrar	ngement	<u>rs</u>
N.	<u>/A</u>										
_								· · · · · · · · · · · · · · · · · · ·			
_											
_											
_											
_					-						
_									 		
_											
_											
_											
	2a Is the	foundation direct	tly or indirectly affili	ated with, or related to, o	ne or more	e tax-e	exempt organiz	zations	_	_	
	descr	ibed in section 50	1(c) of the Code (o	ther than section 501(c)(3	3)) or in se	ection 5	527?		Yes	5 [X]	No
	b If 'Ye	s,' complete the f	ollowing schedule								
		(a) Name of orga	nization	(b) Type of organ	nization		(c) Description of	relationship		
Ŋ	/A										
				<u>-</u>	 						
					_						
				is return, including accompanying				st of my knowledge a	nd belief, it is tru	e, corre	ct, and
	complete	Declaration of preparer	(outer than taxpayer or it	luciary) is based on all information	ii or writch prej	parer ria:	s any knowledge				
	_	10.5	A VOR			110	lanlan		1		
S	_	1 Keen	CAN MED				2012010	► Trus	tee_		
G	Sign	ature of officer or truste	e 			Date		Title			
		Preparer's		M (.		Date	/ /	Check if (Preparer's Identify See Signature in		
HERE	Paid Pre-		LENN ELLIOTT	/ Van What	- CPA	9	123/10	self- employed ► I	201055963	3	
Ë	parer's	Firm's name (or E			.c.		-		109909		
	Use	Lugues of solf 's -		'	900						
	Only		ULSA, OK 741				-	Phone no ► (918) 627	-228	36
B	4A							<u>, </u>	Form 9 9		
										-	/

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

Name of the organization		Employer identification number
THE ROSS CHARITABLE FOUNDATI	ON	20-5309346
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treat	ed as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
Form 990-PF	4947(a)(1) nonexempt charitable trust treated a	os a privato foundation
	501(c)(3) taxable private foundation	is a private foundation
Check if your organization is covered by the	General Rule or a Special Rule	
Note: Only a section 501(c)(7), (8), or (10) or	rganization can check boxes for both the General Rule	and a Special Rule See instructions
General Rule —	EZ, or 990-PF that received, during the year, \$5,000 o	r mara (in manay or proporty) from any any
contributor (Complete Parts I and II.)	12, or 990-PF that received, during the year, \$5,000 o	Thore (in money or property) from any one
Special Rules —		
For a section 501(c)(3) organization filing	Form 990 or 990-EZ, that met the 33-1/3% support te	est of the regulations under sections
509(a)(1)/170(b)(1)(A)(vi) and received from a	ny one contributor, during the year, a contribution of the great or (ii) Form 990-EZ, line 1 Complete Parts I and II	
	nization filing Form 990 or 990-EZ, that received from a	any one contributor, during the year
aggregate contributions of more than \$1,0	000 for use exclusively for religious, charitable, scienti	fic, literary, or educational purposes, or the
prevention of cruelty to children or anima		
For a section 501(c)(7), (8), or (10) organ	nization filing Form 990 or 990-EZ, that received from a ous, charitable, etc. purposes, but these contributions	any one contributor, during the year,
this box is checked, enter here the total of	contributions that were received during the year for an	exclusively religious, charitable, etc,
	ts unless the General Rule applies to this organization	because it received nonexclusively
religious, charitable, etc, contributions of	\$5,000 or more during the year.	\$
Caution: An organization that is not covered	by the General Rule and/or the Special Rules does no	t file Schedule B (Form 990, 990-EZ, or
990-PF, to certify that it does not meet the file	line 2 of their Form 990, or check the box on line H of ling requirements of Schedule B (Form 990, 990-EZ, o	its Form 990-EZ, or on line Z or its Form
BAA For Privacy Act and Paperwork Reduc	ction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (200
for Form 990, 990EZ, or 990-PF.		

	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	anization OSS CHARITABLE FOUNDATION	1 ' '	r identification number 309346
Part I	Contributors (see instructions)	120,0	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE ROSS GROUP CONSTRUCTION		Person X Payroll
	TULSA, OK 74152-0570	\$ <u>400,000.</u>	Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
BAA	TEE 07001 06/22/00	Schodule R (Form 90	0 990.E7 or 990.PE) (2009)

Page

of 1

of Part II

Name of organization

THE ROSS CHARITABLE FOUNDATION

Employer identification number

١.	^		_	_	^	^	_		_	
1	U	-	5	3	U	9	3	4	6	

(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	

	(Form 990, 990-EZ, or 990-PF) (2009)			Page 1	of 1	of Part III	
Name of organ					Employer identificat		
	S CHARITABLE FOUNDATION				20-5309346)	
Part III	Exclusively religious, charitable, e organizations aggregating more th	tc, individual contribution nan \$1,000 for the year.(Co	ns to sections of the cols	on 501(c)((a) through ((7), (8), or (10) e) and the followi	ng line entry.)	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of <i>exclusively</i> religious, ch (Enter this information once –	naritable, etc, see instruction	ons)	► \$	N/A	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		Desc	(d) ription of how gif	t is held	
raiti	N/A						
	17/11						
	Transferee's name, addres	(e) Transfer of gift ss. and ZIP + 4	Rela	ationship of t	transferor to trans	sferee	
	Transcrot S name, according						
					<u>-</u>		
				ı	4.15		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		Desc	(d) ription of how gif	t is held	
			· · · · · · · · · · · · · · · · · · ·				
	(e)						
	Transferee's name, addres	Rela	ationship of	transferor to tran	sferee		
			·				
(a) No. from	(b) Purpose of gift	(c) Use of gift		Desc	(d) ription of how gif	t is held	
Part I		, , , , , , , , , , , , , , , , , , ,					
						· · · · · · · · · · · · · · · · · · ·	
		(e)		<u> </u>			
	Transferee's name, addres	Rela	ationship of	transferor to tran	sferee		
					· · ·		
		·					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		Desc	(d) ription of how git	ft is held	
		(e)		I			
	Transferee's name, addres	Rela	ationship of	transferor to tran	sferee		

Form 8868	(Rev 4-2009)			Page 2	2
• If you a	ire filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check this	box	<u>► X</u>	
Note. Only	complete Part II if you have already been granted an automatic 3-month exter	nsion on a previously	filed For	n 8868.	-
	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1				_
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only fi	ile the original (n	o copie:	s needed)	_
	Name of Exempt Organization	En	nployer iden	tification number	
Type or					
print	THE ROSS CHARITABLE FOUNDATION		<u>0-5309</u>		_
File birdhe	Number, street, and room or suite number. If a P O box, see instructions	Fo	r IRS use on	ly	
File by the extended	ELLIOTT, DOZIER & HELLAND, P.C.				_
due date for filing the	5800 E. SKELLY DRIVE, SUITE 900				
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions				
	TULSA, OK 74135				_
Check type	e of return to be filed (File a separate application for each return).				
Form 9	90 X Form 990-PF	Form 1041-A		Form 6069	
Form 9	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720		Form 8870	
Form 9	90-EZ Form 990-T (trust other than above)	Form 5227			_
STOP! Do	not complete Part II if you were not already granted an automatic 3-month ext	tension on a previou	sly filed F	orm 8868.	_
The boo	oks are in care of TERESA A. SPELTS				
Telepho	one No ► 918-234-7675 FAX No ►				
• If the o	rganization does not have an office or place of business in the United States, of	check this box		▶ []
• If this is	s for a Group Return, enter the organization's four digit Group Exemption Num	ber (GEN)		If this is for the	-
whole grou	p, check this box If it is for part of the group, check this box a	and attach a list with	the name	s and EINs of all	
members tl	he extension is for				_
4 I requ	uest an additional 3-month extension of time until $11/15$, 20 10	0			
5 For ca	alendar year 2009, or other tax year beginning, 20	, and ending		, 20	
6 If this	s tax year is for less than 12 months, check reason Initial return		Change	in accounting period	
7 State	in detail why you need the extension TAXPAYER RESPECTFULLY	REQUESTS ADDI	TIONA	L_TIME_TO	_
GAT	HER INFORMATION NECESSARY TO FILE A COMPLETE AND	ACCURATE TAX	RETUR	N	_
					_
8a If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tental	tive tax, less any			
	efundable credits. See instructions.	<u> </u>	8a	\$ 0.	<u>-</u>
	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cri				
paym with f	ients made Include any prior year overpayment allowed as a credit and any ar Form 8868	mount paid previously	/ 8b	\$ 406.	
	nce Due. Subtract line 8b from line 8a Include your payment with this form, or	if required, denosit			_
with f	TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	System) See instrs.	8 c	\$ 0.	
	Signature and Verification	1			_
Under penaltie	s of perjury, I declare that I have examined this form, including accompanying schedules and statements, implete, and that I am authorized to prepare this form	and to the best of my know	ledge and be	elief, it is true,	
correct, and co	ompreter and that it and authorized to prepare this form			al = 1	
Signature -	/Celer W/ Tille > Co A		Da	$_{\text{te}} \triangleright 8//3//0$	<u>) </u>
	· //			, , ,	
BAA	FIFZ0502L 03/11/09			Form 8868 (Rev 4-2009))

NTERNAL REVENUS OFRVICE W&I-FIELD AS TULSA. OF

AUG 1 to the

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Form 8868 (Rev 4-2009)

Department of the Treasury

File a separate application for each return.

internal Revenue	The a separate approach for each retain.			
If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box			<u>► X</u>
If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	s form)	_
Do not comp	lete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Fo	orm 8868	
Part I A	automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A corporation	required to file Form 990-T and requesting an automatic 6-month extension — check this box and c	omple	ete Part I only	, -
All other corp income tax re	orations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request turns	an ex	tension of tir	ne to file
the additional Form 990-T	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extens below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a nstead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more det www.irs.gov/efile and click on e-file for Charities & Nonprofits.	comp	osite or cons	solidated
_	Name of Exempt Organization	Emplo	yer identification	number
Type or print				
File by the	THE ROSS CHARITABLE FOUNDATION	20-	5309346	
due date for filing your	Number, street, and room or suite number. If a P O box, see instructions			
return See	1140 NORTH 129TH EAST AVENUE City, town or post office, state, and ZIP code For a foreign address, see instructions			
	TULSA, OK 74116			
Check type o	f return to be filed (file a separate application for each return)			
Form 990		0		
Form 990		7		
Form 990		9		
X Form 990	-PF Form 1041-A Form 887	0		
Telephone If the orga If this is f	are in the care of ► TERESA A. SPELTS No ► 918-234-7675 FAX No ► enization does not have an office or place of business in the United States, check this box or a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ►			
	sion will cover			
until _ The ext ► X	at an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time $8/15$, 20 _10, to file the exempt organization return for the organization named above ension is for the organization's return for calendar year 20_09_ or tax year beginning, 20, and ending, 20			
2 If this ta	ax year is for less than 12 months, check reason Initial return Final return C	hange	ın accountin	ıg period
3a If this a nonrefu	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any indable credits. See instructions	3a	\$	842.
b If this a made I	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments include any prior year overpayment allowed as a credit	3 b	\$	406.
deposit See ins	Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) tructions	Зс	• • • • • • • • • • • • • • • • • • • •	436.
Caution. If yo payment inst	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and For ructions	m 887	9-EO for	

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

2009·	FEDE	RAL STAT	EMENTS	S		PAGE
	THE ROSS	S CHARITABLE	FOUNDAT	ION		20-53093
STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES						
		(A) EXPENSES PER BOOKS	(B) N INVESTN INCOM	ET MENT ME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	TOTAL	\$ 2,726 \$ 2,726	. \$ 2, \$ 2,	726. 726.		\$ 0
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES						
		(A) EXPENSES PER BOOKS	(B) N INVEST <u>INCO</u>	MENT	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX PAID TAXES	TOTAL	\$ 18 383	. \$	18. 383. 401.		\$ 0
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES						
		(A) EXPENSES PER BOOKS	INVEST	MENT	(C) ADJUSTED NET INCOM	
BANK SERVICE CHARGES ENTERTAINMENT-EXTERNAL LATE FEES MEMBERSHIP FEES OFFICE EXPENSE PENALTIES		\$ 138 1,626 418 95 90 522	. \$. 1,	138. 626. 418. 95. 90. 522.		
	TOTAL			889.		\$ (
STATEMENT 4 FORM 990-PF, PART II, LINE 10/ INVESTMENTS - U.S. AND STAT	A FE GOVERN	MENT OBLIGA	ATIONS			
U.S. GOVERNMENT OBLIGATIO	ons		VALUATIO METHOD	N	BOOK VALUE	FAIR MARKET VALUE
FIDELITY MUNICIPAL MONEY	•		COST	\$ \$	255,739. 255,739.	\$ 150,866

TOTAL \$ 255,739. \$

150,866.

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THE ROSS CHARITABLE FOUNDATION

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STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATIONMETHOD	BOOK VALUE	FAIR MARKET VALUE
GOOGLE, INC.	COST TOTAL	\$ 20,011. \$ 20,011.	\$ 30,999. \$ 30,999.

STATEMENT 6 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

OTHER INVESTMENTS	VALUATION METHOD	 BOOK VALUE	FA	IR MARKET VALUE
GABELLI EQUITY INCOME FUND MANAGERS BOND FIDELITY SELECT BROKERAGE & INVS MGT PARNASSUS EQUITY INCOME PORTFOLIO BERKSHIRE HATHAWAY, INC. ISHARES TR FTSE CHINA HK LISTED SPDR GOLD TR GOLD SPDR BARCLAYS CAP HIGH YIELD BOND SPDR SER TR BARCLAYS CAP TIPS	COST COST COST COST COST COST COST COST	\$ 56. 85,924. 0. 17,816. 23,011. 47,642. 49,584. 76,251. 75,822.	\$	43. 99,538. 0. 17,336. 16,430. 48,942. 53,655. 80,800: 77,633.
	TOTAL	\$ 376,106.	\$	394,377.

STATEMENT 7 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

THE ROSS GROUP CONSTRUCTION

P.O. BOX 52570 TULSA, OK 74152-0570

STATEMENT 8 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

THE ROSS CHARITABLE FOUNDATION

CARE OF:

STREET ADDRESS:

1140 NORTH 129TH EAST AVENUE

CITY, STATE, ZIP CODE:

TULSA, OK 74116

TELEPHONE: FORM AND CONTENT:

THE APPLICATION, IN ANY FORM, MUST BE SUBMITTED IN

WRITING, INCLUDE A BRIEF DESCRIPTION OF THE ORGANIZATION AND THE PROGRAM NEEDING FUNDING AND INCLUDE EVIDENCE OF

CHARITABLE, EXEMPT STATUS.

SUBMISSION DEADLINES:

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STATEMENT 8 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

RESTRICTIONS ON AWARDS:

STATEMENT 9 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP		PURPOSE OF GRANT	AMOUNT
BISHOP KELLEY HIGH SCHOOL 3905 SOUTH HUDSON AVENUE TULSA, OK 74135	NONE		CAPITAL CAMPAIGN, ANNUAL FUND	\$ 15,000.
NATIONAL GUARD ASSOC. OF OK 3535 MILITARY CIRCLE OKLAHOMA CITY, OK 73111	NONE		ANNUAL CONFERENCE	1,000.
THE UNIVERSITY OF TULSA 600 SOUTH COLLEGE AVENUE TULSA, OK 74104	NONE		GENERAL FUND, AUCTION, FUNDING THE FUTURE	20,613.
UNIVERSITY OF OKLAHOMA 339 WEST BOYD, ROOM 118 NORMAN, OK 73019	NONE	PUBLIC	OU FOUNDATION	3,500.
VETERANS OF FOREIGN WARS P.O. BOX 2300 OKLAHOMA CITY, OK 73101	NONE		GENERAL FUND	465.
MASSACHUSETTS INSTITUTE OF TEC 77 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	NONE		GENERAL FUND	10,000.
ST. JUDE CHILDREN'S RESEARCH 501 ST. JUDE PLACE MEMPHIS, TN 38105	NONE		GENERAL FUND	2,000.
SUMMIT CHRISITIAN ACADEMY 200 EAST BROADWAY STREET BROKEN ARROW, OK 74012	NONE		GENERAL FUND	3,000.
THERAPETICS SERVICE DOGS OF OK 7717 EAST 31ST STREET SUITE B TULSA, OK 74129	NONE		GENERAL FUND, K9K SPONSORSHIP	10,500.

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STATEMENT 9 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME_AND_ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
THE ROCK HOUSE CHURCH 20402 EAST PINE CATOOSA, OK 74015	NONE		ANGEL TREE	\$ 4,000.
CHRISTIAN BROTHERS UNIVERSITY 650 EAST PARKWAY SOUTH MEMPHIS, TN 38104	NONE		ANNUAL FUND	2,000.
MEND MEDICAL CLINIC/PREGNANCY RESOURCE 817 SOUTH ELM STREET, SUITE 103 BROKEN ARROW, OK 74012	NONE		GENERAL FUND	1,000.
OKLAHOMA STATE UNIVERSITY 400 SOUTH MONROE STILLWATER, OK 74078	NONE	PUBLIC	OSU FOUNDATION	5,000.
KANSAS STATE UNIVERSITY 2323 ANDERSON AVENUE, SUITE 500 MANHATTAN, KS 66502	NONE	PUBLIC	KSU FOUNDATION	2,500.
RONALD MCDONALD HOUSE CHARITIES ONE KROC DRIVE OAK BROOK, IL 60523	NONE		GENERAL FUND	2,000.
COLORADO SCHOOL OF MINES 923 16TH STREET GOLDEN, CO 80401	NONE		GENERAL FUND	2,000.
AMERICAN CANCER SOCIETY 5110 S. YALE, SUITE 101 TULSA, OK 74135	NONE			250.
BAH-KHO-JE EAGLE HABITAT RR 1, BOX 721 PERKINS, OK 74059	NONE			5,000.
PLANNED PARENTHOOD OF AK AND EASTERN OK 5780 S. PEORIA AVE. TULSA, OK 74105	NONE			1,000.
PHILBROOK MUSEUM OF ART 2727 SOUTH ROCKFORD ROAD TULSA, OK 74114	NONE			500.

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STATEMENT 9 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT	
MISSOURI STATE UNIVERSITY 901 SOUTH NATIONAL SPRINGFIELD, MO 65897	NONE	-		\$	2,500.
TULSA PARKS AND PARK FRIENDS 175 EAST 2ND STREET, SUITE 570 TULSA, OL 74103	NONE				5,000.
RIVERPARKS FRIENDS 717 SOUTH HOUSTON, SUITE 510 TULSA, OK 74127	NONE				2,500.
UNITED STATE DEPUTY SHERIFFS' ASSOCIATIO 1304 LANGHAM CREEK DR., SUITE 324 HOUSTON, TX 77084	NONE .	<u>.</u> -			275.
UNIVERSITY OF CENTRAL MISSOURI SWISER ALUMNI CENTER WARRENSBURG, MO 64093	NONE				2,500.
PITTSBURG STATE UNIVERSITY 1701 SOUTH BROADWAY PITTSBURG, KS 66762	NONE				2,500.
NATIONAL M.S. SOCIETY, TULSA CHAPTER 4606 E. 67TH STREET, BLDG. 7, STE 1 TULSA, OK 74136	NONE				1,310.
JOHN 3:16 MISSION 2027 N. CINNCINNATI AVE. TULSA, OK 74106	NONE				250.
OPERATION HOLIDAY SPIRIT 513 ACG/CCE, 3800 AVE. A, STE 201 TINKER AIR FORCE BAS, OK 73145	NONE				2,700.
FORT SILL MWR ACS FOOD VOUCHER PROGRAM P.O. BOX 33307 FORT SILL, OK 73503	NONE				1,500.

2009 · **FEDERAL STATEMENTS** PAGE 6 THE ROSS CHARITABLE FOUNDATION 20-5309346 STATEMENT 9 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR FOUND-DONEE ATION PURPOSE OF NAME AND ADDRESS RELATIONSHIP **STATUS** GRANT AMOUNT FORT SILL MWR, BOSS, TOYS FOR KIDS P.O. BOX 33307 FORT SILL, OK 73503 NONE 1,500. TOTAL \$ 113,863.