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70510 11/11/2010 12 13 PM Department of the Treasury

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)

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

OMB No 1545-0047 2009 Open to Public

Internal Revenue Service Inspection For the 2009 calendar year, or tax year beginning and ending Please Greater Ardmore Scholarship Check if applicable C Name of organization D Employer identification number use IRS Foundation Address change label or 73-1373231 Doing Business As print or Name change type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 301 W. Main Street 210 580-223-1560 Specific Termination 167,649 City or town, state or country, and ZIP + 4 G Gross receipts\$ Instruc-Ardmore 73401 Amended return F Name and address of principal officer H(a) Is this a group return for Application pending Jessica Pfau affiliates? No H(b) Are all affiliates included? 301 W. Main Street Suite 210 Ardmore OK 73401 If "No," attach a list (see instructions) X 501(c) (3) ◀ (insert no.) 4947(a)(1) or website: ▶ greaterardmorescholarship.org **H(c)** Group exemption number ▶ Type of organization X Corporation Year of formation 1990 M State of legal domicile Part 1 Summary Briefly describe the organization's mission or most significant activities: See Schedule O Activities & Governance Check this box \(\big| \overline{X}\) if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 2 5 Total number of employees (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** 205,245 125,906 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 26,408 52,448 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 12,325 11,450 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 163,764 270,018 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 145,000 ,503,341 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 34,331 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 39,947 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) RECEIVED 27,939 20,151 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Ø 18 Total expenses Add lines 13-17 (must equal Part IX, columbility) 205,098 1,565,611 Nº ₹5)2 2 2010 0 64,920 -1,401,847 19 Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 1,869,549 532,647 20 Total assets (Part X, line 16) OGDEN. UT 2,793 1,763 21 Total liabilities (Part X, line 26) 866,756 530,884 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of penury, I declare that I have exampled this return, including accompanying schedules and statements, and to the best of my knowledge of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of office Chairman of the Board-GASF essica Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) **Paid** signature 11/11/10 P00296028 employed > Preparer's McGuire Company 73-1533950 EIN Firm's name (or yours Use Only 333 West Main, Suite 390 if self-employed) Phone address, and ZIP + 4 Ardmore, OK *79*401-6330 **▶** 580-223-8438 May the IRS discuss this return with the preparer shown above? (see instructions) Yes

DAA

	<u>Greater Ardmor</u>		73-1373231	Page 2
		Service Accomplishments		
See Sche	ibe the organization's mission ${f adule}$	n.		
			•	
Did the organ	nızatıon undertake any signi	ficant program services during the year	which were not listed on	
	m 990 or 990-EZ?			Yes X No
	cribe these new services on			
3 Did the organ services?	nization cease conducting, c	r make significant changes in how it co	onducts, any program	Yes X No
	cribe these changes on Sch	edule O		
			largest program services by expenses	
		tions and section 4947(a)(1) trusts are and revenue, if any, for each program	required to report the amount of grants and service reported	
		1,565,611 including grants of area students to fu		;)
4b (Code:) (Expenses \$	including grants o	f\$) (Revenue \$	3
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 33		•
4c (Code ⁻) (Expenses \$	including grants o	f\$) (Revenue s	•
4d Other progra	am services (Describe in Sc	hedule O)		
(Expenses	•	including grants of \$) (Revenue \$	
	am service expenses >	1,565,611		

Part IV Checklist of Required Schedules

			I	Vaa	Na
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	Γ		Yes	No
	complete Schedule A		1	X	
2	is 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	r			
	candidates for public office? If "Yes," complete Schedule C, Part I		3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	<u> </u>			
	Schedule C, Part II		4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	Ī			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	Ī			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	1			
	complete Schedule D, Part I	L	6		X
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	L	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	L	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part		j		
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		j		
	complete Schedule D, Part IV	L	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or				
	quas⊢endowments? If "Yes," complete Schedule D, Part V	ļ	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	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete				
	Schedule D, Part VI				
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII				
•	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	ţ			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII				
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets				
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.				
	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				
12	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	ŀ			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	-	40		X
128		r	12		 ^- -
127	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A	No X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		12		x
14a		ŀ	13 14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	-	144		 ^
_	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	ŀ	.,,,,		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	 	<u> </u>		 -
_	to individuals located outside the United States? If "Yes," complete Schedule F, Part III		16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	ŀ			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	t	_: <i>*</i> _	-	<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		18	X	1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	t			
	If "Yes," complete Schedule G, Part III		19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		20		X

FH	Statements Regarding Other IRS Fillings and Tax Compliance					
4.	Enterther I are to D to 450 At 10 are and Transmitted				Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	•-	0			
	U.S. Information Returns. Enter -0- if not applicable	1a 1b	0	-		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and rep			-		
·	gaming (gambling) winnings to prize winners?	ortable	•	10	x	•
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	2			
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by				
	this return?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		у			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina account)?	ariciai		4a		х
	If "Yes," enter the name of the foreign country			40		-
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign B	Bank				
	and Financial Accounts	_ •				•
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	arding		1		ļ
	Prohibited Tax Shelter Transaction?			5c	 	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e				l <u></u>
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or			1	
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	aboor				į
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g and services provided to the payor?	yoous		7a	İ	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as				
-	required to file Form 8282?			7c		
d	if "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	ıt			
	benefit contract?			7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f	ļ	ļ
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			79	 	├
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	j as				
0	required? Soproving organizations maintaining dones advised funds and section 509(a)(2) supporting			7h	 	
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					1
	organization, have excess business holdings at any time during the year?			8		1
9	Sponsoring organizations maintaining donor advised funds.				1	†
а	Did the organization make any taxable distributions under section 4966?			9a		<u> </u>
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	·	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	18 to 2 to 18 to 1	4		1
11	Section 501(c)(12) organizations. Enter:	, ,				
a	Gross income from members or shareholders	11a		_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
40-	amounts due or received from them)	11b		٦.,		1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		· 	12a	1	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			<u> </u>	<u>t </u>

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 Enter the number of voting members of the governing body 1a 1b h Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 X Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? 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 X 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Does the organization have local chapters, branches, or affiliates? 10a X b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X form? 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give X 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 X 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 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 with a taxable entity during the year? X 16a If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > 17 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. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Roslyn Haile 301 W Main Street

Ardmore

580-223-1560

OK 73401

DAA

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."
- 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

Check this box if the organization (A) Name and Title	(B) Average			(0	C)	that ap		(D) Reportable	(E) Reportable	(F) Estimated
name and me	hours per week	Individual trustee		Officer		Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Jessica Pfau										
Chairman	3.00	X	<u> </u>	X		\sqcup		0	0	0
Trish Long] }				_
Vice Chairma	3.00	X		X				0	0	0
Lana Martin										
Secretary	2.00	X		X				0	0	0
Ryan Youderian						H				
Treasurer	2.00	X		X				0	0	0
Laura Clay		İ		ŀ						
Trustee	1.00	X				J		0	0	0
Tommy C Craighead										
Trustee	1.00	X	L.,					0	0	0
Martha G Haas										
Trustee	1.00	X			<u> </u>			0	0	0
Cathy Melton		l	İ							
Trustee	1.00	X	L		<u>L</u>			0	0	0
Jeffrey S Moen						:				
Trustee	1.00	X	_	-	-	\vdash		0	0	0
			_	 						
			-			\vdash		<u></u>		
		\vdash	_			\vdash				
		╁—	<u> </u>		-	-				

	L WIT Section A. Officers	, Directors, irus	1000	, <i>n</i>	y L	npic	yees	, aı	id riighest Compensated	Employees (continued)	·					
•	(A) Name and Title	(B) Average	Posi	tion (C) k ali i	that a	pply)	(D) Reportable	(E) Reportable	E	(F) Estimated				
		hours per week	Individual trustee or director	_	Officer	Key employee	Highest compensated employee			compensation from related organizations (W-2/1099-MISC)	con f org an	moun other npens from ti ganiza nd rela ganiza	r sation he ation ated			
				•												
											<u> </u>					
				_			ļ				<u> </u>					
				_	_		_				<u> </u>					
											 		.			
											<u> </u>			·		
			<u> </u>		_		-	-								
1b	Total	<u> </u>	<u> </u>	<u> </u>	İ	<u> </u>	1									
2	Total number of individuals (in reportable compensation from	_			thos	se lis	ted a	abov	ve) who received more than	\$100,000 in	<u>. L., </u>		-			
		. a.o organization	<u>. </u>									$\overline{}$	Yes	No		
3	Did the organization list any feemployee on line 1a? If "Yes,	" complete Sche	dule	J for	suc	h inc	divid	ıal				3	,,,,	x		
4	For any individual listed on lin the organization and related of individual	ie 1a, is the sum organizations gre	of re	port than	able \$15	con 0,00	npen:	satio "Ye	on and other compensation es," complete Schedule J fo	from or such		4		x		
5	Did any person listed on line services rendered to the orga	1a receive or acc	rue (com _l	oens te S	atio	n from	n ar J for	ny unrelated organization for such person	or		5		x		
<u>Sec</u>	tion B. Independent Contract	ors														
1	Complete this table for your fi compensation from the organ	ızation.	ensa	ted	inde	pend	dent (cont								
	Name and	(A) d business address		·-····				-	Descri	(B) obton of services		Co	(C) mpensa	ation		
								-								
								-								
								+								
										<u></u>	+		<u>, </u>			
2	Total number of independent						ed to	tho	ose listed above) who recei	ved			-			
DAA	more than \$100,000 in compe	erisation from the	org	anıza	ation	P					L	Form	. 990) (2009		

art V		enue		<u>Juli Sii</u>				Fage \$
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
≌ 1a	Federated campaigns	1a						
_	Membership dues	1b			1			
E c	Fundraising events	1c			· •			
g d	Related organizations	1d						
Ē e	Government grants (contributions)	1e						
S f	All other contributions, gifts, grants,							
ŧ.	and similar amounts not included above	1f	1	25,906				
	Noncash contributions included in lines 1a							
	Total. Add lines 1a-1f	•	•	▶	125,906			
2a b c d e e f			E	Busn. Code				
2a								
Ь								
월 c								
d								
e			Ţ					
Š t	All other program service reve	enue						
Ē g	Total. Add lines 2a-2f		_					
3	Investment income (including	dividen	ds, interes	t, and				
	other similar amounts)			•	26,408			26,408
4	Income from investment of ta	x-exem	pt bond pro	ceeds ►				
5	Royalties			▶ [
	(i) Real		(ıı) Pe	rsonal				
6a	Gross Rents				1			1
Ь	Less rental exps							
c					1			
d		•		•	1			
7a	Gross amount from (i) Securities	s	(II) C	ther				
	sales of assets other than inventory							
Ь	Less cost or other					1		
	basis & sales exps							
C	Gain or (loss)							
d	Net gain or (loss)			•		[
_ນ 8a	Gross income from fundraising evi	ents		ľ				
	(not including \$							
20	of contributions reported on line 10	c)				1		
E	See Part IV, line 18	а		15,335				
orier nevenio	Less direct expenses	ь		3,885				
ء '	Net income or (loss) from fun	draising	events	>	11,450	11,450		
9a	Gross income from gaming activiti	es						
	See Part IV, line 19	а						
b	Less direct expenses	ь						
c	Net income or (loss) from gar	ning ac	tivities	•				
10a	Gross sales of inventory, less	;						
	returns and allowances	а						
b	Less cost of goods sold	b						Ī
_ <u>c</u>	Net income or (loss) from sale	es of in	ventory	•		ĺ		
	Miscellaneous Revenu			Busn. Code				
11a					I			
Ь			ſ					
c								
d	All other revenue							
e	Total. Add lines 11a-11d	•		•			·······	
12	Total Revenue. See instruction	ons		▶ ↑	163,764	11,450		0 26,408

Part IX Statement of Functional Expenses

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

	All other organizations must o	complete column (A) but a	re not required to comple	te columns (B), (C), and	i (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
'		1 411 241	1 411 241		
•	organizations in the U.S. See Part IV, line 21	1,411,341	1,411,341		
2	Grants and other assistance to individuals in	02 000	02 000		1
_	the U.S. See Part IV, line 22	92,000	92,000		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	30,000	30,000		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,331	4,331		
11	Fees for services (non-employees)	*			
а	Management				
b	Legal				
С	Accounting	900	900		
d	Lobbying		300	· ·	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	11,021	11,021		
g	Other	11/021	11,021		· · · · · · · · · · · · · · · · · · ·
12	Advertising and promotion	412	412		
13	Office expenses	543	543		*
14	Information technology	839	839	 	<u> </u>
15	Royalties	639	039		
16	, , , , , , , , , , , , , , , , , , ,	2,600	2,600		
17	Occupancy Travel	2,000	2,000		
18	h		-		
10	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	7 204	7 204		
19	Conferences, conventions, and meetings	7,284	7,284		
20	Interest				
21	Payments to affiliates	200			
22	Depreciation, depletion, and amortization	290	290	 	
23	Insurance				
	Others				I .
24	Other expenses. Itemize expenses not	1	-		‡
	covered above (Expenses grouped together	1			!
	and labeled miscellaneous may not exceed		[!
	5% of total expenses shown on line 25 below)				
а	Supplies	1,512	1,512		
b	Phone	1,456	1,456		
С	Meals	899	899		
d	Dues & Subscriptions	143	143		
е	Misc	40	40		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,565,611	1,565,611		
26	i lonowing				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and		İ		
	fundraising solicitation				
DAA					5 000 (0000)

P	art X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		121,090	1	99,769
	2	Savings and temporary cash investments		263,337	2	252,101
	3	Pledges and grants receivable, net	Ī		3	
	4	Accounts receivable, net	·		4	
	5	Receivables from current and former officers, director	s, trustees, key			
		employees, and highest compensated employees. Co	· · · · · · · · · · · · · · · · · · ·	,		É
		Schedule L	' '	•	5	
	6	Receivables from other disqualified persons (as defin	ed under section			
		4958(f)(1)) and persons described in section 4958(c)(E .			
		Part II of Schedule L	(2)(2)		6	·
Assets	7	Notes and loans receivable, net	Ţ		7	
SS	8	Inventones for sale or use	Ţ		8	
Ä	9	Prepaid expenses and deferred charges	ļ i		9	· · · · · · · · · · · · · · · · · · ·
	1	Land, buildings, and equipment cost or	ן ו			
		other basis Complete Part VI of Schedule D	10a 2,031			
	b	Less: accumulated depreciation	10a 2,031 10b 677	1,644	10c	1,354
	11	Investments—publicly traded securities	1001	1,483,478	11	179,423
	12	Investments—other securities See Part IV, line 11		1/103/110	12	117,423
	13	Investments—program-related See Part IV, line 11	<u></u>	·	13	
	14		-			· · · · · · · · · · · · · · · · · · ·
	1	Intangible assets		14		
	15	Other assets. See Part IV, line 11	1 060 E40	15	E22 647	
	16	Total assets. Add lines 1 through 15 (must equal line	1,869,549	16	532,647 1,763	
	17	Accounts payable and accrued expenses	-	2,793	17	1,763
	18	Grants payable	į.		18	
	19	Deferred revenue	ŀ		19	
(0	20	Tax-exempt bond liabilities			20	
Liabilities	21	Escrow or custodial account liability. Complete Part IV	F		21	
≣	22	Payables to current and former officers, directors, true				
iab		employees, highest compensated employees, and dis	squalified			É
		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated the	· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated third	d parties		24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		2,793	26	1,763
ě		Organizations that follow SFAS 117, check here ▶	r			
Ĕ		complete lines 27 through 29, and lines 33 and 34.				
ä	27	Unrestricted net assets		· · · · · · · · · · · · · · · · · · ·	27	
0	28	Temporarily restricted net assets	<u> </u>		28	
5	29	Permanently restricted net assets			29	
丑	l	Organizations that do not follow SFAS 117, check	here ▶ X			
ō		and complete lines 30 through 34.				
Ş	30	Capital stock or trust principal, or current funds		1,866,756	30	530,884
ŝ	31	Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
As	32	Retained earnings, endowment, accumulated income	e, or other funds		32	
Net Assets or Fund Balances	33	Total net assets or fund balances		1,866,756		530,884
Z	34	Total liabilities and net assets/fund balances		1,869,549		530,884 532,647

Form **990** (2009)

Forn	1990 (2009) Greater Ardmore Scholarship 73-1373231		Pad	ge 12
Pa	ert XI Financial Statements and Reporting			3
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			F
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	_		Ė
	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
Ç	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?	2c		l
	If the organization changed either its oversight process or selection process during the tax year, explain in			F
	Schedule O.			Ė
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ĺ
	issued on a consolidated basis, separate basis, or both			ļ
	Separate basis Consolidated basis Both consolidated and separate basis			İ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	[[1
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		<u> </u>

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

Greater Ardmore Scholarship Foundation

 $\begin{array}{l} \text{Employer identification number} \\ 73 - 1373231 \end{array}$

P	art I	Rease	on for Public Charity	Status (All organizations	s must c	complete	e this ¡	oart.) S	See in	structi	ons.		
The	orga	nization is not	a private foundation becaus	e it is (For lines 1 through 11, o	check only	one box.)						
1		A church, cor	vention of churches, or ass	ociation of churches described	ın sectior	170(b)(1)(A)(i).						
2			cribed in section 170(b)(1)(
3	\Box			ce organization described in se	ction 170	(b)(1)(A)(i	ii).						
4	П			in conjunction with a hospital				/1\/ / \/ii	ii) Ente	r the ho	sortal's name		
		city, and state		conjunction min a neephan				(.) (.) (.,		opilai o namo	,	
5	$\lceil \rceil$	-		of a college or university owned	or operate	ed by a de	wernme	ntal und	descri	hed in			
•	ئـــا		b)(1)(A)(iv). (Complete Part	•	or operati	ed by a go	, verriirie	mai um	desciii	Jea III			
6	\Box	-		'') overnmental unit described in s	action 17	n/h\/1\/A\							
7	X		-	substantial part of its support from			• •	rom tho	aanara	مناطييما			
•	ليث				oni a gove	mmemai	unik or i	ioni ine	genera	i public			
8			section 170(b)(1)(A)(vi). (Co	70(b)(1)(A)(vi). (Complete Part	11.3								
9	H					oontebut.		mbarab	ın foon	and are			
3	ш) more than 33 1/3 % of its sup							155		
				npt functions—subject to certain									
			=	nd unrelated business taxable in	-) irom u	usiness	ses			
10			=	0, 1975 See section 509(a)(2)	-								
10		•	• ,	exclusively to test for public safe	•			to 0000		_			
11				exclusively for the benefit of, to									
				ed organizations described in s					-	SECTION			
				he type of supporting organizati		-	r			h			
_		a Type		c Type III–Function			d		e III–Ot				
е	Ш	-	, ,	anization is not controlled direct	-								
			-	and other than one or more pul	oliciy supp	orted org	anizatio	ns desc	ribea iii	Section			
			section 509(a)(2)			T							
f		•		rmination from the IRS that it is	salypei,	i ype ii, d	or type	iii suppo	orting				
		-	check this box										لـــا
g		_	_	tion accepted any gift or contrib	ution from	any of tr	ie						
		following per				_						<u></u>	T
			•	ontrols, either alone or together	with perso	ons descr	ibed in (11)			[Yes	No
			• •	f the supported organization?							11g(i)	├	
			member of a person describ	**							11g(ii)	<u> </u>	<u> </u>
			•	described in (i) or (ii) above?							[11 g (m)	<u>L</u>	L
<u>h</u>			ollowing information about t	he supported organization(s)	1	-			ı				
(i)		e of supported	(iı) EIN	(iii) Type of organization		organization	, , ,	ou notify iization in	(vi) i	s the	(VII) Am		
	Uiç	janization		(described on lines 1-9 above or IRC section		sted in your of document?		of your		zed in the	supt	ЮIL	
				(see instructions))	-	1		ort?	 	S?			
			~~~~		Yes	No	Yes	No	Yes	No			
					1								
		<del></del>		·	<del> </del>	ļ			<u> </u>		<del> </del>		
									İ				
					<del> </del>				-				
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					+	<b></b>				<del>  </del>	·		
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ı viá				+	¥ .	2		t	t	. 1			

Sche	edule A (Form 990 or 990-EZ) 2009 Gre	ater Ardm	ore Schol	arship	73	-1373231	Page 2			
	ert II Support Schedule for O	rganizations D	escribed in Se	ections 170(b)	(1)(A)(iv) and	170(b)(1)(A)(vi)				
	(Complete only if you che	ecked the box	on line 5, 7, or	8 of Part I.)		- ( - / ( / ( / ( - /				
Sec	tion A. Public Support									
	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	529,623	167,984	226,870	207,245	125,906	1,257,628			
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	529,623	167,984	226,870	207,245	125,906	1,257,628			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,101,364			
6	Public support. Subtract line 5 from line 4						156,264			
	tion B. Total Support									
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
7	Amounts from line 4	529,623	167,984	226,870	207,245	125,906	1,257,628			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	50,961	68,541	61,931	52,448	26,408	260,289			
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10	L					1,517,917			
12	Gross receipts from related activities, etc.	•				12	15,335			
13	First five years. If the Form 990 is for the	_	, second, third, fou	irth, or fifth tax yea	ir as a section 501	(c)(3)				
	organization, check this box and stop her		<u> </u>				<u> </u>			
_	tion C. Computation of Public Su									
14	Public support percentage for 2009 (line 6	i, column (f) divided	by line 11, colum	n (f))		14	10.29%			
15	Public support percentage from 2008 Sch	edule A, Part II, lini	e 14			15	37.73%			
16a	33 1/3 % support test—2009. If the organ			13, and line 14 is 3	33 1/3 % or more,	check this box				
	and stop here. The organization qualifies	as a publicly suppo	orted organization				<b>▶</b> [_]			
b	33 1/3 % support test—2008. If the organ	nization did not che	ck a box on line 13	or 16a, and line 1	5 is 33 1/3 % or m	ore, check this				
	box and stop here. The organization qual	rfies as a publicly s	upported organiza	tion			<b>▶</b> X			
17a	10%-facts-and-circumstances test—200	9. If the organization	on did not check a	box on line 13, 16	a, or 16b, and line	14 is 10% or				
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the									
	organization meets the "facts-and-circums	stances" test. The o	rganization qualifi	es as a publicly su	pported organizati	on	▶ []			
b	10%-facts-and-circumstances test—200						_			
	more, and if the organization meets the "fa									
	organization meets the "facts-and-circums						▶ □			
18	Private foundation. If the organization did						▶ 🗌			

Schedule A (Form 990 or 990-EZ) 2009

33 1/3 % support tests-2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line

17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

19a

Page 4

Schedule A (Form 990 or 990-EZ) 2009 Greater Ardmore Scholarship 73-1373231

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No 1545-0047

2009

**Employer identification number** 

Greater Ardmore Scholarship Foundation 73-1373231 Organization type (check one): Filers of: Section: X 501(c)( Form 990 or 990-EZ 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and ш For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► 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.

2009
Open to Public Inspection

	of the organization		Employe	r identification number
	reater Ardmore Scholarship			
Fo	oundation			373231
Pa	organizations Maintaining Donor Advised Further organization answered "Yes" to Form 990,	nds or Other Similar Funds or A Part IV, line 6.	Account	s. 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 (dunng year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised		
	funds are the organization's property, subject to the organization's excl	lusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be		
	used only for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other		<u></u>
	purpose conferring impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the organization		m 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check			
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically im		nd area
	Protection of natural habitat	Preservation of certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a conse	ervation	
	easement on the last day of the tax year.		F	Hada de tha Fada de tha Tan Van
				Held at the End of the Tax Year
a	Total number of conservation easements		2a	
þ	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic structure inc		2c	
d	Number of conservation easements included in (c) acquired after 8/17		2d	
3	Number of conservation easements modified, transferred, released, ex	dinguished, or terminated by the organiza	ition during	9
_	the taxable year			
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mon	itoring, inspection, handling of		□ v □ v-
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	cing conservation easements during the y	ear	
-	Amount of amounts incomed a manifestical variables and aufacture			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing > \$	conservation easements during the year		
		the requirements of section		
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements or section		Yes No
9	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easerr	cente in its revenue and evenues stateme	nt and	
3	balance sheet, and include, if applicable, the text of the footnote to the			
	the organization's accounting for conservation easements	organization o interioral otalemento trial o		
Pé	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other	Similar	Assets.
	Complete if the organization answered "Yes" to			
1a	If the organization elected, as permitted under SFAS 116, not to report	t in its revenue statement and balance sh	eet works	of
	art, historical treasures, or other similar assets held for public exhibitio			
	provide, in Part XIV, the text of the footnote to its financial statements	that describes these items.		
b	If the organization elected, as permitted under SFAS 116, to report in	its revenue statement and balance sheet	works of a	ırt,
	historical treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	blic servic	e,
	provide the following amounts relating to these items:			
	(i) Revenues included in Form 990, Part VIII, line 1		•	· \$
	(ii) Assets included in Form 990, Part X		<b>•</b>	· \$
2	If the organization received or held works of art, historical treasures, or	r other sımilar assets for financıal gain, pr	ovide the	<b></b>
	following amounts required to be reported under SFAS 116 relating to	these items.		
а	Revenues included in Form 990, Part VIII, line 1		•	· <b>\$</b>
b	Assets included in Form 990, Part X		•	\$
		<del></del>		

		dmore Schola			3-13				<u>je 2</u>
Pa	rt III ` Organizations Maintaining C						ts (continu	ed)	
3	Using the organization's acquisition, accession, collection items (check all that apply):	and other records, che	ck any of the follow	ng that are	a significai	nt use of its			
а	Public exhibition	d Loan	or exchange prograr	ns					
b	Scholarly research	e Other							
c	Preservation for future generations	- L							
4	Provide a description of the organization's colle Part XIV	ctions and explain how	they further the orga	ınızatıon's ∈	exempt pur	pose in			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to b	e maintained as part of	the organization's c	ollection?_			Yes		No
Pa	ert IV Escrow and Custodial Arran	gements. Comple	te if the organiz	ation ans	swered "	Yes" to Forn	n 990, Par	t	
	IV, line 9, or reported an amo	ount on Form 990,	Part X, line 21.						
1a	Is the organization an agent, trustee, custodian	or other intermediary fo	or contributions or ot	her assets	not		_		
	included on Form 990, Part X?						Yes	• 📋	No
b	If "Yes," explain the arrangement in Part XIV ar	d complete the followin	g table						
							Amount		
С	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
•	Ending balance					1f			
22	Did the organization include an amount on Form	m QQ0 Part X line 212				<u> </u>	Yes		No
	If "Yes," explain the arrangement in Part XIV	11 330, 1 att A, iiile 21						•	.,,
	art V Endowment Funds. Comple	te if organization a	enswered "Yes"	to Form	990 Pa	rt IV line 10.			
F	Endownient Funds. Comple	(a) Current year	(b) Prior year	(c) Two ye		(d) Three years b		vears t	ack
			(b) Thoryear	(6) 1110 )	ouro buon	(0)	1 (0)	,	
1a	Beginning of year balance	1,483,478		<b></b>		·····			
þ	Contributions			<del> </del>					
¢	Net investment earnings, gains,						l		
	and losses	107,286							
d	Grants or scholarships	1,411,341		ļ					
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
a	End of year balance	179,423							
2	Provide the estimated percentage of the year	end balance held as:							
a	Board designated or quasi-endowment	%							
h	Permanent endowment ▶ 100.00 %								
39	Are there endowment funds not in the possess	uon of the organization	that are held and ad	ministered :	for the				
Jd	•	non or the organization	and are note and ad				ſ	Yes	No
	organization by.						3a(i)		X
	(i) unrelated organizations						3a(ii)		X
	(ii) related organizations		hadula OO				3b		
_	If "Yes" to 3a(ii), are the related organizations						[30]		
4	Describe in Part XIV the intended uses of the			OO Dod	V line 4	<u> </u>			
	art Vi Investments—Land, Buildin					1	(d) D - 1		
	Description of investment	(a) Cost or other basis	1 ''		٠,	cumulated	(d) Book	value	
		(investment)	basis (other	e1)	aepr	eciation			
1a	Land								
b	Buildings								
c	: Leasehold improvements								
d	Equipment								
ε	Other			2,031		677		1,	354
	al. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X, c				<b>&gt;</b>		1,	354

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

► Attach to Form 990.

OMB No 1545-0047 2009 Open to Public Inspection

e X 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 Part IV and Schedule I-1 (Form 990) if additional space is needed (h) Purpose of grant or assistance _ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 73-1373231 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisal, assistance other) 1,411,341 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (c) iRC section if applicable m 73-1396320 Greater Ardmore Scholarship General Information on Grants and Assistance (p) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? Communities Foundation of Oklahoma OK 73120 (a) Name and address of organization Foundation or government 2932 NW 122nd, Suite D Oklahoma City Name of the organization Part I

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA 3 Enter total number of other organizations

Schedule I (Form 990) 2009

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Schedule I (F	Schedule I (Form 990) 2009 Greater Ardmore Scholarship	ore Scholars	7. 7.	73-1373231		Page 2 -
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the (Form 990) if additio	e United States. Com	nplete if the organiza	tion answered "Yes" to For	m 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients		(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
See at	See attached List		92,000			
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	provide the informatic	on required in Part I,	line 2, and any other additi	onal information.

FIRST	MIDDLE	LAST	ADDRESS	CITY	STATE	ZIP	PAID	NONE
Ethan	ن	Adams	1443 - 8th St	Wilson	ŏ	73463	1000	NONE
Emily	Janice	Alexander	151 Idlewood Circle	Wilson	š	73463	1000	NONE
Brandon	Dale	Allen	4615 US HWY 177	Ardmore	š	73401	200	NONE
Jamie	Lee	Allen	4615 US HWY 177	Ardmore	ŏ	73401	200	NONE
Jenna	Ruth	Allen	6847 Dickson Rd	Ardmore	š	73401	200	NONE
Travis	Lee	Allison	204 Mesa Rd	Ardmore	š	73401	200	NONE
Timothy	Joseph	Argo	996 Majestic Hills Rd	Ardmore	š	73401	1000	NONE
Lacree	S.	Austin	700 Elm St	Ardmore	ě	73401	200	NONE
Evan	Michael	Baker	2028 Cloverleaf PL	Ardmore	š	73401	1000	NONE
Christopher	ш	Barlow	363 Express Rd	Ardmore	š	73401	1000	NONE
Jarrod	Swint	Barlow	363 Express Rd	Ardmore	š	73401	200	NONE
Brandon	Trent	Beane	PO Box 84	Lone Grove	š	73443	1000	NONE
Jared	Scott	Beane	4606 Brock Rd	Ardmore	š	73401	200	NONE
Joshua	Todd	Beane	PO Box 354	Lone Grove	š	73443	200	NONE
Derek	Lee	Black	PO Box 364	Lone Grove	š	73443	200	NONE
Brian	Jamelle	Booker	919 4th SE	Ardmore	š	73401	200	NONE
Whitney	Marie	Brawley	3618 Brock Rd.	Ardmore	ŏ	73401	200	NONE
Marissa	Dawn	Brooks	1115 Heath SE	Ardmore	ŏ	73401	200	NONE
Haley	Elizabeth	Brown	684 6th St	Wilson	ŏ	73463	200	NONE
Ryan	Tyler	Bryant	PO Box 1701	Lone Grove	ŏ	73443	1000	NONE
Joey	Lane	Buck	56 - 15th St	Wilson	ŏ	73463	1000	NONE
Larry	Dylan	Buck .	5621 W. Broadway	Ardmore	ŏ	73401	1000	NONE
Samantha	Jane	Buck	720 N. Commerce #222	Ardmore	š	73401	1000	NONE
Cierra	Rebecca	Burton	PO Box 144	Mannsville	š	73447	200	NONE
Kristin	Elise	Butler	1322 Bixby	Ardmore	š	73401	1000	NONE
Ronna	نـ	Butler	170 Alamo Rd	Ardmore	ŏ	73401	200	NONE
Joseph	u.	<b>Buzidragis IV</b>	363 Sante Fe Rd	Wilson	ŏ	73463	200	NONE
Kalyn	Rhea	Byrne	1925 McClain Rd	Ardmore	ŏ	73401	200	NONE
Kimberly	Danieal	Carrell	1606 Ward Rd	Ardmore	š	73401	1000	NONE
Phillip	Michael	Check	3522 Midway Rd	Wilson	š	73463	1000	NONE
Starla	Rene	Clayburn	116 Huebsch Loop	Ardmore	š	73401	200	NONE
Julie	Ë	Coble	1809 Melody Ln	Ardmore	š	73401	200	NONE
Beth	Nicole	Coffey	1819 2nd NE	Ardmore	ŏ	73401	200	NONE

FIRST	MIDDLE	LAST	ADDRESS	CITY	STATE	ZIP	PAID	NONE
Justin	Blake	Conway	2515 Sandy Creek Rd	Ardmore	ŏ	73401	1000	NONE
Olen	ய்	Cook III	PO Box 1175	Lone Grove	š	73443	200	NONE
Audrey	Katelyn	Cox	4524 Mt. Washington Rd	Ardmore	š	73401	1000	NONE
Angela	Brooke	Cramer	835 G St NW	Ardmore	š	73401	1000	NONE
Andraya	Rose	Crouch	PO Box 334	Healdton	š	73438	200	NONE
Brittani	Deshawn	Day	1911 Wildewood	Ardmore	š	73401	200	NONE
Eran	Praise	Dragg	254 Kelly Ln	Ardmore	š	73401	200	NONE
Leandra	Rae	Dushane	71 First St	Fox	ŏ	73435	200	NONE
Diamond	Cherille	Fields	805 B St SE	Ardmore	ŏ	73401	200	NONE
Brittney	Rachelle	Franks	1708 Tower Dr.	Ardmore	ŏ	73401	200	NONE
Kacie	Leann	Franks	608 Frensley	Ardmore	ŏ	73401	1000	NONE
April	Joy	Gaither	PO Box 2	Wilson	ŏ	73463	200	NONE
Anthony	Michael	Garringer	PO Box 264	Ardmore	š	73402	200	NONE
Jordan	Ross	Gary	1900 8th NW	Ardmore	š	73401	1000	NONE
Jamie	Rae	Genn	196 Southerland St.	Lone Grove	š	73443	200	NONE
Bethany	Ann	Green (Laird)	1103 Countrywood	Ardmore	š	73401	200	NONE
Tara	Ë	Groomer	1637 Brentwood Circle	Ardmore	š	73401	200	NONE
Franco	Ë	Guadarrama	220 E. Woods Lane	Ardmore	š	73401	200	NONE
Charli	oʻ	Haggard	71 Baum Rd	Ardmore	ě	73401	200	NONE
Taylor	Elizabeth	Hamilton	3- Creek Nation	Healdton	ŏ	73438	200	NONE
Shelby	Lewis	Hand	PO Box 7	Overbrook	š	73453	200	NONE
Jessica	Ann	Holley	89 Abshire Circle	Ardmore	ŏ	73401	1000	NONE
Jayci	Diann	Hoskins	345 Wisteria St	Lone Grove	ŏ	73443	200	NONE
Sarah	Marie	Houchin	1816 Kings Rd	Ardmore	ŏ	73401	200	NONE
Autumn	Renae	Hurley	295 Washington St	Tatums	ŏ	73487	200	NONE
Casey	نـ	Jones	1208 Bailey SE	Ardmore	ŏ	73401	1000	NONE
Courtney	Marie	Jones	1208 Bailey SE	Ardmore	š	73401	200	NONE
Lauren	Virginia	Kollar	5038 Sante Fe Rd	Wilson	š	73463	200	NONE
Cody	Matthew	Keeton	668 Durango	Ardmore	ě	73401	200	NONE
Dakota	ij	Kilcrease	565 Kepler Rd	Ratliff City	š	73481	1000	NONE
Kevin	Dale	Lake	825 Boulder Dr.	Ardmore	ŏ	73401	200	NONE
Brian	Michael	Latimer	2201 Wimbledon Ct	Ardmore	ŏ	73401	200	NONE
Rebecca	Ann	Latimer	2201 Wimbledon Ct	Ardmore	ŏ	73401	200	NONE

FIRST	MIDDLE	LAST	ADDRESS	CITY	STATE	ZIP	PAID	NONE
Brett	Danie	Lehman	1902 6th St NW	Ardmore	ě	73401	200	NONE
Desiree	Nicole	Lvnch	504 Foxden Rd	Wilson	ŏ	73463	200	NONE
Amanda	Lynn	McArthur (Doss)	1475 7th St	Wilson	ě	73463	200	NONE
Andrew	James	McArthur	1475 7th St	Wilson	š	73463	200	NONE
Hannah	Renee	McCracken	P.O. Box 854	Lone Grove	š	73443	200	NONE
Dustin	Lee	McCurry	167 Willard Rd	Ardmore	š	73401	1000	NONE
Jessica	Allison	McKennell	324 Willard Rd	Ardmore	ě	73401	200	NONE
Amanda	Nicole	McMillen	PO Box 65	Ardmore	ŏ	73402	200	NONE
Craig	Walton	McMurry	471 Abshire Circle	Ardmore	š	73401	200	NONE
Mackenzie	-	Miller	HC66 Box 116C	Overbrook	ŏ	73453	200	NONE
leremv	i d	Moslev	706 Cherry St.	Ardmore	ŏ	73401	200	NONE
Devin (	Lane	Movers	515 S. Plainview Rd	Ardmore	ŏ	73401	200	NONE
Dillon	<u></u>	Mumford	P.O. Box 54	Fox	ŏ	73435	200	NONE
Pavton	Lee	Mumford	P.O.Box 54	Fox	ŏ	73435	200	NONE
Kara	Beth	Musgrove	6545 Praire Valley Road	Ardmore	ŏ	73401	200	NONE
Clint	Garrison	Nall	601 Lorraine Rd	Ardmore	ŏ	73401	200	NONE
Kristvn	Nicole	Noland	HC66 Box 44	Overbrook	ě	73453	200	NONE
Jonathon	Michael	O'Brien	Rt.1 Box 304A	Madill	š	73446	200	NONE
Clinton	Randall	Ogletree	98 Kelly Lane	Lone Grove	š	73443	200	NONE
Chelsea	Jae	Otev	1110 Terrace	Weatherford	š	73096	200	NONE
Corv	}	Parkerson	P.O. Box 1811	Lone Grove	ě	73443	200	NONE
Daniel	Wayne	Patton	465 Fruit St.	Lone Grove	š	73443	200	NONE
Flizabeth	Ann	Patterson	1400 Asp Ave. #719E	Norman	š	73072	1000	NONE
Carion	ď	Pelton	401 B St NW	Ardmore	š	73401	1500	NONE
Hannah	Kaye	Pempsell	16 Cross Creek Cr.	Ardmore	ě	73401	1000	NONE
MaKenzie	•	Perryman	354 Blackbird Ln	Ardmore	ŏ	73401	200	NONE
Amv	Marie	Peterson	509 Regent	Ardmore	ě	73401	200	NONE
Wavland	Tel	Phipps	508 Northwest Ave.	Ardmore	ŏ	73401	1000	NONE
Todd	Wesley	Pierce	2 Frances	Healdton	š	73438	1000	NONE
Hailev	Nichole	Price	19 - Jon St.	Healdton	ŏ	73438	200	NONE
Kelbv	Garrett	Price	1325 S. Commerce	Ardmore	ŏ	73401	200	NONE
Stacev	Marie	Price	7778 Memorial Rd.	Lone Grove	ŏ	73443	200	NONE
Russell	Wayne	Priddy	P.O. Box 202	Mannsville	ě	73447	200	NONE

FIRST	MIDDLE	LAST	ADDRESS	CITY	STATE	ZIP	PAID	NONE
Tyler	Matthew	Prosise	P.O. Box 741	Lone Grove	š	73443	1000	NONE
Lyndsey	Норе	Raney	302 Gayle St.	Ardmore	ŏ	73401	200	NONE
Magglan	Ruth	Riggle	24033 State Hwy 76	Ratliff City	ŏ	73481	200	NONE
Bonnie	or	Rigney	13309 S. Sherry Lake	Ardmore	ŏ	73401	200	NONE
Kaleb	Chad	Riner	604 Evergreen Dr.	Ardmore	ŏ	73401	200	NONE
Karmika	Treche	Roberts	504 Tumbleweed Rd.	Ardmore	ŏ	73401	200	NONE
Katlin	DeOnne	Robinson	51 Hometown Rd.	Lone Grove	š	73443	1000	NONE
Robert	Oscar	Rockwell	1516 Red Oak Dr.	Ardmore	š	73401	200	NONE
Ryan	Ä	Roring	1318 Sunny Lane	Ardmore	ŏ	73401	1000	NONE
Mark	Zachariah	Rouse	3876 Ponderosa Rd.	Ardmore	ŏ	73401	200	NONE
Kristi	Renee	Russell	P.O. Box 327	Mannsville	ŏ	73447	1000	NONE
Rebecca	Rena	Ryan	8350 St. Hwy 199	Ardmore	ŏ	73401	200	NONE
Steven	Ray	Sanders	3079 Ridge Rd	Wilson	ŏ	73463	1000	NONE
Chisum	Wayne	Schreibvogel	415 Nugget Rd.	Lone Grove	š	73443	200	NONE
Dustin	Wayne	Schreibvogel	415 Nugget Rd.	Lone Grove	ŏ	73443	200	NONE
Wesley	James	Schumacher	4113 Rolling Hills Dr.	Ardmore	ě	73401	200	NONE
Todd	Bennett	Shelton	PO Box 57	Ardmore	š	73402	1000	NONE
Waylon	C. M.	Shores	374 Sante Fe Road	Wilson	ŏ	73463	1000	NONE
Jatinder		Singh	4117 Rolling Hills Dr.	Ardmore	ŏ	73401	200	NONE
Prince	Pal	Singh	2509 Westwood Ct.	Ardmore	ð	73401	200	NONE
Deitrick	Lamar	Spigner	3818 Cargo Rd.	Tatums	ŏ	73487	200	NONE
Lauren	Jamie	Steele-Clardy	251 Gayle St.	Ardmore	š	73401	200	NONE
Jeremy	Joe	Stewart	P.O. Box 6	Fox	ŏ	73435	200	NONE
Brett	Allen	Stidham	P.O. Box 2204	Ardmore	ŏ	73402	200	NONE
Bradi	Marie	Strange	830 Daniels Dr.	Healdton	ŏ	73438	200	NONE
Lori	Ann	Stuart	43 Town & Country	Ardmore	ŏ	73401	1000	NONE
Tyler	Newman	Thomason	18214 Hwy 70 West	Lone Grove	š	73443	200	NONE
Kenneth	Ryan	Vaughn	2029 Cloverleaf Pl	Ardmore	ŏ	73401	200	NONE
Caleb	Andrew	Wagner	724 Virginia Lane	Ardmore	ŏ	73401	200	NONE
Jerad	Scott	Wagner	724 Virginia Lane	Ardmore	ŏ	73401	200	NONE
Devon	lee	Walker	Rt.1 Box 378	Marietta	š	73448	1000	NONE
Jessica	Elaine	Walker	PO Box 375	Ardmore	ŏ	73402	200	NONE
Jacey	Michelle	Wallace	424 K St SW	Ardmore	ŏ	73401	200	NONE

FIRST	MIDDLE	LAST	ADDRESS	CITY	STATE	ZIP	PAID	NONE
Keith	Daniel	Watkins	44 Town & Country	Ardmore	ě	73401	200	NONE
Kavla	Marie	Watson	3599 Brock Rd.	Ardmore	ŏ	7341	200	NONE
BreAnna	! !	Watterson	331 C St. SW	Ardmore	ŏ	73401	1000	NONE
Chelsea	Rachelle	Watterson	P.O. Box 247	Lone Grove	ŏ	73443	200	NONE
Kelly	Dawn	Whetstone	7191 Deese Rd.	Springer	ŏ	73458	200	NONE
Rachel	Deann	Wilkins	Rt. 1 Box 325A	Madill	ŏ	73446	200	NONE
l pellip	Nicole	Willingham	5758 Sandshell Circle	Ft. Worth	¥	76137	200	NONE
Kylee	Leann	Witt	814 4th NE	Ardmore	ŏ	73401	200	NONE
Frank	Clifford	Wood	6249 N. Newport Rd	Lone Grove	ŏ	73443	200	NONE
Valerie	3	Woods	720 N. Commerce #624	Ardmore	ŏ	73401	200	NONE
lustin	Todd	Woulfe	6719 Midway Rd	Ardmore	ě	73401	200	NONE
Amanda	Fee	Wrav	1223 S. Rockford Rd	Ardmore	š	73401	1000	NONE
Cameron	Michael	Wright	839 Sunset Ct	Ardmore	š	73401	200	NONE
TOTAL 145 Recipients	cipients	)				TOTAL	92,000.00	

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(Form 990 or 990-EZ) SCHEDULE N

Liquidation, Termination, Dissolution, or Significant Disposition of Assets ► Complete if the organization answered "Yes" to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36.

Attach certified copies of any articles of dissolution, resolutions, or plans.

OMB No 1545-0047

Open to Public 2009

Inspection	on number	n 990-EZ, line		(g) IRC section of	recipient(s) (if	tax-exempt) or type	of entity					Yes
	Employer identification number	V, line 31, or Forr		pient								
		Foundation   73-1373-131   Foundation   Foundation   Form 990, Part IV, line 31, or Form 990-EZ, line		(f) Name and address of recipient								
10-E4.		answered "Ye										
Attach to Form 990 or 990-EZ.		ne organization	ĵ.	(e) EIN of recipient								
► Attaci	Q,	ete this part if th	ed.	(d) Method of	determining FMV for	asset(s) distributed or	transaction expenses					
	Scholarshi	ssolution. Comp	nal space is need	(c) Fair market value of	asset(s) distributed or	amount of transaction	expenses					
	Ardmore	10n ination or Di	N-1 if addition	(b) Date of	distribution							
Department of the Treasury	l _	Foundation Termination	36. Use Schedule N-1 if additional space is needed.	(a) Description of asset(s)	distributed or transaction	expenses paid						
Department	Name of th	Dart -		1 (8	•							

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

Schedule N (Form 990 or 990-EZ) 2009

29

28 **5**p 20

Become a director or trustee of a successor or transferee organization? ø

Become an employee of, or independent contractor for, a successor or transferee organization?

Become a direct or indirect owner of a successor or transferee organization?

Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?

If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III. ▶

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Page 2

73-1373231

Sthedul Part III Supplemental Information. Complete to provide the information required by Part I, lines 2e, 7c;

Page 3

Part II, line 2e; and any additional information.

SCHEDULE O

Department of the Treasury Internal Revenue Service

### 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.

2009
Open to Public Inspection

Name of the organization

Greater Ardmore Scholarship Foundation

Employer identification number 73-1373231

Form 990 - Organization's Mission or Most Significant Activities
To provide scholarships to high school graduates, which are
not eligible for federal assistance and with income level
not above \$75,000, to continue their college or technical
education.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990
Copies in PDF format were sent to all board members for review and comment before return was filed.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Any time a member becomes aware of a situtation that may cause them to be
in a conflict of interest position, they inform the board and the board
discusses what to do to avert the postiton.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return

► See separate instructions. Greater Ardmore Scholarship Foundation

Identifying number 73-1373231

	ess or activity to which this form relates										
	rt I Election To Expe	nse Certain Prop				com	nlote Da	ort I			
	Note: If you have any listed property, complete Part V before you complete Part I.								1	250	,000
1	Maximum amount. See the instructions for a higher limit for certain businesses								2		7000
3	Total cost of section 179 property placed in service (see instructions)								3	800	,000
4	Threshold cost of section 179 property before reduction in limitation (see instructions)  Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-								4		
5	Dollar limitation for tax year Subtract				arately, se	e instr	ictions		5		
6		on of property	1000, 071101 0 171111	(b) Cost (bus				lected cost			
		<del></del> .	<u>,</u>								
7	Listed property Enter the amour	nt from line 29	<del></del>			7					
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7								8		
9									9		
10									10		
11	Business income limitation Enter	•		ss than zero	or line 5	(see i	nstruction	s)	11		
12	Section 179 expense deduction					•			12		
13	Carryover of disallowed deduction				▶ [	13					
	: Do not use Part II or Part III belo										
Pa	rt II Special Deprecia	tion Allowance a	nd Other Dep	reciation	(Do no	t incl	ude liste	ed prop	erty.)	(See instr.)	
14	Special depreciation allowance f										
-	during the tax year (see instructi			,.					14		
15	Property subject to section 168(	•				•			15		
16									16		290
		ation (Do not inclu	de listed pro	perty.) (Se	e instru	uction	ns.)				
				ion A							
17	MACRS deductions for assets p	laced in service in tax	years beginning b	efore 2009					17		0
18	If you are electing to group any asset				al asset ac	counts	check her	e ▶			
	Section B-	-Assets Placed in Se	rvice During 2009	Tax Year U	sing the	Gene	ral Depre	ciation S	ystem		
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investri only-see instruc	nent use	Recovery period	(e) C	onvention	(f) Me	thod	(g) Depreciation of	eduction
<u>19a</u>	3-year property										,
b	5-year property					·					
С	7-year property										
d	10-year property										
e	15-year property										
f	20-year property										
_ 9	25-year property			2	5 yrs.			S/l			
h	Residential rental			2	7.5 yrs		MM	S/I	-		
	property			2	7 5 yrs.		<u>MM</u>	S/I			
i	Nonresidential real			3	9 yrs		MM	S/I	-	<u> </u>	
	property						MM	S/I	<u> </u>		
	Section C—	Assets Placed in Serv	rice During 2009	Tax Year Us	ing the	Alterna	tive Dep	reciation	Syster	m	
20a	Class life					<u> </u>		S/I	L		
b	12-year				12 yrs			S/I	<u>L</u>		
	40-year				40 yrs.		ММ	S/	L		
P	art IV Summary (See i	nstructions.)									
21	Listed property Enter amount fr	rom line 28	-						21		
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here							1				
	and on the appropriate lines of your return Partnerships and S corporations—see instructions								22	<u> </u>	290
23	For assets shown above and pl							_			
	portion of the basis attributable	<del>-</del>				23					
	Daniel and Daniel and Alaska		- 41							Form AF	62 (2000

70510 Greater Ardmore Scholarship
Federal Statements

473 1373231

11/12/2010 12:12 PM

FYE: 12/31/2009

**Taxable Interest on Investments** 

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
	\$ 26,408		14		
Total	\$ 26,408				

70510 Greater Ardmore Scholarship

· 733 373231

FYE: 12/31/2009

**Federal Statements** 

11/11/2010 3:42 PM

Schedule A, Part II, Line 5 - Excess Gifts

 Donor Name
 Total
 Excess

 \$ 1,131,722
 \$ 1,101,364

 Total
 \$ 1,131,722
 \$ 1,101,364