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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $500,000 and total assets less than $1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
OEC Foundation Inc.

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO Box 721105

City or town, state or country, and ZIP + 4
Norman, OK 73070-4850

D Employer identification number
73-1411520

E Telephone number
405-321-2024

F Group Exemption Number ▶

• ***Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).***

G Accounting Method: ☐ Cash ☑ Accrual
Other (specify) ▶

I Website: ▶

J Tax-exempt status (check only one) — ☑ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

H Check ▶ ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 223,291

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	222,770
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	521
	5a	Gross amount from sale of assets other than inventory — 5a		
	b	Less: cost or other basis and sales expenses — 5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from **gaming**, check here ▶ ☐		
	a	Gross revenue (not including $ _____ of contributions reported on line 1) — 6a		
	b	Less: direct expenses other than fundraising expenses — 6b		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a	Gross sales of inventory, less returns and allowances — 7a		
	b	Less: cost of goods sold — 7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶ _____)	8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	223,291
Expenses	10	Grants and similar amounts paid (attach schedule)	10	262,167
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	3,000
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	523
	16	Other expenses (describe ▶ _____)	16	
	17	**Total expenses.** Add lines 10 through 16 ▶	17	265,690
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-42,399
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	94,715
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	52,316

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	99,874	22	63,420
23	Land and buildings		23	
24	Other assets (describe ▶ _____)		24	
25	**Total assets**	99,874	25	63,420
26	**Total liabilities** (describe ▶ grants payable)	5,159	26	11,104
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	94,715	27	52,316

13

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? **meet charitable needs of people in our service area**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28	**Food, shelter, clothing, medical assistance, community assistance** (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	262,167
29	(Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30	(Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	262,167

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Jamey Allen **7200 SE 164th, Norman, OK 73071**	**Board Member 2 hrs**	**-0-**		
Henry Biddy **801 Sweetgum, Tuttle, OK 73089**	**Board Member 2 hrs**	**-0-**		
Jim Brown **9551 Maguire Rd, Noble, OK 73068**	**Board Member 2 hrs**	**-0-**		
Vivian Gibson **2535 Boxwood, Norman, OK 73072**	**Board Member 2 hrs**	**-0-**		
Lloyd Gramling **3903 SW 8th St., Newcastle, OK 73065**	**Board Member 2 hrs**	**-0-**		
Beckie Turner **1579 County Rd 1300, Amber, OK 73004**	**Board Member 2 hrs**	**-0-**		
Sunny Stuart **3401 168th Ave NE, Norman, OK 73026**	**Board Member 2 hrs**	**-0-**		
Jerry McCracken **1403 Lincoln Ave, Norman, OK 73072**	**Board Member 2 hrs**	**-0-**		
Lynne Miller **801 48th Ave SE, Norman, OK 73026**	**Board Member 2 hrs**	**-0-**		
Joyce Wallace **3911 SE 12th Ave, Goldsby, OK 73093**	**Board Member 2 hrs**	**-0-**		
Leroy Bayliff **PO Box 615, Tuttle, OK 73089**	**Board Member .2 hrs**	**-0-**		

Part V Other Information (Note the statement requirements in the instructions for Part V.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		✓
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ -0			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ -0-			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		✓
41	List the states with which a copy of this return is filed. ▶ Oklahoma			
42a	The organization's books are in care of ▶ OEC, Charles Barton Telephone no. ▶ 405-321-2024			
	Located at ▶ 242 24th Ave NW, Norman, OK ZIP + 4 ▶ 73069			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		✓
	If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			

			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		✓

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

			Yes	No
46	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	46		✓
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		✓
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
none				

f Total number of other employees paid over $100,000 . . . . ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
none		

d Total number of other independent contractors each receiving over $100,000 . . ▶

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

▶ Signature of officer — Date: 3/15/10

▶ **Charles Barton, CFO**
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's identifying number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶		EIN ▶	
		Phone no ▶	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number
OEC Foundation, Inc.	73 : 1411520

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33⅓ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓ % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i)		
(ii) A family member of a person described in (i) above? 11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar 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.")	207,574	217,547	222,222	223,190	222,770	1,093,303
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	207,574	217,547	222,222	223,190	222,770	1,093,303
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)						
6 **Public support.** Subtract line 5 from line 4.						1,093,303

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	207,574	217,547	222,222	223,190	222,770	1,093,303
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	514	1066	1281	915	521	4,297
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						1,097,600

12 Gross receipts from related activities, etc. (see instructions) . . . . . 12 -0-

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . 14 99.61 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . 15 99.62 %

16a **33⅓% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33⅓% support test—2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . ▶ ☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

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

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

Section A. Public Support

Calendar 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.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

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

2009 Beginning checkbook balance	$65,208.19
2009 Ending checkbook balance	$28,232.58
CD 21122 balance at year end	$17,253.50
CD 21039 balance at year end	$17,933.73
TOTAL	$35,187.23

DEPOSITS

date	description	amount
1/8/2009	deposit	$18,594.44
2/9/2009	deposit	$18,774.49
3/9/2009	deposit	$18,603.87
4/7/2009	deposit	$18,781.14
5/7/2009	deposit	$18,709.45
6/10/2009	deposit	$18,591.34
7/7/2009	deposit	$18,599.20
8/6/2009	deposit	$18,359.58
9/9/2009	deposit	$18,463.62
10/8/2009	deposit	$18,496.69
11/5/2009	deposit	$18,424.69
12/9/2009	deposit	$18,371.41
	TOTAL	$222,769.92

INVESTMENT ACTIVITIES

	NONE	
	TOTAL	$0.00

INTEREST

date	description	amount
	Interest Income, CD #21122	$344.83
	Interest Income, CD #21039	$176.58
	TOTAL	$521.41

ACCOUNTING / LEGAL FEES

date	ck #	description	amount
5/14/2009	6208	BKD	$3,000.00
		TOTAL	$3,000.00

SUPPLIES

date	ck #	description	amount
9/10/2009	6250	Hooper Printing, Inc	$77.40
9/14/2009		stop pmt fee-chk 6180	$24.00
10/19/2009		stop pmt fee-chk 6184	$24.00
		TOTAL	$125.40

POSTAGE & SHIPPING

date	ck #	description	amount
2/5/2009	6149	Postmaster	$84.00
4/30/2009	6206	Postmaster	$84.00
8/12/2009	6240	USPS	$176.00
		TOTAL	$344.00

EQUIPMENT RENTAL

date	ck #	description	amount
2/19/2009	6150	Postmaster	$54.00
		TOTAL	$54.00

TRAVEL

date	ck #	description	amount
		NONE	
		TOTAL	$0.00

GRANTS

date	ck #	description	amount
1/7/2009	6135	Norman Vision Clinic	$185.00
1/7/2009	6136	A. Kevin Young, O.D.	$280.00
1/15/2009	6137	Dentures & Dental Services	$200.00
1/19/2009	6138	Full Circle Senior Adult Day Center	$1,000.00
1/19/2009	6139	Goldsby Fire Dept.	$3,000.00
1/19/2009	6140	McClain Co. Operation Christmas	$2,000.00
1/19/2009	6141	Rebuilding Together of Cleveland Co.	$4,000.00
1/19/2009	6142	City of Tuttle Police Department	$3,000.00
1/19/2009	6143	BSA--Sooner District, Last Frontier Council	$5,000.00
1/19/2009	6144	Spencer's Super Thrift	$300.00
1/19/2009	6145	Target	$2,550.00
2/5/2009	6146	Norman Vision Clinic	$250.00
2/5/2009	6147	Neighborhood Services Organization	$200.00
2/5/2009	6148	Norman Regional HME	$142.93
3/4/2009	6151	Amber Fire Department	$3,000.00
3/4/2009	6152	Amber Police Department	$3,000.00
3/4/2009	6153	American Red Cross-Heart of Okla.	$10,000.00
3/4/2009	6154	Lexington Fire Dept.	$3,000.00
3/4/2009	6155	Moore Fire Dept.	$3,000.00
3/4/2009	6156	Prevent Blindness Oklahoma	$2,500.00
3/4/2009	6157	Ninnekah Fire Department	$3,000.00
3/4/2009	6158	Target	$700.00
3/4/2009	6159	Mathis Brothers Furniture	$1,030.24
3/16/2009		check 6131--Marian Casey ret'd item	($139.99)
3/19/2009	6160	Leggett's Mobile Mart	$468.02
3/25/2009	6161	Eyemart Express	$140.23
3/25/2009	6162	Pioneer Hearing Aid Center	$500.00
3/25/2009	6163	Norman Vision Clinic	$148.00
4/1/2009	6164	Prague Dental Clinic	$300.00
4/1/2009	6165	Home Depot	$973.17
4/15/2009	6166	Discount Ramps	$139.99
4/15/2009	6167	Hanger Inc.	$320.00

4/15/2009	6168	Dentures & Dental Services	$400.00
4/15/2009	6169	Norman Vision Clinic	$250.00
4/20/2009	6170	Among Friends Activity Center	$2,000.00
4/20/2009	6171	Athletes of Grady Co., Special Olympics	$3,000.00
4/20/2009	6172	Dibble Fire Department	$3,000.00
4/20/2009	6173	Dibble Senior Citizens Center	$2,500.00
4/20/2009	6174	Friend Fire Dept.	$3,000.00
4/20/2009	6175	OKC Metro-Alliance Firstep	$10,000.00
4/20/2009	6176	Slaughterville Fire Dept.	$3,000.00
4/20/2009	6177	Tuttle Fire Dept.	$3,000.00
4/20/2009	6178	Value Foods	$400.00
4/20/2009	6179	OEC	$792.86
4/23/2009	6180	Alex Fire Department	$1,000.00
		stop pmt issued 9-14/reissued 10-15-09	($1,000.00)
4/23/2009	6181	Amber Volunteer Fire Department	$1,000.00
4/23/2009	6182	Blanchard Fire Department	$1,000.00
4/23/2009	6183	Bridge Creek Fire Dept.	$1,000.00
4/23/2009	6184	Cedar Country Volunteer Fire Rescue	$1,000.00
		stop pmt issued 10-19-09/reissued 10-20-09	($1,000.00)
4/23/2009	6185	Cole Volunteer Fire Dept.	$1,000.00
4/23/2009	6186	Dibble Volunteer Fire Dept.	$1,000.00
4/23/2009	6187	Friend Fire Department, Chickasha	$1,000.00
4/23/2009	6188	Goldsby Volunteer Fire Dept.	$1,000.00
4/23/2009	6189	Harold Fire Dept.	$1,000.00
4/23/2009	6190	Lexington Fire Dept.	$1,000.00
4/23/2009	6191	Little Axe Fire Dept.	$1,000.00
4/23/2009	6192	Mcloud Fire Dept.	$1,000.00
4/23/2009	6193	Naples Fire Dept.	$1,000.00
4/23/2009	6194	Newalla Fire Dept.	$1,000.00
4/23/2009	6195	Newcastle Fire Dept.	$1,000.00
4/23/2009	6196	Ninnekah Fire Dept.	$1,000.00
4/23/2009	6197	Noble Fire Dept.	$1,000.00
4/23/2009	6198	Pink Fire Dept.	$1,000.00
4/23/2009	6199	Pioneer Fire Dept.	$1,000.00
4/23/2009	6200	Pocasset Fire Dept.	$1,000.00
4/23/2009	6201	Purcell Fire Dept.	$1,000.00
4/23/2009	6202	Slaughterville Fire Department	$1,000.00
4/23/2009	6203	Tuttle Fire Department	$1,000.00
4/23/2009	6204	Washington Volunteer Fire Dept.	$1,000.00
4/30/2009	6205	Dentures & Dental Services	$550.00
5/7/2009	6207	Dentures & Dental Services	$600.00
5/14/2009	6209	Charles Childress	$5,000.00
5/14/2009	6210	Dentures & Dental Services	$600.00
6/2/2009	6211	The Dental Lodge	$600.00
6/2/2009	6212	Dr. C.M. Wispe, DDS	$130.00
6/2/2009	6213	My Dentist	$600.00
6/8/2009	6214	Assistance League of Norman	$10,000.00
6/8/2009	6215	Project Linus	$200.00
6/8/2009	6216	United Way, HELPLINE	$4,000.00
6/8/2009	6217	Walmart	$1,450.00
6/17/2009	6218	Lee Slatten, O.D.	$250.00

6/17/2009	6219	Eyemart Express	$418.71
7/1/2009	6220	Neighborhood Services Organization	$560.00
7/1/2009	6221	Danny's TV & Appliance	$925.00
7/15/2009	6222	Waggoner Heating/Air Cond. Inc.	$1,849.00
7/15/2009	6223	Norman PET	$749.95
7/15/2009	6224	Eyemart Express	$151.39
7/15/2009	6225	Lee Slatten, O.D.	$205.00
7/16/2009	6226	Lowe's	$422.08
7/23/2009		refund of grant	($400.00)
7/27/2009	6227	Target	$2,400.00
7/27/2009	6228	Walmart	$1,000.00
7/27/2009	6229	Grady Co. Emergency Management	$3,000.00
7/27/2009	6230	Norman Police Department	$1,000.00
7/27/2009	6231	Pink Senior Citizen's Center	$1,500.00
7/27/2009	6232	Pocasset Fire Dept.	$3,000.00
7/27/2009	6233	Sarkey's Foundation	$600.00
		void chk-wrong vendor	($600.00)
7/27/2009	6234	Working for Independent Living	$500.00
7/27/2009	6235	Community After School Program	$900.00
7/27/2009	6236	Sam's Club Discover	$161.90
7/27/2009	6237	Aftershock Electric	$745.00
8/6/2009	6238	Pearle Vision	$250.00
8/6/2009	6239	Digestive Disease Specialist, Inc.	$250.05
8/12/2009	6241	Communities Foundation	$600.00
8/12/2009	6242	Oklahoma Respiratory Care	$331.87
8/12/2009	6243	Affordent Dentures & Gen'l Dentistry	$550.00
8/27/2009	6244	Terry Hopkins, DDS	$600.00
8/27/2009	6245	A. Kevin Young, O.D.	$200.00
8/27/2009	6246	Jack French Sr. Lab	$520.00
8/27/2009	6247	Herndon Family Dentistry	$600.00
9/10/2009	6248	Nicole Kish, O.D.	$78.00
9/10/2009	6249	Luceen Dunn, MS, CCC, A	$700.00
9/10/2009	6251	Hertz Rent-a-Car	$267.04
9/10/2009	6252	La Quinta Inn Houston Reliant Med Ctr	$409.50
9/10/2009	6253	First Fidelity Bank	$921.76
9/14/2009	6254	Center For Children & Families	$1,800.00
9/14/2009	6255	McClain Co. Foster Children/CARE	$3,000.00
9/14/2009	6256	Pioneer Fire Dept.	$3,000.00
9/14/2009	6257	Walmart	$900.00
9/15/2009	6258	Health for Friends	$2,500.00
9/24/2009	6259	Waldo Blanton	$76.56
9/24/2009	6260	Kinsey Sand & Gravel	$815.60
9/24/2009	6261	Work Activity Center	$5,000.00
10/8/2009	6262	Dentures & Dental Services	$595.00
10/8/2009	6263	M&R Mechanical	$1,100.00
10/8/2009	6264	Lane's Tree Service	$1,000.00
10/15/2009	6265	Alex Fire Department	$1,000.00
10/20/2009	6266	Cedar Country Volunteer Fire Rescue	$1,000.00
10/21/2009	6267	Target	$2,300.00
10/21/2009	6268	Wal-Mart	$1,050.00
10/21/2009	6269	Bridge Creek School-Christmas Comm Bskt	$3,000.00

10/21/2009	6270	Verden Fire Dept.	$3,000.00
10/21/2009	6271	Citizens Advisory Bd of Clev Co	$10,000.00
10/21/2009	6272	Grady Co. Child Welfare--Foster Care	$2,500.00
10/21/2009	6273	Moore Firefighters--Santa Express	$750.00
10/21/2009	6274	Norman Lions Club	$2,500.00
10/21/2009	6275	Home Depot	$500.00
10/29/2009	6276	Veteran's Corner Inc	$10,000.00
10/29/2009	6277	Justice Golf Car Co Inc	$1,029.56
10/29/2009	6278	Neighborhood Services Organization	$490.00
10/29/2009	6279	My Dentist	$300.00
11/12/2009	6280	A. Kevin Young, O.D.	$250.00
11/12/2009	6281	Jack French Sr. Lab	$480.00
12/3/2009	6282	Wal-Mart	$1,450.00
12/3/2009	6283	Target	$2,800.00
12/3/2009	6284	Blanchard Lions Special Olympic Team	$1,235.00
12/3/2009	6285	Cedar Country Fire Protection District	$2,935.00
12/3/2009	6286	Harold Fire Dept.	$3,000.00
12/3/2009	6287	Meals on Wheels of Norman	$9,000.00
12/3/2009	6288	Norman Veterans Center	$2,000.00
12/3/2009	6289	Santa's Workshop	$2,500.00
12/3/2009	6290	St. Michaels Episcopal Church	$1,000.00
12/3/2009	6291	Council for Developmental Disabilities-ABLE	$1,000.00
12/3/2009	6292	Maguire Community Foundation	$10,000.00
12/3/2009	6293	Sam's Club Discover	$73.71
12/21/2009	6294	Wal-Mart	$450.00
12/21/2009	6295	Target	$400.00
12/21/2009	6296	Jack French Sr. Lab	$240.00
12/28/2009	6297	Target	$100.00
12/28/2009	6298	Norman Vision Clinic	$225.00
		sub-total	$256,222.13
		2008 Year End Accounts Payable	($5,159.21)
		2009 Year End Accounts Payable	$11,103.76
		TOTAL	$262,166.68

Name of Applicant	Approved Dollars	Submitted for Payment	Paid Check#	Vendor Name	Balance Remaining
Month June 2009					
Jerrold Cooper Sr., Norman	$648.00				$648.00
James Petross, Noble	$940.00	$211.04	6226	Lowe's	$0.00
		$38.28	6259	Waldo Blanton	$0.00
		$407.80	6260	Kinsey Sand & Gravel	$282.88
Robert Torz, Noble	$940.00	$211.04	6226	Lowe's	$0.00
		$38.28	6259	Waldo Blanton	$0.00
		$407.80	6260	Kinsey Sand & Gravel	$282.88
	$2,528.00	$1,314.24			$1,213.76
Month July 2009					
Paula Jean Crawford, Norman	$1,000.00				$1,000.00
Reba Smith, Purcell	$1,000.00				$1,000.00
	$2,000.00	$0.00			$2,000.00
Month September 2009					
Health For Friends*amended fr 7/09*	$10,000.00	$2,500.00	6258	Health for Friends	$7,500.00
Randy Buchanan, Norman	$90.00				$90.00
	$10,090.00	$2,500.00			$7,590.00
Month October 2009					
Chieir Dao, OKC	$300.00				$300.00
	$300.00	$0.00			$300.00
		Approved funding, services not billed			$11,103.76