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EXTENSION ATTACHED

Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

Open to Public Inspection

Department of the Treasury

► The organization may have to use a copy of this return to satisfy state reporting requirements

20 For the 2009 calendar year, or tax year beginning , 2009, and ending C Name of organization UNITED WAY OF CENTRAL OKLAHOMA, D Employer identification number Please Check if applica use IRS 73-0589829 label or Number and street (or P O box if mail is not delivered to street address) E Telephone number print o Name change 1444 NW 28TH STREET (405) 236-8441 initial return See Specific City or town, state or country, and ZIP + 4 Terminated Instruc G Gross receipts \$ Amended return OKLAHOMA CITY, OK 73106 23,423,301. Application pending F Name and address of principal officer ROBERT SPINKS H(a) Is this a group return for Yes NW 28TH STREET OKLAHOMA CITY, OK 73106 H(b) Are all affiliates included? Nο X | 501(c) (3) ◀ (insert no) If "No " attach a list (see instructions) Website: WWW.UNITEDWAYOKC.ORG H(c) Group exemption number L Year of formation 1952 M State of legal domicile OK Form of organization X Corporation Trust Part I Summary Briefly describe the organization's mission or most significant activities TO IMPROVE THE HEALTH, SAFETY, EDUCATION & ECONOMIC WELL-BEING OF Activities & Governance INDIVIDUAL FAMILIES IN NEED IN CENTRAL OKLAHOMA. If the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ▶ Number of voting members of the governing body (Part VI, line 1a) 77 Number of independent voting members of the governing body (Part VI, line 1b) 45 Total number of employees (Part V, line 2a) 427 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 18,970,843 22,258,409. 8 Contributions and grants (Part VIII, line 1h) 0. 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 98,879 20,441. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 64,075 74,198 11 19,133,797 22,353,048 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 15,329,929 15,261,880. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,706,767 2,031,963 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses, Part IX, column (D), line 25) ▶ _ 1,559,792. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1,520,058 1,675,118. 18,556,754 18,968,961. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 577,043 3,384,087. Revenue less expenses Subtract line 18 from line 12. Beginning of Year End of Year 22,483,363 25,481,930. 20 Total assets (Part X, line 16) 10,972,314 10,305,837. Total liabilities (Part X, line 26) 11,511,049 15,176,093. 22 Net assets or fund balances Subtract line 21 from line 20. Part II Signature Block -schedules and statements, and to the best of my knowledge Under penalties of perjury, I declare that I have examined this return lave examined this return, including accompanying schedules and statements, and to the best of my knowledge Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) P00440841 Paid signature 11-8-10 employed > Preparer's Firm's name (or yours GRANT THORNTON LLP 36-6055558 EIN if self-employed), address, and ZIP + 4 211 N ROBINSON STE 1200 OKLAHOMA CITY, OK 73102 405-218-2800 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes

Form 990 (2009)

PAGE 3

(Expenses \$ including grants of \$ 4e Total program service expenses ► 15, 969, 689.

4d Other program services (Describe in Schedule O)

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) (Revenue \$

Checklist of Required Schedules

Part IV

•			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	
2	Js the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	 -		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	ب	<u> </u>	
•	Schedule C, Part II			Х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4		
•				
6	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
O	Did the organization maintain any donor advised funds or any similar funds or 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		_X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	65.7		
	Schedule D, Part VI	`		41-34
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more		84. m	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		, i'	
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	1		,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	3.		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		18.4	4
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		n t	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		_ {	-]
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ŀ	J. 271	ĕ .
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	1	303	-
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"		5.	
	complete Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	11.		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			ļ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? 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			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Χ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-		
	If "Yes," complete Schedule G, Part III	19	- 1	Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	-	X

Par	Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States 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, line 3, 4, or 5 about compensation of the			}
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	Ì		
	24b through 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	1		
	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		
25 a				
	with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25a		Х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? 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	200		
20	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,	20		
21	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21	-	
28	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
_		28a	x	
		20a		
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	206	Х	
	Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L	00-	x	
••	Part N	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	^	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		x	
	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			.,
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			Х
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			.,
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36_		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R			
	Part VI	37		_X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	197 Note. All Form 990 filers are required to complete Schedule O	38	Х	

Pai	t V . Statements Regarding Other IRS Filings and Tax Compliance			
$\overline{}$			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
-	U.S. Information Returns Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		l
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
·	gaming (gambling) winnings to prize winners?	1c	-	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
2.0	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 45	,		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	·
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
2.	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			}
Ja		3a		X
h	this return? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 b		
		30		-
44	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			•
		4-		Х
	account)?	4a		<u>``</u>
Đ	· · · · · · · · · · · · · · · · · · ·	-		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
F.	and Financial Accounts.			- x
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5 b		
C				
6.	Prohibited Tax Shelter Transaction?	5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6-		X
	organization solicit any contributions that were not tax deductible?	6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6.		
7	gifts were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		-	
а		70	X	
h	and services provided to the payor?	7a 7b	- <u>X</u>	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.0		
·	required to file Form 8282?	7.		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		- 1
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
C	benefit contract?	70		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	. 9		
••	required?	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	- ' ''	-	
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		,	13
	organization, have excess business holdings at any time during the year?	8		الستدر
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	عقشت	لتسنا
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	337	15 建筑	. 4 1 ,
а	Initiation fees and capital contributions included on Part VIII, line 12		~	1,5
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	'		3,3
11	Section 501(c)(12) organizations. Enter		" l	
	Gross income from members or shareholders		135/c	
	Gross income from other sources (Do not net amounts due or paid to other sources against			٠,٠
	amounts due or received from them)		SCVS	- ,
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-3]	ليخعب
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		 !	. –
	and the state of t		.y.	· · ·

73-0589829 Form 990 (2009) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a. 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х Did the organization delegate control over management duties customarily performed by or under the direct Х 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . . . Χ 4 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a material diversion of the organization's assets?..... X 6 Does the organization have members, stockholders, or other persons who may elect one or more members Х X 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Χ 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Χ 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes." does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990 Χ 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Х 12c Х 13 13 X 14 Does the organization have a written document retention and destruction policy?.......... 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? 15a 15b If "Yes" to line 15a or 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 Х 16a 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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ▶_OK,
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 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 interest policy, and financial statements available to the public
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization > AMY MONTOYA 1444 NW 28TH STREET OKLAHOMA CITY, OK 73106

JSA 9E 1042 5 000 Form **990** (2009)

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- 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

(A) Name and Title	(B) Average		4		C)	45-4	-6.5	(D)	(E)	(F)
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
ROBERT SPINKS										
CEO & PRESIDENT	38.00	Х		Х	Х	Х		162,323.	0.	0
EDMUND MARTIN CHAIRMAN OF BOARD	1.00	Х		х				0.	0.	0
ROY PAGE VICE CHAIRMAN	1.00	Х		х				0.	0.	0
DAVID HARLOW SECRETARY/ TREASURER	1.00	Х		Х				0.	0.	0
SCOTT DAVIS ASSISTANT SECRETARY/TREASURER	1.00	Х		х				0.	0.	0
SEE STATEMENT 1		Х						0.	0,	0
AMY MONTOYA CFO	38.00			х				59,050.	0.	0
		,								
						_				

Form 990 (2009)

Part VII Section A. Officers, Directors, Tru (A)	(B) Average			((C)			(D) Reportable	(E) Reportab		(F) Estimated
 Name and title . 	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	a Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensal from relat organizati (W-2/1099-M	tion ed ons	amount of other compensation from the organization and related organizations
	_										
									· L		
Total number of individuals (including but not I reportable compensation from the organization)	mited to th		ıste				► re	221,373. ceived more than	\$100,000 in	0	Yes No
 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu For any individual listed on line 1a, is the 	le J for suc sum of	ch ind repor	<i>ıvıdı</i> tabl	ual e c	om _l	 oensa	tion	and other comp	oensation fr	om	3 X
the organization and related organizations individual											4 X
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	or accr complete S	ue co Sched	omp ule ,	ens J foi	atio sur	n fro ch per	m son	any unrelated o	rganization	for 	5 X
Section B. Independent Contractors 1 Complete this table for your five highest of		od in	don		los*	cont	ro	tore that recover	t more than	. 640	0.000 of
compensation from the organization		eu in	uep		uent	cont	rac'			ı \$1U	· · · · · · · · · · · · · · · · · · ·
Name and business addr ATTACHMENT 5	ess							(B) Description of ser	vices	С	(C) ompensation
ATTACHEMI 3											
2 Total number of independent contractors (in more than \$100,000 in compensation from the				nited		thos	e li	sted above) who	received		in the

Pa	rt VII	Statement of Revenue			73-0589829		
	,	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ह्य इ	-1 a	Federated campaigns 1a	22,232,009				
fts, grants amounts	b	Membership dues 1t					
gifts, laram	C	Fundraising events 10	<u> </u>				
	d	Related organizations 1d		-			
Contributions, and other simil	е	Government grants (contributions) 1e	·	1			
but	f		24.40				
i t		and similar amounts not included above . 11		· '			
a S	9	Noncash contributions included in lines 1a-1f \$		22 250 400	-		
- e	h	Total. Add lines 1a-1f	Business Code	22,258,409	-		
Program Service Revenue			business code				-
æ	2a		-		· ·-		
Ş	b		-		-	-	+
Še	٦		-				
Ē							1
gra		All other program service revenue					
Pro	g	Total. Add lines 2a-2f		0			<u> </u>
	3	Investment income (including dividends, in other similar amounts) ATTACHMEN	terest and	20,441			20,441
	4	Income from investment of tax-exempt bon		0			
	5	Royalties · · · · · · · · · · · · · · · · · · ·		0			
		(i) Real	(II) Personal				
	6a	Gross Rents	-				
	b	Less rental expenses			,	<u>.</u>	i
	С	Rental income or (loss) L					
	d	Net rental income or (loss)		0			ļ
	7 a	Gross amount from sales of		- Gran	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		assets other than inventory 1,070,25	13			,	1
	ь	Less cost or other basis and sales expenses 1,070,25	.3	" -	-	• '	· ·
		und sales expenses		,	,		
	d	Gain or (loss)					-
a	8 a						
Ž	U a	Gross income from fundraising events (not including \$;			1
Ş.		of contributions reported on line 1c)			7		E
8		See Part IV, line 18	_	-	,		:
Other Revenue	b	Less direct expenses	,				
t	C	Net income or (loss) from fundraising events	i	0			
)	9 a	Gross income from gaming activities See Part IV, line 19					1
	b	Less direct expenses					
	С	Net income or (loss) from gaming activities .	1	0			
	10a	Gross sales of inventory, less returns and allowances		•		, -	1
		Less cost of goods sold	ь		·•		
ł		Miscellaneous Revenue	Business Code				
	11a	MISC INCOME	_	74,198			74,198
	b			-,			14,150
	c						
	ď	All other revenue					
	e	Total. Add lines 11a-11d		74,198	,		
	12	Total Revenue. See instructions	T I	22,353,048			94,639.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl	ete column (A) but ar	e not required to com	plete columns (B), (C),	and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	15,261,880.	15,261,880.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0.		•	
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
-	trustees, and key employees	221,373.	50,210.	82,149.	89,014.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	1,305,148.	236,823.	504,996.	563,329.
8	Pension plan contributions (include section 401(k)				-
v	and section 403(b) employer contributions)	0.			
9	Other employee benefits	383,493.	100,612.	134,001.	148,880.
10	Payroll taxes	121,949.	25,848.	45,523.	50,578.
11	Fees for services (non-employees)	,			.,,
	Management	0.			
	Legal	0.	****		
	Accounting	0.			
	Lobbying	0.			
		0.			
	Professional fundraising services See Part IV, line 17 Investment management fees	0.			
	•	78,411.	9,188.	69,223.	0.
-	Other	128,145.	9,296.	0.	118,849.
12	Advertising and promotion	181,947.	5,047.	83,798.	93,102.
13	Office expenses	0.			
14	Information technology	0.			· · · · · · · · · · · · · · · · · · ·
15	Royalties	163,462.	0.	77,432.	86,030.
16	Occupancy	26,766.	3,577.	0.	23,189.
17	Travel	20,100.	3,377.		23,103.
18	Payments of travel or entertainment expenses	o.l			
	for any federal, state, or local public officials	204,215.	32,247.	54,361.	117,607.
19	Conferences, conventions, and meetings	204,213.	32,241.	74, 301.	111,007.
20	Interest	152,121.	9,866.	142,255.	
21	Payments to affiliates ATCH .7	225,415.	9,800.		110 626
22	Depreciation, depletion, and amortization	223,413.	0.	106,779.	118,636.
23	Insurance	0.			
24	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)				
	•	105 255	105 255		
•	TURNING POINT	185, 255.	185,255.	0.	0.
-	CFC CAMPAIGN EXPENSE	186,342.	0.	89,433.	96,909.
_	STATE CAMPAIGN EXPENSE	54,010.	0.	25,922.	28,088.
_	CITY CAMPAIGN EXPENSE	49,189.	0.	23,608.	25,581.
•	MEMBERSHIP DUES	22,652.	22,652.	0.	<u> </u>
	All other expenses	17,188.	17,188.		
	Total functional expenses. Add lines 1 through 24f	18,968,961.	15,969,689.	1,439,480.	1,559,792.
26	Joint Costs. Check here ▶ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
JSA					Form 990 (2009)

Pa	rt X		 		rage 11
,			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	8,489,479.	1	8,496,155.
	2	Savings and temporary cash investments	930,311.	2	907,906.
	3	Pledges and grants receivable, net	8,479,055	3	11,224,847
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees,	key		
		employees, and highest compensated employees Complete Part	II of	•	
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under se	ction		
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Com		.	. *,
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
188	8	Inventories for sale or use	j	8	
Q	9	Prepaid expenses and deferred charges		9	
	10a	Prepaid expenses and deferred charges Land, buildings, and equipment cost or 10a 6,240,	573.		
		other basis Complete Part VI of Schedule D		ļ	
	ь	Less accumulated depreciation	138. 4,501,565.	10c	4,781,435.
	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		15	71,587.
	16	Total assets. Add lines 1 through 15 (must equal line 34)			25,481,930.
	17	Accounts payable and accrued expenses			6,705,862.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ģ	21	Escrow or custodial account liability Complete Part IV of Schedu		21	
Liabilities	22	Payables to current and former officers, directors, trustees,			
igi		employees, highest compensated employees, and disqua	- 1		
Ë		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties ATCH		23	3,599,975.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	10,972,314.	26	10,305,837.
		Organizations that follow SFAS 117, check here $\triangleright X$ and	1 4 151	. "	*
es		complete lines 27 through 29, and lines 33 and 34.	in the state of th	ا د فو د	· · · · · · · · · · · · · · · · · · ·
au	27	Unrestricted net assets	10,860,270.		14,468,043.
Fund Balances	28	Temporarily restricted net assets	650,779.	28	708,050.
P	29	Permanently restricted net assets		29	
or Fu		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.		,	
	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances		33	15,176,093.
_	34	Total liabilities and net assets/fund balances			25,481,930.

Form **990** (2009)

•	rt XI Financial Statements and Reporting		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			ŀ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis			l
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			l
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number

73-0589829

_	_							-::-			
Рa				ity Status (All organ						ctions.	
The	orga		-	dation because it is (F		-		-			
1		A church, c	onvention of chu	irches, or association	of churche:	s described	ın sectio	n 170(b)	(1)(A)(i).		
2		A school de	escribed in <mark>secti</mark> o	on 170(b)(1)(A)(ii). (At	tach Sched	lule E)					
3	П	A hospital o	or a cooperative	hospital service organ	ization des	cribed in se	ction 170	(b)(1)(A)	(iii).		
4	П	A medical	research organi	zation operated in co	njunction	with a hos	pital des	cribed in	section	170(b)(1)	(A)(iii). Enter the
		hospital's na	ame, city, and st	ate	•						
5		•	-	or the benefit of a col	lege or un	iversity ow	ned or o	perated I	ov a gov	ernmental	unit described in
•	ш	_	(b)(1)(A)(iv). (C			,		P 0.0.00	-, - 3		
6				vernment or governme	antal unit de	secribed in	saction 1	70(h)/1)/	Δ)(γ)		
7	X		-	illy receives a substan						or from	the general public
•		-		•	•	its suppor	t iioiii a	Jovernin	siliai uilli	OF HOME	ine general public
				(1)(A)(vi). (Complete F	=	malata Dar	4 II \				
8	\vdash		*	d in section 170(b)(1)(•	•	4			
9		-		Illy receives (1) more							•
				ited to its exempt fun		•		-			
			-	ment income and un				-		511 tax)	from businesses
				n after June 30, 1975							
10		•	•	and operated exclusive	•		•				
11	Ш			and operated exclusi	-						-
		•		ublicly supported orga					•	•	
				at describes the type o							
		а Тур				e III - Fund	-	-			pe III - Other
е	Ш			ertify that the organiz				-			•
				ion managers and oth	er than on	e or more	publicly s	supported	d organiz	ations de	scribed in section
		• , , ,	r section 509(a)(•							
f		If the organ	nization received	d a written determina	tion from 1	the IRS tha	at it is a	Type I, 1	Type II, c	r Type III	supporting
		organization	n, check this box								
g		Since Augus	st 17, 2006, has	the organization acce	pted any g	lift or contri	bution fro	m any of	the		
		following pe	ersons?								
		(i) A pers	on who directly	or indirectly controls	, either ale	one or tog	ether wit	h person	s descri	ped in (ii)	Yes No
		and (III)	below, the gove	erning body of the supp	ported orga	anization?					11g(i)
		(ii) A family	y member of a p	erson described in (i) a	bove?						11g(II)
		(iii) A 35%	controlled entity	of a person described	l in (i) or (ii)	above?					11g(iii)
h		Provide the	following inform	ation about the suppo	rted organi	zation(s)					
(i) l	Name	of supported	(ii) EIN	(iii) Type of organization			(v) Did y	ou notify	(vi)	s the	(vii) Amount of
	orga	inization		(described on lines 1-9 above or IRC section		sted in your		nization in		lion in col	support
				(see instructions))	governing	document?		of your cont?		zed in the S?	
					Yes	No	Yes	No	Yes	No	
					· · · · · ·		ļ				
							1				
								· · ·			
Tota	.1										
OT?	11		l'	1		1	l				

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

Schedule A (Form 990 or 990-EZ) 2009

Sche	dule A (Form 990 or 990-EZ) 2009			7.3	-0589829		Page 2
Pa	rt II Support Schedule for Or (Complete only if you chec	ganizations D ked the box or	Described in Son line 5, 7, or 8	ections 170(3 of Part I)	b)(1)(A)(iv) a	nd 170(b)(1)(A	\)(vi)
Sec	tion A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	15,926,505	15,877,997	18,333,297	18,649,224	19,091,271	87,878,294
2	Tax revenues levied 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 unit to the organization without charge						· · · · · · · · · · · · · · · · · · ·
4	Total. Add lines 1 through 3	15,926,505	15,877,997	18,333,297	18,649,224	19,091,271	87,878,294
5	The portion of total contributions by each	1 S. 1	-		4		
	person (other than a governmental unit or	*,*		•	14.2		
	publicly supported organization) included	,	,		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, '	
	on line 1 that exceeds 2% of the amount	,		** · · ·		,	
	shown on line 11, column (f)						
500	Public support. Subtract line 5 from line 4 tion B. Total Support					1	87,878,294
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	15,926,505	15,877,997	18,333,297	18,649,224	19,091,271	87,878,294
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	67,644	149,300	173,533	98,879		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	377014	143,300	1,3,333	36,679	20,441	509,797
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . ATCH 1	136,167	196,811	218,222	64,075	74,198	689,473
11	Total support. Add lines 7 through 10	· , · , · ,	<u>' </u>	`			89,077,564
12	Gross receipts from related activities, etc. (s					12	
13	First five years. If the Form 990 is formanization check this box and stop here.	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
Sec	organization, check this box and stop here tion C. Computation of Public Sup	port Percenta				• • • • • • • • •	· · · · >
14	Public support percentage for 2009 (li			11 column (ft)		44	98.65%
15	Public support percentage from 2008						98.49%
	331/3% support test - 2009. If the o						
	this box and stop here. The organization						≥, check ► X
b	331/3% support test - 2008. If the c						or more
	check this box and stop here. The orga						
17a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me						
	Part IV how the organization meets t						
	organization						▶□
b	10%-facts-and-circumstances test - 2	2008. If the org	janization did no	ot check a box	on line 13, 16a	a, 16b, or 17a,	
	15 is 10% or more, and if the orga Explain in Part IV how the organization						
	supported organization						Publicly ☐
40	Debuga for 1 41 15 11				· · · · · · · · · ·	· · · · · · · · ·	

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2009

	stion-A. Public Support	(a) 2005	(b) 2006	(c) 2007	(4) 2008	(a) 2000	/ft Total
	alendar year (or fiscal year beginning in)	(4) 2005	(1) 2000	(c) 2007	(d).2008	(e) 2009	(f) Tota
1	Gifts, grants, contributions, and						
	membership fees received (Do not include						
_	any "unusual grants ")		 			 	
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities					1	
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	ļ	 				
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					ļ	
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge				·····		
6	Total. Add lines 1 through 5					 	
7 a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons Amounts included on lines 2 and 3	<u> </u>		.L		<u> </u>	
D	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			1		[]	
	for the year	ļ <u></u>		 			
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		,· ,				
	line 6)		<u> </u>	1	<u> </u>		
	tion B. Total Support		- _T	T		1	
C	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Tota
9 0 a	Amounts from line 6						
_	sources						
b	Unrelated business taxable income (less	I					
	section 511 taxes) from businesses	1					
	acquired after June 30, 1975					ļ	
C	Add lines 10a and 10b						
l 1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income Do not include gain or						
	loss from the sale of capital assets	1					
_			1	1			
_	(Explain in Part IV)					1	
	(Explain in Part IV)		+				
	Total support. (Add lines 9, 10c, 11,						
3		the organization	on's first, second,	third, fourth, or	fifth tax year a	s a section 501(c)(3)
3	Total support. (Add lines 9, 10c, 11, and 12)						
3	Total support. (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>				
3 4 Sec	Total support. (Add lines 9, 10c, 11, and 12)	port Percent		· · · · · · · · · · · · · · · · · · ·			
3 4 Sec	Total support. (Add lines 9, 10c, 11, and 12)	pport Percent , column (f) divid	tage ded by line 13, colu	mn (f))		15	
3 4 Sec 5	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2009 (line 8)	pport Percent , column (f) dividedule A, Part III, li	tage ded by line 13, colu	mn (f))		15	
3 4 Sec 5	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Suppublic support percentage for 2009 (line 8 Public support percentage from 2008 Schetton D. Computation of Investment	pport Percent , column (f) dividedule A, Part III, lint Income Pe	tage ded by line 13, coluine 15	mn (f))		15	
3 4 6 6 6 6	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schettion D. Computation of Investment investment income percentage for 2009 (lines)	pport Percent , column (f) dividedule A, Part III, Int Income Per ne 10c, column	tage ded by line 13, coluine 15 rcentage (f) divided by line	mn (f))		15 16	
3 4 6ec 5 6 6ec 7	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 School tion D. Computation of Investment Investment income percentage from 2009 (linestment income percentage from 2008)	pport Percent , column (f) dividedule A, Part III, lint Income Per ne 10c, column Schedule A, Part	tage ded by line 13, colu ine 15 rcentage (f) divided by line 1 III, line 17	mn (f))		15 16 17 18	>
3 6ec 5 6 6ec 7	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schetion D. Computation of Investment income percentage for 2009 (linvestment income percentage from 2008 33 1/3% support tests - 2009. If the organization of the support tests - 2009.	pport Percent , column (f) dividedule A, Part III, lint Income Per ne 10c, column Schedule A, Part rganization did	tage ded by line 13, coluine 15 rcentage (f) divided by line 11 III, line 17 not check the bo	mn (f))	line 15 is mor	15 16 17 18 e than 331/3%, a	▶
3 4 6ec 5 6ec 7 8	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schetton D. Computation of Investment investment income percentage for 2009 (linvestment income percentage from 2008 33 1/3% support tests - 2009. If the or 17 is not more than 33 1/3%, check the	pport Percent , column (f) dividedule A, Part III, Int Income Per ne 10c, column Schedule A, Part rganization did nis box and ste	tage ded by line 13, coluine 15 rcentage (f) divided by line 1 III, line 17 not check the boop here. The org	mn (f)) 13, column (f)) x on line 14, and panization qualifies	line 15 is mor	15 16 17 18 e than 331/3 %, ar supported organiz	nd line ation ▶
3 4 6ec 5 6ec 7 8	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schettion D. Computation of Investment investment income percentage for 2009 (linvestment income percentage from 2008 33 1/3% support tests - 2009. If the organization of Investment income than 33 1/3%, check the 33 1/3% support tests - 2008. If the organization in the support tests - 2008. If the organization in the support tests - 2008. If the organization in the support tests - 2008. If the organization is support tests - 2008.	pport Percent, column (f) dividedule A, Part III, lint Income Percent 10c, column Schedule A, Part ganization did in box and steamization did no	tage ded by line 13, coluine 15 rcentage (f) divided by line 11 ll, line 17 not check the boop here. The orgot check a box on	mn (f)) 13, column (f)) x on line 14, and panization qualifies line 14 or line 19.	line 15 is mor as a publicly a, and line 16 is	15 16 17 18 e than 331/3 %, ar supported organiz s more than 331/3	nd line ation ▶ %, and
3 4 6ec 5 6ec 7 8	Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schetton D. Computation of Investment investment income percentage for 2009 (linvestment income percentage from 2008 33 1/3% support tests - 2009. If the or 17 is not more than 33 1/3%, check the	pport Percent, column (f) dividedule A, Part III, lint Income Perne 10c, column Schedule A, Part III and Income Perne 10c, column schedule A, Part III and III	tage ded by line 13, coluine 15 rcentage (f) divided by line 1 lll, line 17 not check the boop here The orgot check a box on stop here The orgot check a box on stop here The orgot check a box on stop here The orgot	mn (f)) 13, column (f)) x on line 14, and janization qualifies line 14 or line 19. ganization qualifier	line 15 is mor as a publicly a, and line 16 is s as a publicly	15 16 17 18 e than 331/3 %, as supported organiz s more than 331/3 supported organiz	nd line ation ▶ %, and ation ▶

Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10,
	Part II, line 17a or 17b, or Part III, line 12 Provide any other additional information. See instructions

•					ATTACHMENT	1
SCHEDULE A, PART II - OTHER INC	OME					
DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
MISCELLANEOUS INCOME	136,167.	196,811	218,222	64,075	74,198	689,473
TOTALS	136,167	196,811	218,222	64,075	74,198	689,473

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Nam	e of the organization		Employer identification number
UN	TÈD WAY OF CENTRAL OKLAHOMA, INC.		73-0589829
Pa	Organizations Maintaining Donor Adv the organization answered "Yes" to For		r 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 held in c	tonor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a		
	used only for charitable purposes and not for the b		
	purpose conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" to F	Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recre	eation or pleasure) Preservation	of an historically important land area
	Protection of natural habitat	1 1	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution i	n the form of a conservation
	easement on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easements	s	2 b
С	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2 d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or termin	nated by the organization during
	the tax year ▶		
4	Number of states where property subject to conse	rvation easement is located ▶	
5	Does the organization have a written policy regard		
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, in	specting, and enforcing conservation ea	sements during the year
	———		
7	Amount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easeme	ents during the year
	> \$	-	
8	Does each conservation easement reported on line	• • •	
	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports		
	balance sheet, and include, if applicable, the text of	U	cial statements that describes
	the organization's accounting for conservation easi		0::
Pel	Organizations Maintaining Collections Complete if the organization answered		er Similar Assets.
		· · · · · · · · · · · · · · · · · · ·	
1 a	If the organization elected, as permitted under S art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its fi	ld for public exhibition, education, or res	search in furtherance of public service.
b	If the organization elected, as permitted under S historical treasures, or other similar assets held provide the following amounts relating to these items	FAS 116, to report in its revenue state for public exhibition, education, or resense.	ement and balance sheet works of art, earch in furtherance of public service,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		▶\$
2	If the organization received or held works of a	rt, historical 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 Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2009

Pa	It III Organizations Maintain	ing Coll	ections	of Art, Hist	orical	Treasure	s, or	Other Similar A	Assets (continued)
•										
3	Using the organization's acquisition		ion, and	other record	s, che	ck any of the	ne foli	lowing that are a	significa	nt use of its
	collection items (check all that app	oly)		_	_					
а	Public exhibition			d L		Loan or ex	chang	ge programs		
b	Scholarly research			e		Other				
C	Preservation for future ge									
4	Provide a description of the organ	ization's d	collections	s and explaii	n how	they further	the c	organization's ex	empt pui	rpose in
	Part XIV									
5	During the year, did the organizati	on solicit	or receiv	e donations	of art,	historical t	reasu	ires, or other simil	lar	
	assets to be sold to raise funds rate	ther than	to be ma	intained as p	art of	the organiz	ation'	's collection?	[Yes No
Pa	rt IV Escrow and Custodial A	rranger	nents. C	omplete if	the o	ganization	ans	wered "Yes" to	Form 9	90. Part
	IV, line 9, or reported ar	n amoun	it on For	m 9 ⁹ 0, Par	t X, Iir	ne 21	-			
								 		
1a	Is the organization an agent, truste	e, custoc	lan or ot	her intermed	liary fo	r contributi	ons o	r other assets no	ot	
	included on Form 990, Part X?									Yes No
b	If "Yes," explain the arrangement ii								[
						,		A	mount	
С	Beginning balance						1.0			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a										Yes No
	If "Yes," explain the arrangement in), 1 dit / iiic					٠٠٠٠	res No
_	t V Endowment Funds. Con			ation answ	orod '	'Voc" to Ec	rm 0	OO Port IV line	10	
ı aı	Endowment ands. Con		rent Year	(b) Prior y		(c) Two ye				(e) Four years back
1 a	Beginning of year balance	(4) 04	- Tour	(5) 1101)		(c) two ye	ars bac	(u) Three yea	als Dack	(e) Four years back
b	Contributions						-			
c	Net investment earnings, gains,			 						
•	and losses							ع ا		
d	Grants or scholarships						 ,	•		
	Other expenditures for facilities .								· -	
C	and programs									
•	Administrative expenses									
g	End of year balance			<u> </u>		<u> </u>		<u></u>	<u> </u>	,
2	Provide the estimated percentage	•	ar end ba		6					
a L	Board designated or quasi-endown			%						
b	Permanent endowment ▶									
	Term endowment ▶	%								
3 a	Are there endowment funds not in	the poss	ession of	the organiz	ation t	hat are hek	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 org									3b
4	Describe in Part XIV the intended u									
Par	t VI Investments - Land, Buil	dings, a	nd Equi	pment. See	Forr	n 990, Pai	t X, I	ine 10		
	Description of investment			or other basis restment)) Cost or other basis (other)		(c) Accumulated depreciation	(6	d) Book value
1a	Land									
b	Buildings					4,447,62	24	276,389		4,171,235.
C	Leasehold improvements					524,74	12	316,051.		208,691.
d	Equipment					1,268,20	77	866,698.		401,509.
е	Other			<u>. </u>		-				
Tota	I. Add lines 1a through 1e (Column	(d) must	equal Fo	rm 990, Part	X, col	umn (B), line	e 10(c	:)) ▶		4,781,435.

Part VII	Investments - Other Securities. Sec	<u>e Form 990, Part X, line</u>	e 12	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	tion ket value
Financial d	lerivatives			
	Id equity interests			·
Other				
				
				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	>		
	Investments - Program Related. Se		e 13	
	(a) Description of investment type	(b) Book value	(c) Method of valua	ition
			Cost or end-of-year mar	ket value
			<u> </u>	
				
				7
				
Total, (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13.)	D		
Part IX	Other Assets. See Form 990, Part		<u> </u>	
		(a) Description		(b) Book value
				
			· · · · · · · · · · · · · · · · · · ·	
				
				
Total (Calum	(h) must soupl Sam 000 Part V and (D) line 15)			
Part X	on (b) must equal Form 990, Part X, col (B) line 15). Other Liabilities. See Form 990, Pa		· · · · · · · · · · · · · · · · · · ·	L
1.	(a) Description of liability	(b) Amount		
Federal inc		(b) / anount		
1 000101111	zomo taxoo		450	
		- 		
			\	
			,	
			,	
			•	
			•	
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25)	•	<u> </u>	

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial States	nent	s_	
-1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		22,353,048
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		18,968,961
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		3,384,087
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		484,422
9	Total adjustments (net) Add lines 4 through 8	9	<u> </u>	484,422
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		3,868,509
Part				
1	Total revenue, gains, and other support per audited financial statements	. L	1	16,262,111
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	_	-	
b	Donated services and use of facilities	_		
C	Recoveries of prior year grants 2c		- !	
d	Other (Describe in Part XIV)	_		
е	Add lines 2a through 2d		2e	457,307
3	Subtract line 2e from line 1		3	15,804,804
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV) 4b 6,548,24		.	
С	Add lines 4a and 4b		4c	6,548,244
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	22,353,048
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	<u>etur</u>	<u>n</u>	10.015.05
1	Total expenses and losses per audited financial statements	. -	1	12,845,359
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	}^	·	
а	Donated services and use of facilities 2a	_	- 1	
b	Prior year adjustments 2b			
С	Other losses 2c			
d	Other (Describe in Part XIV) 2d 424, 64		l	404 640
е	Add lines 2a through 2d		2e	424,642
3	Subtract line 2e from line 1	· -	3	12,420,717
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	_	_	
b	Other (Describe in Part XIV) 4b 6,548,24	4.		C 540 044
C	Add lines 4a and 4b		4c	6,548,244
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)XIV Supplemental Information	٠.	5	18,968,961.
Comp and 2l this pa	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pab, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. All art to provide any additional information PAGE 5	so co	mpie 	ete

Page 5

PART XII, LINE 2D AND 4B

OTHER AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART VIII, LINE 12 INCLUDE: \$457,307, WHICH IS ALLOCATED TO UNITED WAY LOGAN COUNTY (FEIN 73-1279596) AND UNITED WAY CANADIAN COUNTY (FEIN 30-0092336) IN THE AMOUNTS OF \$253,893 AND \$203,414 RESPECTIVELY.

OTHER AMOUNTS INCLUDED INCLUDED ON FORM 990, PART VIII, LINE 12 BUT NOT ON LINE 1 INCLUDE: \$6,548,244, WHICH REPRESENTS AMOUNTS DESIGNATED BY DONORS FOR SPECIFIC ORGANIZATIONS.

PART XIII, LINE 2D AND 4B

OTHER AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25 INCLUDE: \$187,476 OF GRANTS PAID BY UNITED WAY LOGAN COUNTY (FEIN: 73-1279596); AND \$237,166 OF GRANTS PAID BY UNITED WAY CANADIAN COUNTY (FEIN: 30-0092336).

OTHER AMOUNTS INCLUDED ON FORM 990, PART IX, LINE 25 INCLUDE: \$6,548,244, WHICH REPRESENTS GRANTS PAID FROM DONORS WHO RETAINED THE ABILITY TO DESIGNATE SPECIFIC ORGANIZATIONS AS RECIPIENTS.

Part XIV Supplemental Information (continued)

PART XI, LINE 8

FAS 158 ADJUSTMENT - \$451,757

INCOME/(LOSS) REPORTED BY UNITED WAY OF CANADIAN COUNTY - \$(33,752)

INCOME/(LOSS) REPORTED BY UNITED WAY OF LOGAN COUNTRY - \$66,417

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Open to Public Inspection

Exerpt Purposes SRANTS IN SUPPORT OF å 465 (h) Purpose of grant or assistance 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. Use |X |X Employer identification number Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 73-0589829 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) (d) Amount of cash grant (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 15,261,880 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Part IV and Schedule 1-1 (Form 990) if additional space is needed 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? Part I General Information on Grants and Assistance (p) EIN CENTRAL OKLAHOMA, INC. Enter total number of other organizations (a) Name and address of organization or government UNITED WAY OF STATEMENT 2 Part II SEE

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Schedule ! (Form 990) 2009

Schedule I	Schedule I (Form 990) 2009	Page 2
Part III	Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990 Part IV Inp. 22	
	Use Part IV and Schedule I-1 (Form 990) if additional space is needed	

			,		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
L					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2,	te this part to	provide the info	ormation required		and any other additional information.
EXPLANATION FOR SCHEDULE I, PART 1	 	 			
MEMBER ORGANIZATIONS APPLY ANNUALLY	FOR	ALLOCATIONS FROM	M THE ANNUAL		
UNITED WAY FUNDRAISING CAMPAIGN.	THESE ORG	ORGANIZATIONS A	ARE REVIEWED		
ANNUALLY BY THE BOARD OF DIRECTORS	THE	BOARD EITHER ACCEPTS	OR	REJECTS	
THE APPLICATIONS. ORGANIZATIONS M	MUST MEET	MEET MEMBERSHIP R	REQUIREMENTS	WHICH	
INCLUDE AMONG OTHER REQUIREMENTS,	THE FOLLOWING:	VING:			
1. ORGANIZATIONS MUST CONDUCT A R	RECOGNIZED	A RECOGNIZED PROGRAM OF HEALTH AND	HEALTH AND		
WELLNESS IN THE CANADIAN COUNTY AR	_AREA2:OE	ORGANIZATIONS MUST	MUST SHOW		
EVIDENCE THAT THEY ARE EFFECTIVELY MEETI	C_MEETING_A	NG A MAJOR NEED.	3 <u>IF LOCAL</u> ,	AL,	
<u>ORGANIZATIONS MUST BE INCORPORATED UNDER</u>		THE STATE LAWS OF	OF OKLAHOMA AS A	AS.A.	
					000 (000 mod) I elisted S

Schedule I (Schedule I (Form 990) 2009	Page 2
Part III	Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990 Part IV line 22	, , ,
	Use Part IV and Schedule I-1 (Form 990) if additional space is needed	

(a) Type of grant or assistance	(b) Number of recipients	(b) Number of (c) Amount of recipients cash grant non	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this p	ete this part to	provide the info	ormation required	I in Part I, line 2, and an	art to provide the information required in Part I, line 2, and any other additional information
NON-PROFIT CHARITABLE ORGANIZATION.	4.	TIONS	MUST BE CERTIFIED	IFIED	
BY THE IRS AS CORPORATIONS ORGANIZED AND OPERATED EXCLUSIVELY FOR	ZED AND OP	ERATED EXCLU	SIVELY FOR		
CHARITABLE PURPOSES. 5. ORGANIZATIONS		DEMONSTRATE	MUST DEMONSTRATE A BUDGETARY NEED	NEED	
FOR THE ALLOCATION.					

Schedule I (Form 990) 2009

PAGE 29

SCHEDULE J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number 73-0589829

Pari	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			1
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			ĺ
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	1 1		1
D	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			ĺ
	explain	1b		<u> </u>
2	explain			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u></u>
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			ł
	Compensation committee Written employment contract			ĺ
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee		i	İ
4	During the year, did any person listed in Form 990, Part VII. Section A line 1a, with respect to the filing			
•	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			'
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			·
			, /-	1
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	i i		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	-	,	
	compensation contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5 b		Х
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	}	,	l
	compensation contingent on the net earnings of			
а	The organization?	6a		X
þ	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			l
	ın Part III	_8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of W-2 and	of W-2 and/or 1099-MIS(/or 1099-MISC compensation				
(A) Name	<u> </u>	(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(E) lotal of columns (B)(I)-(D)	(r) Compensation reported in pnor Form 990 or Form 990-EZ
	€	162,323.		0		0	162,323	155,064.
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Schedule J (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

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

OMB No 1545-0047 Open To Public Inspection

Department of the Treasury

Internal Revenue Service

lame of the organization JNITÈD WAY OF CENTRAL OKLAHO	OMA, I	INC.				E	mploye 73-	riden -058			nber	
Part I Excess Benefit Transacations Complete if the organization answ	(sectio	n 501(c						, Part	V, line	 e 40b	•	
			(6							(c) Co	Corrected?	
1 (a) Name of disqualified person			(b) Description of transaction						Yes	No		
	<u>.</u>										162	NO
			1						.			
								. .				
				 								
2 Enter the amount of tax imposed on under section 4958	_		_	•	-	_	-		▶ \$			·
3 Enter the amount of tax, if any, on li									\$ _			
Part II Loans to and/or From Interest Complete if the organization and				Part IV. lir	ne 26. or For	m 990-EZ.	Part V	/, line	 38a			
(a) Name of interested person and purpose	(b) Loan	to or from	(c) Orig principal a	gınal	(d) Bala			default?	(f) Ap	ard or		/ritten ment?
	То	From					Yes	No	Yes	No	Yes	No
	ļ						-					
							<u> </u>					
	-	 					-					
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otal				▶\$								
Part III Grants or Assistance Benef Complete if the organization and	itting lı	nterest	ed Persons		e 27							
(a) Name of interested person			ip between int organizat	erested per		(c)	Amoun	and t	ype of	assist	ance	
	<u> </u>		 									
		_										
					——— —							—
Part IV Business Transactions Invo Complete if the organization and					ne 28a 28b	or 28c	-					
(a) Name of interested person	(b) R	elations	nip between rson and the	(c) Amount of transaction		(d) Description of transac		insaction	orga		Shanng of panization's evenues?	
											Yes	No
EE SCHEDULE O												
				1						1		

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

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

2009
Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number 73-0589829

or trust interests	Par	Types of Property							
Art-Instorcial treasures Art-Instorcial treasures Art-Instorcial treasures Art-Instorcial treasures Art-Instorcial treasures Books and publications Cars and other vehicles Books and plus property Securities-Publicly traded Securities-Survivers Securities-Survivers Securities-Miscellaneous Qualified conservation contribution-Historia structures Qualified conservation contribution-Other Real estate-Commercial Real estate-Commercial Real estate-Commercial Real estate-Commercial Real estate-Commercial Securities and the securities of the			Check if		Revenues reported on	Method of	detern	nınıng)
3 Art-Fractional interests 4 Books and publications	1	Art-Works of art	X	2	26,400.	FAIR MARI	KET V	/ALU	E
4 Books and publications . 5 Clothing and household goods	2	Art-Historical treasures							
5 Clothing and household goods 6 Cars and other vehicles	3	Art-Fractional interests							
goods Cars and other vehicles Boats and planes Intellectual property Securities-Publicly traded Securities-Publicly trade Securities-Publicly traded Securit	4	Books and publications							
goods Cars and other vehicles Boats and planes Intellectual property Securities-Publicly traded Securities-Publicly trade Securities-Publicly traded Securit	5	Clothing and household						_	
6 Cars and other vehicles									
8 Intellectual property	6			-					
8 Intellectual property. 9 Securities-Publicly traded 10 Securities-Closely held stock 11 Securities-Closely held stock 12 Securities-Miscellaneous 13 Qualified conservation contribution-Historic structures 14 Qualified conservation contribution-Other 15 Real estate-Residential 16 Real estate-Commercial 17 Real estate-Commercial 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxdermy 21 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ▶() 27 Other ▶() 28 Other ▶() 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 10 During the year, did the organization receive by contribution, and which is not required to be used for exempt purposes for the entire holding penod? 20 Lift Yes," describe the arrangement in Part II 20 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X	7								
9 Securities-Publicly traded	8	-							
10 Securities-Closely held stock 11 Securities-Partnership, LLC, or trust interests 12 Securities-Miscellaneous 13 Qualified conservation contribution-Historic structures 14 Qualified conservation contribution-Other 15 Real estate-Residentia 16 Real estate-Commercial 17 Real estate-Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ►() 26 Other ►() 27 Other ►() 28 Other ►() 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 10 During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 20 b If "Yes," describe the arrangement in Part II 21 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X	9	·							
11 Securities-Partnership, LLC, or trust interests. 12 Securities-Miscellaneous 13 Qualified conservation contribution-Historic structures 14 Qualified conservation contribution-Other 15 Real estate-Residential 16 Real estate-Commercial 17 Real estate-Other 18 Collectibles 19 Food inventory. 20 Drugs and medical supplies 21 Taxidermy. 22 Historical artifacts 23 Scientific specimens. 24 Archeological artifacts. 25 Other ►(· · · · · · · · · · · · · · · · · · ·							
or trust interests	11	•							
Securities-Miscellaneous		• • • • • • • • • • • • • • • • • • • •							
13 Qualified conservation contribution-Historic structures	12								
contribution-Historic structures 14 Qualified conservation contribution-Other	13								
structures Qualified conservation contribution-Other			·						
Qualified conservation contribution-Other Real estate-Residential Real estate-Commercial Real estate-Other Collectibles Food inventory Taxidermy Historical artifacts Scientific specimens Archeological artifacts Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Number of Forms 8283 received by the organization any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Yes No			'	l .		ì			
contribution-Other Real estate-Residential Real estate-Commercial Real estate-Commercial Collectibles Drugs and medical supplies Taxidermy Historical artifacts Scientific specimens Archeological artifacts Other ►() Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Tunust hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Tyes No Tyes N	14								
Real estate-Residential Real estate-Commercial Real estate-Commercial Collectibles Signature of Profestive Secured by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? X eal estate-Commercial Collectibles Collect	•								
Real estate-Commercial	15								
17 Real estate-Other					 				
18 Collectibles					 				
19 Food inventory. 20 Drugs and medical supplies. 21 Taxidermy. 22 Historical artifacts. 23 Scientific specimens. 24 Archeological artifacts. 25 Other ►(27 Other ►(28 Other ►(29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement. 29 Ves No 30a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Tyes No 30a X b if "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?					 				
Drugs and medical supplies					 				
Taxidermy									
Historical artifacts	-	-							
Scientific specimens	_				 		<u>`</u>		
Archeological artifacts	_				-				
Other > ()									
Other ►(
Other ►() 28 Other ►() Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	_								
Other () Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	_							-	
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	_				 				
which the organization completed Form 8283, Part IV, Donee Acknowledgement			the organi	ration during the tay year f	or contributions for				
Yes No 30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	23	•				29			0
30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		which the organization completed t	01111 0203, 1	art IV, Donce Acknowled	gement			Yes	No
it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30 a	During the year did the organization	tion receive	by contribution any prop	erty reported in Part I lin	a 1-28 that	<u>-</u>		
used for exempt purposes for the entire holding period?	554	_			•				
b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		•			·	•	302		Х
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	ь.		_	penou			302	\dashv	 -
contributions?		_		ance policy that require	es the review of any r	on standard			
	J 1		•		•		34		Х
JEA DOES THE OLYANIZATION THE OF USE THIRD PARTIES OF TEIBLEU OLYANIZATIONS TO SOIICIT, PROCESS, OF SEII NONCASN	22~						31		
	J∠ a	-		-	·		22-		x
33/10/10/10/10/10/10/10/10/10/10/10/10/10/	_						228		
b If "Yes," describe in Part II				aluma (a) fan a tura af ar	د د د د د د د د د د د د د د د د د د د				
7	33				pperty for which column (a)	is checked,		İ	
The strict of the strict of the strictions for Form 990. Schedule M (Form 990) 2009	For B	rivacy Act and Panerwork Reduction	Act Notice so	e the Instructions for Form 00	<u> </u>	Cabadul	M /Ean	m ees	1 2000

Schedule M (F	orm 990) 2009	73-0589829	Page 2
Part II	Supplemental Information. 32b, and 33. Also complete	Complete this part to provide the information required by Part I, lines 30th this part for any additional information	э,
•			
,			
			-
			-
			- -
		-~	
		*	
~			

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number

73-0589829

ATTACHMENT 2

PART VI, SECTION A, QUESTION 2

THE BOARD OF DIRECTORS OF THE ORGANIZATION IS EXTREMELY ROBUST AND ENCOMPASSES INFLUENTIAL BUSINESS MEN AND WOMEN IN THE COMMUNITY. AS SUCI IT IS POSSIBLE THAT MEMBERS MAY HAVE BUSINESS/FAMILY RELATIONSHIPS AMONG EACH OTHER. HOWEVER, THESE POTENTIAL RELATIONSHIPS DO NOT CREATE ANY ISSUES OR CONFLICTS IMPACTING THE OPERATIONS OF THE ORGANIZATION.

PART VI, SECTION B, QUESTION 11A

THE FORM 990 WAS REVIEWED BY THE CHAIRMAN OF THE AUDIT COMMITTEE PRIOR TO FILING THE RETURN.

PART VI, SECTION B, QUESTION 12C

THE ORGANIZATION REQUIRES AN ANNUAL ACKNOWLEDGEMENT THAT THERE ARE NO VIOLATIONS OF THE CONFLICT OF INTEREST POLICY.

PART VI, SECTION B, QUESTION 15B

THE COMPENSATION OF THE CEO IS REVIEWED ANNUALLY BY THE BOARD.

SCHEDULE L, PART IV

THE BOARD OF DIRECTORS ARE BUSINESS MEN AND WOMEN AMONG THE COMMUNITY.

THE ORGANIZATION MAY HAVE SOME BUSINESS RELATIONS WITH MEMBERS OF THE

BOARD BUT ALL TRANSACTIONS ARE DONE AT ARMS LENGTH.

PART VI, SECTION C, QUESTION 19

THE ORGANIZATION ALLOWS THE PUBLIC TO VIEW ITS GOVERNING DOCUMENTS,

Name of the organization
UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number 73-0589829

ATTACHMENT 2 (CONT'D)

CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS BY REQUESTING THEM AT THE ORGANIZATION'S MAIN OFFICE.

ATTACHMENT 3

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO IMPROVE THE HEALTH, SAFETY, EDUCATION & ECONOMIC WELL-BEING OF INDIVIDUAL FAMILES IN NEED IN CENTRAL OKLAHOMA BY CONNECTING COMMUNITY RESOURCES WITH RESPONSIVE & ACCOUNTABLE HEALTH & HUMAN SERVICE ORGANIZATIONS.

ATTACHMENT	4	

4A PROGRAM SERVICE

THE UNITED WAY OF CENTRAL OKLAHOMA IS A CHARITABLE ORGANIZATION

THAT COLLECTS CONTRIBUTIONS FROM THE PUBLIC THROUGH AN ANNUAL

CAMPAIGN HELD IN THE FALL. THE DONATED FUNDS ARE DISTRIBUTED THE

FOLLOWING YEAR TO PARTNER AGENCIES REPRESENTING THE FINEST HEALTH,

YOUTH, AND HUMAN SERVICE CHARITIES SERVING THEIR LOCAL COMMUNITY

IN ALL OR PARTS OF SEVEN CENTRAL OKLAHOMA COUNTIES. FUND

DISTRIBUTION IS ACCOMPLISHED THROUGH ALLOCATION DECISIONS MADE BY

MORE THAN 160 COMMUNITY VOLUNTEERS AND APPROVED BY UNITED WAY'S

BOARD OF DIRECTORS AND DONOR DETERMINED DESIGNATIONS. THE UNITED

WAY ALSO MANAGES THE COMBINED FEDERAL CAMPAIGN, SERVING MORE THATN

38,000 CENTRAL OKLAHOMA FEDERAL EMPLOYEES; THE STATE CAMPAIGN,

SERVING ALL OKLAHOMA STATE EMPLOYEES; AND THE OKLAHOMA CITY

MUNICIPAL EMPLOYEE CHARITABLE CAMPAIGN, SERVING ALL CITY

Name of the organization UNITED WAY OF CENTRAL OKLAHOMA, INC. Employer identification number 73-0589829

FORM 990, PART III - PROGRAM SERVICES

ATTACHMENT 4 (CONT'D)

EMPLOYEES. IN 2009, THE UNITED WAY OF CENTRAL OKLAHOMA, INC. CONTINUED TO PLAY AN INTEGRAL ROLE IN PROVIDING COMMUNITY SOLUTIONS TO COMMUNITY PROBLEMS. UNITED WAY IS ACTIVELY INVOLVED IN MANY COMMUNITY INITIATIVES, INCLUDING CENTRAL OKLAHOMA TURNING POINT; SMART START; 211 INFORMATION AND REFERRAL; THE EMERGENCY FOOD AND SHELTER PROGRAM; THE DIRECTORY OF COMMUNITY SERVICES; AND VITAL SIGNS.

OOO DARWAYA GOMBENGATIO	N OF THE PINE WYON	ATTACHME	NT 5
990, PART VII- COMPENSATIO	N OF THE FIVE HIGHEST	PAID IND. CONTRACTORS	
NAME AND ADDRESS		DESCRIPTION OF SERVICES	COMPENSATION
LIPPERT BROS, INC PO BOX 17450 OKLAHOMA CITY, OK 7313	6	CONSTRUCTION	962,378.
	TOTAL COMPENSATION		962,378.

FORM 990, PART VI	<u> II - INVESTMENT IN</u>	ICOME	J	ATTACHMENT 6	
DESCRIPTION		(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST INCOME		20,441			20,441
TO	OTALS	20,441			20,441

Schedule O (Form 990) 2009 Page 2 Name of the organization Employer identification number UNITED WAY OF CENTRAL OKLAHOMA, INC. 73-0589829 ATTACHMENT 7 FORM 990, PART IX - PAYMENTS TO AFFILIATES (B) (A) (C) (D) TOTAL **PROGRAM** MANAGEMENT FUNDRAISING DESCRIPTION EXPENSES SERVICE EXP. AND GENERAL **EXPENSES** NATIONAL UNITED WAY DUES 152,121 9,866 142,255 TOTALS 152,121. 9,866 142,255 ATTACHMENT 8 FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE LENDER: LINE OF CREDIT ORIGINAL AMOUNT: 3,600,000. INTEREST RATE: 2.000000 DATE OF NOTE: VAR MATURITY DATE: 06/29/2010 REPAYMENT TERMS: INTEREST PAYABLE MONTHLY PRINCIPAL DUE AT MATURITY SECURITY PROVIDED: BUILDINGS/IMPROVEMENTS PURPOSE OF LOAN: OPERATIONS DESCRIPTION AND FMV CASH OF CONSIDERATION: BEGINNING BALANCE DUE 2,993,303. ENDING BALANCE DUE 3,599,975. TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 2**,**993,303.

3,599,975.

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue-Service Name of estate-or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

2009

	UNITED WAY OF CENTRAL OKLAHO	MA, INC.			73-05898	129	
Not	e: Form 5227 filers need to complete only F	Parts I and II			•		
Pa	t Short-Term Capital Gains and L	osses - Assets	Held One Ye	ar or Less			·-··-
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a	#***			· · · · · · · · · · · · · · · · · · ·			
							
b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b			1 b	
2							
2	Short-term capital gain or (loss) from For					2	
3 4	Net short-term gain or (loss) from partner short-term capital loss carryover. Enter the					3	
5	Carryover Worksheet Net short-term gain or (loss). Combine lii				<i></i>	4	(
	column (3) on the back	<u> </u>	<u> </u>	<u> </u>		5	
Pai	t II Long-Term Capital Gains and Loss	es - Assets Held	More Than On	e Year			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
				· · · · · · · · · · · · · · · · · · ·			
							
b	Enter the long-term gain or (loss), if any,	rom Schedule D-	1, line 6b			6ь	0.
7	Long-term capital gain or (loss) from Fore	ns 2439, 4684, 6	6252, 6781, and	d 8824		7	
8	Net long-term gain or (loss) from partners	hips, S corporati	ons, and other e	estates or trusts		8	
9	Capital gain distributions					9	140
							· · · · · · · · · · · · · · · · · · ·
10 11	Gain from Form 4797, Part I Long-term capital loss carryover Enter the		from line 14 of	the 2008 Capital Lo		10	
•	Carryover Worksheet					11	(
12	Net long-term gain or (loss). Combine line column (3) on the back	es 6a through 11	in column (f)	Enter here and on lu	ne 14a,	12	0.
For I	Paperwork Reduction Act Notice, see the Instr			<u> </u>			D (Form 1041) 2009

Schedule D (Form 1	041) 2009		

	dule D (Form 1041) 2009						Page 2
Pai	Summary of Parts I and II	4		neficiaries'	(2) Es		(3) Total
•	Caution: Read the instructions before completing this	'	(see	page 5)	or tru	JSUS	
13	Net short-term gain or (loss)	13					
14	Net long-term gain or (loss):	14a	i				0.
a h	Total for year Unrecaptured section 1250 gain (see line 18 of the wrksht)						
	28% rate gain						
15		15					0.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo		-T. Part I.	line 4a) If line	s 14a and	15. col	umn (2), are net gains, go
to Pa	nt V, and do not complete Part IV If line 15, column (3), is a net loss, complete F	Part IV a	and the Ca	apital Loss Car	ryover Worl	ksheet	, as necessary
Pa	t IV Capital Loss Limitation					,———	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T,			• •			
a	The loss on line 15, column (3) or b \$3,000			000 T (34	16	()
Carry	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag rover Worksheet on page 7 of the instructions to figure your capital loss carryove	je 1, lin er	e 22 (or i	-om 990-1, II	ne 34), is a	ioss, c	complete the Capital Loss
Pai	Tax Computation Using Maximum Capital Gains Rate	es					
Forn	n 1041 filers. Complete this part only if both lines 14a and 15 in coli	Jmn (2) are ga	ins, or an an	nount is er	ntered	In Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo	re thar	zero				
	tion: Skip this part and complete the worksheet on page 8 of the instru	ctions	ıf				
	ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.						
	n 990-T trusts. Complete this part only if both lines 14a and 15 ai	e dain	s or all	alified divide	ends are ii	nclude	ed in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa						
	er line 14b, col (2) or line 14c, col (2) is more than zero		,		,	Ū	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	17				
18	Enter the smaller of line 14a or 15 in column (2)	•				1	
	but not less than zero						
19	Enter the estate's or trust's qualified dividends			İ		İ	
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19			1			
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21						
22	Subtract line 21 from line 20 If zero or less, enter -0	• • •	22			-	
23	Subtract line 22 from line 17 If zero or less, enter -0	• • •	23				
24	Enter the smaller of the amount on line 17 or \$2,200						
24 25	Enter the smaller of the amount on line 17 or \$2,300		· · 24	·		ł	
23	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23.		25			1	
26	Subtract line 25 from line 24	• • • •	26			1	
27	Are the amounts on lines 22 and 26 the same?	• • • •	• •			1	
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ne 22	27				
						1	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28	<u> </u>]	
29	Subtract line 28 from line 27		. 29				
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rat					1	
	(see the Schedule G instructions in the instructions for Form 1041) .					31	
32	Add lines 30 and 31					32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rat	e Sch	 adula fo	r Estatos an	d Truete	12	 -
	(see the Schedule Ginstructions in the instructions for Form 1041).					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33					<u> </u>	
	G, line 1a (or Form 990-T, line 36)			•		34	

Name of estate or trust as shown on Form 1041 Do n .UNITED WAY OF CENTRAL OKLA		loyer identification numb	per if shown on the other side	Employer identif			
	d Losses - Assets Held More Than One Year						
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)		
6a MATURITIES OF INVESTMENTS	VARIOUS	VARIOUS	1,070,253.	1,070,253.			
				· · · · · · · · · · · · · · · · · · ·			
	<u> </u>						
							
	· · · · · · · · · · · · · · · · · · ·						
		-					
		-					
							
			<u></u>				
6b Total. Combine the amounts in column	n (f) Enter here ar	nd on Schedule D,	line 6b		0.		

United Way of Central Oklahoma 2009 Board of Directors

Mission Statement:

To improve the health, safety, education and economic well being of individual families in need in Central Oklahoma by connecting community resources with responsive and accountable health and human service agencies.

Vision:

To be the leading organization building a stronger, healthier, and more compassionate community.

2009 Officers of the Board

Chairman of the Board:

MARTIN, EDMUND

Chairman

Ackerman McQueen

1601 N. W. Expressway

#1100

Oklahoma City, OK

73118

843-7777

Fax: 848-1858

edmund-martin@am.com

Assistant: Stacy

Pifer

Stacy-pifer@am.com

3 year term expires

2012

Vice Chairman of the Board:

PAGE, ROY W.

President & CEO

Third Degree

Advertising &

Communications, Inc.

100 East Main #200

Oklahoma City, OK

73104

235-3020 X101

Fax: 235-3021

roy@thirddegreeadv.com

3 year term expires

2011

Secretary/Treasurer

HARLOW, DAVID

President

BancFirst PO Box 26788

Oklahoma City, OK

73126

270-1082

Fax: 270-1097

dharlow@bancfirst.com

Assistant: Kim Larson

 ${\tt klarson@bancfirst.com}$

3 year term expires

2012

Assistant

Secretary/Treasurer:

DAVIS, SCOTT G.

Asset Management

Advisors, LLC

6307 Waterford Blvd.

#200

Oklahoma City, OK

73118

842-1881

Fax: 842-1413

scott@amallc.org

3 year term expires

2012

2009 Committee Chairs

Administration Committee:

STUSSI, DOUG

Executive Vice

President

Love's Travel Stops &

Country Stores, Inc.

10601 N. Pennsylvania

PO Box 26210

Oklahoma City, OK

73126

302-6695

Fax: 463-3695

dougs@loves.com

Assistant: Linda

Tillinghast

lindat@loves.com

3 year term expires

2011

Audit Committee Chair:

WOOD, MARK

Partner

Ernst & Young LLP

210 Park Ave. Suite

2500

Oklahoma City, OK

73102

278-9103

Fax: 278-6834

mark.wood@ey.com

Assistant: Ann

Cawthon

ann.cawthon@ey.com

3 year term expires

2011

Campaign Chairman:

DELANEY, PETE

Executive Vice

President & COO

OGE Energy Corp

PO Box 321 M/C 1106

Oklahoma City, OK

73102

553-3397

Fax: 557-7914

delanepb@oge.com

Assistant: Susie

White

whitegs@oge.com

Assistant Phone: 553-

3566

3 year term expires

2012

Community Investment

Chairman:

WALLACE, JEAN

Community Volunteer

4200 Canaan Creek Road

Edmond, OK 73034

348-6561

jwallacemom@aol.com

3 year term expires

2012

Events Chairnan:

MCGUIRE, MATT

Vice President

Heritage Trust

2802 W. Country Club.

Drive

Oklahoma City, OK

73116

848-8899

mattmc@heritagetrust.c

om

2 year term expires

2012

Labor Chairman:

SNEED, PERRY

Statement 1

pastiless	
Manager/Financial	Personnel Chairman:
Secretary/Treasurer	BELT Ph. D, JOY REED
Sheet Metal Workers	President
Local 124/AFL-CIO	Joy Reed Belt &
1404 NW 1st	Associates/Joy Reed
Oklahoma City, OK	Belt Search
73106	Consultants
232-1453	PO Box 18446
Fax: 232-1455	Oklahoma City, OK
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United Way of Central Oklahoma Partner Agencies	Total Paid
A Chance to Change	45,450.00
American Heart Association	183,921.98
American Lung Association	74,190.54
American Red Cross-Heart of Oklahoma	55,076.50
American Red Cross-Canadian County	4,399 04
American Red Cross of Central OK	1,479,687.52
Areawide Aging Agency	34,790.00
Arthritis Foundation	115,230.69
Bethesda	25,250.02
Big Brothers Big Sisters	152,554.52
Boys Scouts of America-Last Frontier Council	452,523.00
Boys & Girls Club of OK County	126,249.98
Calm Waters Center for Children & Families, Inc	30,300.00
Camp Fire Boys & Girls-Heart of OK Council	241,425.04
Catholic Charities of the Arch Diocese	290,038.00
Celebrations! Educational Services, Inc.	121,200.00
Cental OK Integrated Network Systems (COINS)	23,640.00
Citizens Caring for Children	95,000.00
Coffee Creek Riding Center for the Handicapped	83,082.48
Community Literacy Centers	74,769.02
Consumer Credit Counseling	28,823.00
Daily Living Center	212,007.54
Dale Rogers Training Center Dentist for the Disabled	136,755.96
	77,938.00
Easter Seals of Oklahoma	17,552.02
Employment and Restoration Center (EARC) Girl Scouts Red Lands Council	71,481.00
Heartline	251,806.00
Homeless Alliance	157,169.04
Hospice of Oklahoma County	25,000.06 165,732.52
John W. Keys Speech & Hearing Center	23,141.48
Latino Community Development Agency	138,126.50
Legal Aid Services of OK	125,783.96
Lennie Marie Tolliver Alternative Care Center	10,211.52
Mental Health Association of OK County	123,234.52
Metropolitan Better Living Center	59,142.52
Moore Youth and Family Services	75,630.00
Neighborhood Services Organization	237,777.46
North Care Center	234,630.00
OK Foundation for the Disabled	138,500.00
Oklahoma Goodwill Industries	47,499.98
Oklahoma Halfway House	4,822.00
Oklahoma Medical Research	115,000.06
Oklahoma United Methodist Circle of Care	16,000.00
Oklahoma Safe Kids Coalition	20,496.02
Parents Assistance Center	159,000.00
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Positive Tomorrows	150,103.06
Possibilities, Inc	23,735.02
Retired Senior Volunteer Program of OK County	125,237.52
Salvation Army-Oklahoma County	890,099.50
Special Care	301,642.46
Sunbeam Family Services	737,562.00
The Education & Employment Ministry	10,000.02
Tinker AFB Youth Council	18,096.52
Upward Transitions	316,372.54
Urban League of Greater OKC	321,997.50
Variety Health Center	448,290.04
YMCA of Greater Oklahoma City	285,000.00
Youth Cornerstone	23,200.00
Youth and Family Services	36,199.04
Youth Services for Oklahoma County, Inc.	29,820.00
YWCA	576,530.38
A Better World Fund	201.77
A Special Wish Foundation, Inc.	286.96
AARP Foundation	399.35
Abandoned Little Angels Nhom Tinh Thuong	165.82
Academy for Educational Development	23.09
Academy Women	139.86
Accelerate Brain Cancer Cure, Inc.	22.17
Achilles Track Club	110.84
Ada Area Youth Shelter	798.02
Ada Boys & Girls Club	108.06
Admiral Jeremiah Denton Foundation	265.52
Adoption Exchange Association	93.24
Aging and Disabilities Charities of America	1,099.56
Aid to Africa Federation	5,405.53
AIDS Brown I & April 1	3,341.96
Alliana for Lynna Bassark, Inc.	335.95
Alliance for Lupus Research, Inc Allied Arts Foundation	48.49
Amer Assn For The Advancement of Science	2,314.23
Amer Indian Science and Engineering Society	186.48
Amer Radio Relay League	394.25 918.86
Amer Speech Language Hearing Fdn	81.10
Amer Sudden Infant Death Syn Inst	503.91
American Inst for Cancer Research	190.76
American Jewish Joint Distribution Committee	342.98
American Legion Child Welfare Foundation	650.86
American Legion Endowment Fund	350.49
Americans United for Sep Church & State	48.49
America's Charities	71,640.21
Ancop Foundation	107.23
Animal Charities of America	78,508.35
	70,300.33

Answers in Genesis Ministries	505.50
Archdiocese For The Military Services USA	2,336.33
Armed Forces Foundation	335.67
Association on American Indian Affairs, Inc.	1.84
BAPS Charities	19.58
Big Brothers Big Sisters International	249.37
Big Brothers Big Sisters of Oklahoma	729.93
Blacks In Government	216.13
Bless The Children Inc	327.14
B'nai B'rith International	18.65
Boat People SOS Inc	24.24
Booker T Washington Community Center, Inc.	444.15
Brain Aneurysm Foundation Inc	27.97
Bread and Water For Africa	651.35
Breast Cancer in Young Women	196.69
Breast Cancer Research & Assistance Fund	1,207.02
Burchette-Conners-Ellington-Hereford-Lynch College Education	691.45
C.A.R.E. Association Adult Day Care	1,595.76
Cal Ripkin, Sr. Foundation	111.89
Calm Waters Center For Children and Families Inc	1,184.33
Cancer Research Wellness Institute	44.46
Cancer Therapy and Research Center	350.97
CancerCure of America	82,982.42
Central OK Habitat For Humanity	17,139.29
ChildAid International	1,996.93
Children First- America's Charities Federation	20,232.98
Childrens Charities of America	53,163.94
Children's Hope International Foundation	532.13
Children's Medical Charities of America	43,770.10
Childshare and Hoslinger Home	8,275.39
Childspring International Inc.	33.25
Christian Aid Mission	240.14
Christian Charities USA	55,298.16
Christian Service Charities	140,216.19
Chromosome 18 Registry and Research Soc	208.86
Cimarron Council Boy Scouts of America	2,179.65
Cita Passas Missis	474.01
City Rescue Mission	11,891.94
Community Development Support Assn	323.27
Community Health Centers	1,377.42
Community Health Charities	184,194.86
Community Health Charities Ntl	169,929.08
Competitve Enterprise Institute Concern Worldwide U.S.	12.01
Conservation and Presevation Charities of America	556.81
Cooley's Anemia Foundation	23,243.94 24.24
Cosmopolitan Diabetes Fdn	
Cosmoponian Diaucies Full	1.84

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Couple To Couple League	684.96
Cross International	472.58
DARE America	69.93
DEA Survivors Benefit Fund, Inc.	707.37
Denny Price Family YMCA	1,552.94
Diabetes Research Assistance Fund	2,188.04
Disabled Childrens Relief Fund	762.08
Disabled Sports USA	622.43
Do Unto Others Amer Emergency Relief	15,926.18
Dolphin Scholarship Fnd	279.72
Ducks Unlimited Inc	3,555.61
EANGUS We Care for America Foundation	269.25
Earth Share	28,910.31
Educate America	7,668.01
Educational Media Foundation	5,473.60
Egyptians Relief Association	120.06
Ekal Vidyalaya Foundation of USA	48.49
Elks National Foundation	279.72
Elks Natl Veteran Service Comm	608.72
Embry-Riddle Areonautical Univer	341.92
English First Foundation	458.01
Equal Justice Works ESA Foundation	23.31
Every Orphan's Hope	482.57
Explosive Ordnance Disp Mem Comm	110.84
Family Promise of Shawnee	55.42
FASTHound Greyhound Adoption, Inc.	1,789.77
Fdn for Chiropractic Ed & Research	8,545.50 18.65
Fdn for Individual Rights In Education	24.01
Fdn for Prader-Willi Research	363.64
Federalist Society	152.49
Federation of American Scientists	55.42
First Book	1,450.61
First Command Educational Foundation	166.25
Fish America Foundation	378.95
Food For The Poor	1,868.82
Foods Resource Bank	401.69
Free the Slaves	153.32
Free To Live, Inc.	48,470.43
Freedom Alliance	27.71
Freedom from Religion Foundation	528.03
Friends of Vance Families	5,360.03
Friends of WFP, Inc.	204.38
Fundacion Manos Juntos	7,047.53
Garfield County Child Advocacy Council	954.93
Gateway to Prevention & Recovery	224.24
GAVI Fund	233.10

Genesis Project Inc	16,676.80
Gift of Adoption Fund, Inc.	24.24
Girl Scouts Magic Empire Council	90.69
Girl Scouts-Western Oklahoma, Inc.	1,080.81
Global Impact	56,064.63
GodsKids.Org	288.16
Good News Jail and Prison Ministry	66.61
Government Accountability Project	25.16
Guiding Eyes for the Blind	448.35
Gun Owners Fdn	1,839.14
Half The Sky Foundation	120.06
Halo Trust USA, Inc.	173.64
Harrah Senior Center	3,863.83
Health and Medical Research Charities of America	91,054.64
Health First - America's Charities	23,319.01
Heart Disease Research Institute	354.83
Hearts for Hearing Foundation	1,629.11
Help The Afghan Children	168.60
Helping Children Worldwide, Inc.	4.66
Heritage Foundation	386.07
Heritage Foundation	1,439.49
Hispanic College Fund Inc	115.44
Hispanic College Fund Inc	424.13
Hispanic United Fund	3,877.58
Histiocytosis Assn of Amer	156.55
Hope Center of Edmond	8,936.88
HOPE Community Service Inc	393,48
Hope in Oklahoma	1,677.32
Human and Civil Rights Org of Amer	7,188.95
Human Care Charities of America Federation	26,226.52
Human Development & Children Fdn	27.97
Human Life International	831.58
Human Service Charities of Amer	13,814.19
Hydrocephalus Assn	134.27
Indian Land Tenure Foundation	159.85
Infant Crisis Services	28,281.14
INTEGRIS Baptist Med Cntr of OK Foundation	1,469.17
INTEGRIS SW Med Cntr of OK Foundation	1,004.91
Interfaith Alliance Fund	55.94
International Children's Care, Inc	240.14
International Justice Mission	223.85
International Union for Conservation of Nature	54.80
Iraq & Afghanistan Veterans of America	149.19
Islamic Relief	1,877.63
Israel Fund Inc.	3,111.23
Jesus House, Inc	70,854.37
Jewish Charities of America	1,975.24

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Jewish Fdn For The Righteous, Inc	205.84
Jews for Jesus	912.28
Joni & Friends	93.24
'Knights of Columbus Charities	46.62
Landstuhl Hospital Care Project	167.83
Latchkey Child Services Inc	169.63
Latin America Fund Inc.	2,962.48
Leadership VA Alumni Assoc	48.03
Leading the Way	912.85
League of American Wheelmen	144.09
Lennie-Marie Tolliver Alternative Care Center	4,105.00
Lithuanian Catholic Religious Aid Inc	312.18
Lithuanian Catholic Religious Aid Inc	463.71
Living Improvement for Elderly Center	2,779.36
Local Independent Charities of America	159,138.09
Love Without Boundaries Foundation	381.27
Lutheran Braille Workers Inc	
	144.09
Lymphoma Foundation of America	166.25
Lymphoma Foundation of America	503.37
Lymphoma Foundation of America	782.24
Maison Fortune Orphanage Fdn	311.42
Make A Wish Foundation	34,478.30
Marine Corps League Foundation, Inc.	502.54
Maryknoll Fathers and Brothers	1,104.20
Medical Research Charities	36,751.45
Melanoma Research Foundation	354.32
Mental Health Org of America	366.61
Mental Health Org of America	2,212.19
Merry Heart Guidance Center	1,376.49
Mexican American Cultural Center	120.06
Mid-Del Youth and Family Center	9,060.04
Migrant Legal Action Program Inc	425.54
Military Child Education Coalition	120.06
Military Vets and Patriotic Public Org of Amer	94,587.49
Ministries of Jesus	3,932.56
Missions to Military, Inc.	48.03
Mother to Mother Ministry of Oklahoma County	1,950.50
Mustard Seed Ministries	250.29
National Assc for the Improvement of Minorities in the IRS	94.65
National Autism Association	565.99
National Crime Prevention Council	670.63
National Indian Council on Aging	48.03
National Outdoor Leadership School	111.89
National Public Radio, Inc.	5,986.16
National Railway Historical Society, Inc.	240.14
National Recycling Coalition	110.84
National Safe Place, Inc.	
rational date I face, file.	18.65

National Stuttering Association	202.59
National Volunteer Fire Council	217.03
Natl Alliance To End Homelessness, Inc.	335.71
Natl Amer Red Cross	58,017.39
Natl Assn of Anorexia Nervosa and Assoc. Disorders	230.90
Natl Assoc of Students Against Violence	373.00
Natl Ataxia Fdn Inc	1,458.02
Natl Black United Fedn of Charities Inc	7,959.19
Natl Breast Cancer Fdn	1,062.03
Natl Clearinghouse For The Def of Battered Women	24.94
Natl Coalition For The Homeless	139.86
Natl Fallen Firefighters Fdn	1,007.44
Natl Film Preservation Fdn	213.57
Natl Fish and Widlife Fdn	388.84
Natl League of Amer Prisoners	109.09
Natl League of Families of Amer Prisoners	291.23
Natl Scoliosis Fdn	363.64
Natl Wild Turkey Fedn Inc	3,145.86
Natl Wildlife Refuge Assn	516.60
Naval Aviation Museum Foundation	474.38
Naval Helicopter Assoc. Scholarship Fund	468.35
Navy League Foundation	689.56
Navy Supply Corp Fdn Inc	431.30
Neurofibromatosis, Inc.	421.39
No Greater Love	192.11
NRA Civil Rights Defense Fund	7,899.67
NRA Foundation, Inc.	6,791.38
NSC Discovery Center	55.94
Oceana, Inc.	336.19
OK Institute For Child Advocacy	964.18
Oklahoma Blood Institute	4,070.23
Oklahoma Brain Tumor Foundation	2,901.31
Oklahoma Children's Cancer Association	14,956.86
Oklahoma City Community Foundation	527.13
Oklahoma City Police Athletic League	164.03
Oklahoma City Public Schools Foundation	438.69
Oklahoma Jail and Prison Ministries	6,769.84
One Church, One Child of OK	1,974.58
Operation Warmheart	21,193.55
Orthodox Christian Mission Center, Inc.	687.35
Our Military Kids Inc.	433.28
Parkinson's Action Network Fnd	4.66
Paulist Natl Caholic Evangelization Assn	53.15
Payne County Youth Services	161.63
Peace and Reconciliation Charities	799.95
Pediatric Brain Tumor Fdn of The US	138.71
Pension Rights Center	92.36

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Pioneer Bible Translators	24.24
Planned Parenthood of Central OK	8,610.37
Polish Amer Assn	116.36
Postal Employees Relief Fund	1,361.15
Postal Workers Human Relations	6,736.29
Prader Willi Syndrome Assn	534.54
Prisoner Visitation & Support Committee	48.03
Project C.U.R.E	405.60
Project Hope International, Inc.	277.09
Project on Government Oversight	18.47
Project Safe, Inc.	640.73
Public Health Foundation	121.21
Push America	221.67
Radio Amateur Satellite Corp	24.24
Reaching Our City	1,798.76
Reason Foundation	84.85
Rebuilding Together, Inc.	928.36
Regional Food Bank of Oklahoma	126,806.60
RockySpot Rescue	7,576.72
Roger L. Von Amelunxen Fdn	404.59
Ronald McDonald House Charities OK	20,557.40
Salesian Missions Inc.	193.49
Science and Engineering Alliance	96.52
Scienderma Foundation, Inc.	1,282.95
Second Chance Animal Sanctuary Sew Much Comfort	43,862.40
Shawnee Family YMCA	162.74
SladeChild Foundation Charitable Trust	3,262.23
Smile Train	929.57
Smithsonian Institution	1,066.99 167.41
Sons of Confederate Veterans, Inc.	232.05
Sooner Golden Retriever Rescue	14,618.56
Spastic Paraplegia Foundation Inc.	340.14
Specialized Alternatives for Families	150.12
Sports Charities USA	6,431.92
Starting Point II	600.77
Stillwater Area Success By 6	48.03
Stillwater Domestic Violence Service	645.69
Stillwater Family YMCA	617.93
Stillwater Group Homes	1,003.94
Stillwater Interfaith Counseling	18.65
Stillwater Mobile Meals	596.53
Stuttering Foundation of America	144.09
Sudden Arrhythmia Death Syndrome Fnd	48.49
Suited for Success, Inc.	5,430.57
Sunshine Foundation	180.67
Support Our Agining Religious Inc	484.85

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· Support Our Troops	1,082.82
Tailhook Educational Foundation, Inc.	124.02
Taiwan Buddhist Tzu Chi Fdn, USA	279.72
Tau Beta Pi Association, Inc.	46.19
Thanks USA	72.73
Thayne A Hedges Reg Speech & Hearing Ctr	46.62
The Arts Federation	1,082.78
The Caitlin Raymond International Registry	0.92
The Care Center	1,653.20
The Childrens Center	31,865.47
The Christmas Connection	1,764.87
The Jimmy Fund	350.97
The Launching Pad Child Development Cntr	6,242.26
The Mountain Institute	121.21
The Negro Spiritual Scholarship Fdn	67.88
The Oklahoma Caring Foundation, Inc.	6,919.99
The Orangutan Conservancy	570.71
The Right Path Riding Academy	1,758.61
Therapetics Service Dogs of Oklahoma	898.82
Thomas Jefferson Foundation Inc.	240.14
Thurgood Marshall College Fund	1,226.77
Tinker Family Readiness Fund	16,748.41
Trans World Radio	242.43
Tread Lightly, Inc.	280.79
Trigeminal Neuralgia Association	360.20
Ukrainian Catholic Education Fdn	167.83
Ukrainian Women's League of America, Inc.	221.67
United Black Fund of America, Inc.	288.16
United Negro College Fund	17,444.81
United Service Orgs Inc	13,220.22
United Spinal Association	0.92
United States Baseball Federation	168.10
United States Lifesaving Association	9.23
United Way Intl	542.11
United Way of Ada	5,263.56
United Way of Amer Federation	4,650.22
United Way of Central Oklahoma	510,903.50
United Way of Enid & NW OK, Inc.	684.64
United Way of Norman	140,281.78
United Way of Pottawatomie County	5,798.51
United Way of Stillwater	443.24
US Chess Trust	253.53
US Navel Sea Cadet Corp	325.99
USA Basketball	0.92
USA Cycling	57.50
USA Hockey	331.32
Vellore Christian Medical College Board	172.50

	15,261,879.93
Designations by donors to miscellaneous organizations	637,844.00
Allied Arts Foundation	49,405.81
Regional Food Bank of Oklahoma	25,200.78
Community Health Charities	74,774.97
United Way of Central Oklahoma	238,691.45
United Way of Ponca City	258.49
Tulsa Area United Way	2,467.08
United Way of Stillwater	220.09
United Way of Stephens County	571.44
United Way of South Central Oklahoma	776.35
United Way of Pottawatomic County	4,645.08
United Way of Norman	35,726.20
United Way of Southeastern Oklahoma	305.91
United Way of Lawton Ft Sill	495.45
United Way of Enid & NW OK, Inc.	651.59
United Way of Bartlesville	156.17
United Way of Ada	176.07
Lake Area United Way	493.42
Allied Arts Foundation	14,488.10
Armed Forces Veterans Home Federation	4,235.43
Regional Food Bank of Oklahoma	44,615.07
Global Impact	21,734.24
Community Health Charities	63,604.22
United Way of Central Oklahoma	229,728.68
Zigen Fund	225.64
YWCA of Enid	896.69
Wounded Warriors, Inc.	922.70
Wounded Warrior Project	4,733.77
World Reach	378.56
Word of Life Fellowship, Inc.	24.01
Women Children and Family Service Charities	15,151.95
Williams Syndrome Association, Inc.	2,410.43
Wildlife Society, Inc	24.24
Wildlife Research Institute, Inc.	22.38
Wildlife Forever	444.17
Wildcare Foundation	15,071.84
Watoo Child Care Ministries	242.43
WaterAid America	48.49
Washington Cntr for Internships & Academic Seminars	72.04
Village Ministries International	325.45
Vietnam Veterans Memorial Fund Inc	698.76
Vietnam Children's Fund	3,078.07
Vietnam Asst For The Handicapped	1,247.63
Veterans Research & Education Foundation	11,963.85

	8868 (Rev				<u></u>			Page 2
		e filing for an Additional (N						
		complete Part II if you have				n a previously filed	Form	1 8868
		e filing for an Automatic 3-						
Pa	Figure 4	Additional (Not Auton		ision of Time.	Only file the o			
Тур	e or	Name of Exempt Organization		7.10	U.E.	Employer identif		number
prin			ENTRAL OKLAHOMA,		(m. 1876)	73-058983	29	
	y the		r suite no. If a P.O. box, see in	structions		For IRS use only		
	date for	1444 NW 28TH ST			Garage Ser	~,·/,		
	the See actions	OKLAHOMA CITY,	ate, and ZIP code. For a foreig OK 73106	n address, see instri	uctions			
Che	ck type	e of return to be filed (File	a separate application fo	r each return)	40 + 400 (2) 77 5	W	,, 50-24	AND SOUTH OF THE PARTY OF THE P
X	7	n 990	Form 990-PF			Form 1041-A		Form 6069
	Form	n 990-BL	Form 990-T (sec 401	(a) or 408(a) trust	, \Box	Form 4720		Form 8870
	Form	n 990-EZ	Form 990-T (trust oth			Form 5227	L	
STO	PI Do	not complete Part II if yo			3-month exten	síon on a previo	usly 1	iled Form 8868.
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Te	elephor	ne No ▶ 405 523-3	518	FAX No ▶				
• If	the org	ganization does not have a	n office or place of busine	ess in the United S	States, check this	box		▶ 🔲
• If	this is	for a Group Return, enter th	ie orga <u>niza</u> tion's four digi	t Group Exemption	n Number (GEN)	If	this is	
for t	the who	ole group, check this box	▶ If it is for par	t of the group, ch	eck this box	▶ and atta	ch a	
list v		names and EINs of all me						
4	•	est an additional 3-month		11/15/2010	· · · · · · · · · · · · · · · · · · ·			
5		alendar year <u>2009</u> , or ot			and end			
6		tax year is for less than 12		Initial return	Final retu		e ın a	ccounting period
7	State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER							
INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE TAX RETURN.						URN.		
								
82	If this	application is for Form 9	QO_RI QQO_PE QQO T A	720 or 6069 or	tor the tentative	tay lose any	ГТ	
0 a		fundable credits. See instru		720, 01 0009, e1	iter the tentative	tax, icss arry	8a \$	0.
ь		application is for Form 99		169 enter any ref	undable credits	and estimated	₩ .	, , , , , , , ,
U		ayments made Include a						
		ously with Form 8868.	ny phot jear overpaying	one anonca as a	cicult and any	amount paid	8b \$	0.
c		ce Due. Subtract line 8b fi	rom line 8a. Include vour	payment with th	is form or if red	ured denosit	00,	, <u> </u>
•		TD coupon or, if required,					8c \$	0.
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Unde	r penaltie	es of perjury, I declare that I have	•			s, and to the best o	f my k	nowledge and belief,
it is to	ue, corre	ct, and complete, and that I am aut	honzed to prepare this form					
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	ture 🕨	111.12	<i>y</i>	Title ►	CPA	Date	· 8	11/13
Signa		RANT THORNTON LLP					Form 8	868 (Rev 4-2009)
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Form 8868

(Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Part I 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 complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated From 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Name of Exempt Organization Employer identification number Type or 73-0589829 UNITED WAY OF CENTRAL OKLAHOMA, INC. print Number, street, and room or suite no. If a P.O. box, see instructions File by the due date for 1444 NW 28TH STREET filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions OKLAHOMA CITY, OK 73106 Check type of return to be filed (file a separate application for each return) Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5227 Form 990-T (trust other than above) Form 990-EZ Form 6069 Form 990-PF Form 1041-A Form 8870 The books are in the care of ► AMY MONTOYA Telephone No ▶ 405 523-3518 FAX No ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the organization's return for MAY 1 4 2010 calendar year 2009 or tax year beginning Initial return Final return Change in accounting period If this tax year is for less than 12 months, check reason. 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 0. 3a \$ If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 0. 3b \$ Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 0. 3 c Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev 4-2009)