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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

\$12(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. 2009

OMB No 1545-1150

Open to Public Inspection

		calendar year, or tax year beginning , 2009, and	chang				, 20
appli	ck if cable	l Plaaca I			D Emplo	yer lo	lentification number
Addi	ress c	hange useirs OKLAHOMA TURFGRASS RESEARCH FOUNDATION	-12				73-6103397
1	e cha	print or) Room	in/ ite	E Teleph	one n	umber
	l retu	Soo I					
Term	ınate	Specific 5203 N. WASHINGTON ST.				(4	05)818-9720
		return tions City of town, state or country, and ZIP + 4		- 1	F Group		•
Appli pend					Numbe		
Sec	tion	501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attack	h G		_		d: X Cash Accrual
14/-	المما	a completed Schedule A (Form 990 or 990-EZ).		-	her (speci		
		e: ►N/A	<u> —</u> Г			-	nization is not required
			527				orm 990, 990-EZ, or 990-PF)
		if the organization is not a section 509(a)(3) supporting organization and its gro					
		D-EZ or Form 990 return is not required, but if the organization chooses to file a reti				mplet	
		b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of For					36,522
art		Revenue, Expenses, and Changes in Net Assets or Fund Ba	lance	S (Se	e the instr	uction	
	1	Contributions, gifts, grants, and similar amounts received	• • • •	•		1	29,712
	2	Program service revenue including government fees and contracts	• •	• •	• • •	2	
	3	Membership dues and assessments			• • • • •	3	6,810
	4	Investment income		•		4	
	5a	Gross amount from sale of assets other than inventory					
	b	Less cost or other basis and sales expenses				_	
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5	-			5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gar	ning, c	check h	nere >		
	а	Gross revenue (not including \$ of contributions					
		reported on line 1)					
		Less direct expenses other than fundraising expenses					
	_ C	Net income or (loss) from special events and activities (Subtract line 6b from line 6	6a)	• • • •		6c	
	7a	Gross sales of inventory, less returns and allowances					
	b	Less. cost of goods sold					
		Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	٠			7c	
1	8	Other revenue (describe ▶)	8	·
+	9	Total revenue. All lines 1, 2, 3, 4, 5c, 6c, 7c, and 8			<u></u> ▶	9	36,522
- 1	0	Grants and similar amounts paid (attach schedule)		70) (8)	#1	10	14,800
	11	Benefits paid to or for members	በነሰ	lő		11	.,
- 1	2	,	υij	S S		12	
	3	Professional fees and other payments to independent contractors		100		13	
- 1	4	Occupancy, rent, utilities, and maintenance OGDEN,	UT	.		14	
	5	Finning, publications, postage, and snipping	~		• • • • •	15	1,393
- 1	6	Other expenses (describe ► SEE ATTACHMENT #2				16	16,618
\rightarrow		Total expenses. Add lines 10 through 16			▶	17	32,811
, [1	8	Excess or (deficit) for the year (Subtract line 17 from line 9)				18	3,711
1		Net assets or fund balances at beginning of year (from line 27, column (A)) (must					
		end-of-year figure reported on prior year's return)				19	41,193
1 2		Other changes in net assets or fund balances (attach explanation)				20	
<u> 2</u>		Net assets or fund balances at end of year Combine lines 18 through 20				21	44,904
rt J	11	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more		-		\neg	
_	- IL-	(See the instructions for Part II)	(A) B		ing of yea	+	(B) End of year
		avings, and investments	<u> </u>		22,735	22	43,904
		d buildings				23	
		ssets (describe ► SEE_ATTACHMENT_#3)	ļ		18,458	24	1,000
		sets	<u> </u>		41,193	25	44,904
		bilities (describe ▶)			0	26	0
		ets or fund balances (line 27 of column (B) must agree with line 21)	<u> </u>		41,193	27	44,904
	acy /	Act and Paperwork Reduction Act Notice, see the separate instructions.					Form 990–EZ (2009)
		90EZ1 TWF 33404 Copyright Forms (Software Only) - 2009 TW					



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73-6103397 OKLAHOMA TURFGRASS RESEARC Form 990-EZ (2009) Part V Other Information (Note the statement requirements in the instructions for Part V) Yes No Did the organization engage in any activity not previously reported to the IRS? If "Yes." attach a detailed description of each activity 33 X 34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the Χ 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, 35a X 35b Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during X 37a Enter amount of political expenditures, direct or indirect, as described in the instructions > 37a X b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were Χ any such loans made in a prior year and still outstanding at the end of the period covered by this return? **b** If "Yes," complete Schedule L, Part II and enter the total amount involved 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 . . 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under. section 4911 ▶ ; section 4912 ▶ , section 4955 ▶ 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 Х 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 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 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 X 41 List the states with which a copy of this return is filed. ▶ OK 42a The organization's books are in care of ▶ SEE ATTACHMENT #7 Telephone no ▶ Located at ▶ ZIP + 4 ▶ 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 Yes No 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. At any time during the calendar year, did the organization maintain an office outside of the US? If "Yes," enter the name of the foreign country 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		Х
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		X

P	itt At	Section 50 I(c)(3) organiza				•	•	
		501(c)(3) organizations and section	in 4947(a)(1) nonexempt	charitable trusts	must ar	iswer questions 46-49b	and complete th	e tables
	D. 141	for lines 50 and 51.						
46		organization engage in direct or indirect		ivities on behalf	of or in	opposition to candidates	Ye	
		c office? If "Yes," complete Schedule					46	X
47		organization engage in lobbying activ						X
48	is the or	ganization a school as described in s	section 170(b)(1)(A)(ii)? If	"Yes," complete	Schedu	ıle E	48	X
		organization make any transfers to ar		_			. 49a	X
b	If "Yes,"	was the related organization a section	n 527 organization?				. 49b	X
50	Complet	e this table for the organization's five	highest compensated er	nployees (other t	than offi	cers, directors, trustees a	nd key employe	es)
	who eac	h received more than \$100,000 of co	mpensation from the org	anızatıon If there	e is non	e, enter "None"		
	(a) Name	e and address of each employee	(b) Title and average	(c) Compens	ation	(d) Contributions to	(e) Expens	
	ŗ	paid more than \$100,000	hours per week devoted to position			employee benefit plans & deferred compensation	account an other allowa	
ION	VE		, , , , , , , , , , , , , , , , , , , ,					
				-				
								
					_			
								
		mber of other employees paid over \$						
		e this table for the organization's five sation from the organization. If there	= :	dependent contra	actors w	rho each received more t	han \$100,000 o	f
	(a) Nam	a and address of each rader and as		- 4400 000	(L)	T	(-) 0	
NTON		e and address of each independent	contractor paid more tha	n \$100,000	(a)	Type of service	(c) Compensa	ition
NOI	NE.							
		-						
		·						
		<u> </u>						
ď	Total nur	nber of other independent contractor	s each receiving over \$1	00,000 .	•			
_		Under penalties of perjury, I declar	re that I have examined t	nis return, includ	ing acco	ompanying schedules an	d statements, ai	nd to
		the best of my knowledge and bel		complete. Decla	ration of	f preparer (other than offi	cer) is based oi	n all
		information of which preparer has	any knowledge.					
Sigr	1	NY A	2 RMC			V	10-80-	Ю
Here		Signature of officer				Date	,,,	
		3						
		SABRINA BUXTON		SEC	ית בי קרי	ARY/TREASURE	,	
		Type or print name and title		210		AKI / IKLADOKLI		
		- // //	1 1	Date		Charlest In .		
D - ! !	•	Preparer's	Umilling of	Date	$_{\cap}$	self-	s identifying no. (S	ae instr)
Paid		signature / //////////////////////////////////	NI JAMIIMA JOH	1 (())[4] [1]	ν	employed >		
•	parer's	Firm's name (or yours DWNCAN	& ONLEY PC			EIN ▶		
Use	Only	, , , , <u></u>	MAIN STE 314			Phone no. ▶		
		address, and ZIP+4 STILLW				405-372-7	· · · · · · · · · · · · · · · · · · ·	
May t	he IRS d	scuss this return with the preparer s	hown above? See instruc	ctions			▶ X Yes	No

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

<u>ok</u>	LΑ	HOM	AUT A	RFGRASS	RESE	EARCH	FOUNDA	MOITA			7	3-610	3397			
	rt			for Public								structions.				
The	orga			a private found				-		-	-					
1		A chu	rch, conv	ention of chur	ches, or	associati	on of church	es describ	ed in sect	ion 170(b)(1)(A)(I).					
2	L	1		ibed in sectlo			-									
3				cooperative h												
4	L	•	iical rese nd state	arch organizat	tion ope	rated in co	onjunction wi	th a hospit	tal describ	ed in sect	tion 170(b))(1)(A)(III).	Enter the	hospi	tal's na	ime,
5	X			n operated for	the hen	efit of a co	allege or univ	ereity own	ed or one	rated by a	governme	ntal unit d	loccribod	n sect	lon	_
•		170(b))(1)(A)(lv). (Complete F	Part II.)							intai uniit C	lescribed	in seci	1011	
6	Ш			e, or local gove												
7	Ц			n that normally (1)(A)(vi). (Co			antial part of	its support	from a go	vernment	al unit or fr	om the ge	neral pub	lic des	cribed	ın
8	П	A com	munity ti	rust described	ın secti	on 170(b)	(1)(A)(vI). (C	omplete P	art II)							
9	X			n that normally						m contribi	itions, mer	nbership f	ees, and	gross		
				ctivities related										ts		
				ross investmei e organization								from busi	nesses			
10	П			n organized an							-					
11	H	-	-	n organized an			•	•	-			to carry o	ut the			
• •				e or more pub								-		on		
				ck the box that			_									
		a 🗍	Type I	ь	Туре	e II	c ∏1	Гуре III-Fu	inctionally	integrated		d ∏ 7	Type III-O	ther		
е	П			is box, I certify			L	• •	-	•			• •			
	ш		_	han foundatio		_			-					tion		
		509(a)	(1) or se	ction 509(a)(2)	٠.											
f		If the o	organizat	ion received a	written	determina	tion from the	IRS that if	t is a Type	i, Type II	or Type III	supportin	a			
		organı	zation, c	heck this box												
g			August 1 ng perso	7, 2006, has then the state of	ne orgar	nization ac	cepted any o	gift or conti	ribution fro	om any of	the					
		(i) A	person w	ho directly or	ındırectl	y controls	, either alone	or togethe	er with per	sons desc	rıbed ın (ıı)	_		Yes	⊢—
		an	ıd (III) bel	low, the gover	ning boo	dy of the s	supported org	ganızatıonî	?				··· · <u> </u>	11g(i)		Х
		• •	•	ember of a per			• •						1	1g(li)		X
				trolled entity of	•			-					<u>[</u>	1g(iii)	L	X
h		Provid	e the foll	owing informa	tion abo	ut the sup	ported orgai	nization(s)				1				
m k	lam	a of eur	pported	(ii) EIN	ı	(III) Tunn	of organization	(IV) is the		(A) Did in		(vi)	ls the	WIII	Amoui	nt of
(1)		anızatı		(וו) בווי	•		d on lines 1-9					organizatio	nın cot (İ)	1 ' '	uppor	
	_	,				above or	IRC section		document?		support?)	ed in the			
						(see Ins	tructions))				r ——————		5.?	1		
								Yes	No	Yes	No	Yes	No			
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

	edule A (Form 990 or 990-EZ) 2009 OKLAH						Page 2
Pa	rt II Support Schedule for Org				70(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
500	(Complete only if you checked the	box on line 5,	7, or 8 of Part I.)	·	<u> </u>		
	etion A. Public Support endar year (or fiscal year beginning in)	(0) 0005	(h) 0000	(-) 0007	(-1) 0000	(-) 0000	10.7.41
Ca	endar year (or liscal 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")	21316	10894	12134	79978	36522	160844
2					1.32.0		100011
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	21316	10894	12134	79978	36522	160844
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.						160844
	tion B. Total Support	L	<u></u>	.i			100011
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	21316	10894	12134	79978	36522	160844
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				147		147
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						160991
12	Gross receipts from related activities, etc. (se	e instructions)				12	<u> </u>
13	First five years. If the Form 990 is for the organization, check this box and stop here	- 		•	•	on 501(c)(3)	▶
Sec	tion C. Computation of Public Sup	·					
14	Public support percentage for 2009 (line 6, co				•	14	99.91 %
15	Public support percentage from 2008 Schedu	ule A, Part II, lin	e 14		•	15	%
16a	33 1/3 % support test 2009. If the organization qualifies as						this box ▶ [X
b	33 1/3 % support test 2008. If the organization and stop here. The organization qualifies						
17a	10%-facts-and-circumstances test 2009 more, and if the organization meets the "facts	_					

18

JVA

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 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)

Sec	ction A. Public Support						
Ca	llendar 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")	21316	10894	12134	79978	36522	160844
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		28580	39395			67975
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	21316	39474	51529	79978	36522	228819
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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						
8				1	 	-	222210
	Public support (Subtract line 7c from line 6.)	L	<u> </u>	i			228819
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	21316	39474	51529	79978	36522	228819
	,		37171	31323	1777.0	30322	220019
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
	sources		ļ	<u> </u>	147	ļ <u>.</u>	147
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b				147		147
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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)	21316	39474	51529	80125	36522	228966
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	t, second, third, f	•	•		▶ □
Sec	tion C. Computation of Public Sup	port Percer	ntage				
15	Public support percentage for 2009 (line 8, co	• •	•	• • • • • • • • • • • • • • • • • • • •		15	99.94 %
16	Public support percentage from 2008 Schedu			<u></u> .		16	%
Sec	tion D. Computation of Investment						
17	Investment income percentage for 2009 (line	10c, column (f)	divided by line	13, column (f))		17	0 %
18	Investment income percentage from 2008 Sc					18	%
19a	33 1/3 % support tests 2009. If the organi						_
	not more than 33 1/3 %, check this box and s			· ·			
b	33 1/3 % support tests 2008. If the organi						_
	18 is not more than 33 1/3 %, check this box		=			-	▶ ∐
20	Private foundation. If the organization did no	DE CHECK a box (on line 14, 19a, (or 196, check thi	s box and see in	istructions.	. ,,,,, ▶ 1 1

Form **4562**

Depreciation and Amortization

OMB No 1545-0172

2000

	partment of the Treasury ernal Revenue Service (99)	•	ng miorinalic					,		Attachment 67
_		► See separate					r tax return.			Sequence No 67
	me(s) shown on return				•		form relates			Identifying number
	KLAHOMA TURFGRAS					_	TNE 16			73-6103397
P	Election To Exp Note: If you have ar						l			
1	Maximum amount See the in	structions for a high	her limit for certain b	busines	ses .				1	\$250,000
2	Total cost of section 179 prop	erty placed in serv	ice (see instructions	s) .					2	
3	Threshold cost of section 179	property before re	duction in limitation	(see in:	structions))			3	\$800,000
4	Reduction in limitation Subtra	act line 3 from line 2	2 If zero or less, ent	ter -0-					4	
5	Dollar limitation for tax year. S	Subtract line 4 from	line 1 If zero or less	s, enter	-0 If ma	arned	filing separa	tely,		
_	see instructions	<u>.</u>							5	250,000
6	(a) Descripti	on of property	(b) Cost ((busn use	only	(c) Elec	cted cost	i	
_										
7	Listed property Enter the amo	ount from line 29				7				
8	Total elected cost of section 1	79 property. Add a	mounts in column ((c), lines	6 and 7				8	
9	Tentative deduction. Enter the	e smaller of line 5 of	or line 8						9	
10	Carryover of disallowed dedu-	ction from line 13 o	of your 2008 Form 4	562					10	
11	Business income limitation Er	nter the smaller of b	ousiness income (no	ot less t	han zero)	or lin	e 5 (see ınstr	uctions)	11	250,000
12	Section 179 expense deduction	on Add lines 9 and	10, but do not ente	er more	than line	11			12	
13	Carryover of disallowed dedu-	ction to 2010 Add	lines 9 and 10, less	line 12	•	13				
No	te: Do not use Part II or Part III	below for listed pr	operty Instead, use	e Part V						
Pį	art II Special Deprec	iation Allowan	ce and Other D	Depre	ciation (Do n	ot include lis	ted prop	erty.) (See instructions)
14	Special depreciation allowance	e for qualified prop	erty (other than liste	ed prop	erty) place	ed in	service			
	during the tax year (see instru	ctions)							14	500
15	Property subject to section 16	8(f)(1) election							15	
16	Other depreciation (including	ACRS).							16	
P	rt III MACRS Deprec	iation (Do not in	clude listed propert	ty) (See	e instructio	ns)			•	
				ection A						
17	MACRS deductions for assets	placed in service i	n tax years beginnir	ng befo	re 2009				17	
18	If you are electing to group an	y assets placed in	service during the ta	tax year	into one d	or mo	re		••••••	_
	general asset accounts, check	k here						▶ 🗍		
	Section B	- Assets Placed in	Service During 20	009 Tax	Year Usli	ng th	e General D	epreclat	on Sy	stem
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for dep (business/investment only see instruction	tuse 🗀 认	d) Recove	· 1	(e) Convention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property									_
k	5-year property						•			
c	7-year propertySEE ST	ATEMENT								9
C	10-year property									
e	15-year property									-
f	20-year property									
g	25-year property				25 yrs.			S/L		
h	Residential rental				27.5 yrs		MM	S/L		
	property				27 5 yrs		MM	S/L	.	
ī	Nonresidential real				39 yrs.		MM	S/L		
	property						MM	S/L	.	
	Section C A	Assets Placed In S	Service During 200	9 Tax Y	ear Using	the	Alternative	Deprecia	tion S	ystem
20a	Class life							S/L	. T	<u> </u>
	12-year	1 1			12 yrs.	$\neg \uparrow$		S/L		
	40-year				40 yrs.		ММ	S/L		
	rt IV Summary (See in:	structions.)								
	Listed property. Enter amount								21	
	Total. Add amounts from line				lumn (a).	and I	ne 21. Enter	here		
	and on the appropriate lines of								22	509
	For assets shown above and p						T		-	
	portion of the basis attributable		-		_	23				

2009 Federal Depreciation Schedule
OKLAHOMA TURFGRASS RESEARCH FOUNDATION
73-6103397

10-19-2010

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990-EZ Line	16									
COMPUTER	10-01-09	S/LMQ	7	600	0	0	300	300	0	5
PRINTER FAX COPIER	10-01-09	S/LMQ	7	400	0	0	200	200	0	4
2 Assets	s	To	tals	1,000	0	0	500	500	0	9
2 Asset	S	Grand To	tals	1,000	0	0	500	500	0	9

^{*} Asset disposed this year ~C Carryover basis in like-kind exchange transaction ~B Excess basis in like-kind exchange transaction

2009 AMT Depreciation Schedule

OKLAHOMA TURFGRASS RESEARCH FOUNDATION ,73-6103397

10-19-2010

Description	Date	Method	Year	Basis	Prior	AMT	Regular	Adjust
Form 990-EZ Line 16		_		· ·				
COMPUTER	10-01-09	S/LMQ	7	300	0	5	5 5	0
PRINTER FAX COPIER	10-01-09	S/LMQ	7	200	0	4	4	0
2 Assets		Totals:		500	0		9	0
2 Assets	G	rand Totals	•	500	0		9	0

^{*} Asset disposed this year
~C Carryover basis in like-kind exchange transaction
~B Excess basis in like-kind exchange transaction

SCHEDULE OF GRANTS ATTACHMENT 1: PAGE	SCHEDULE OF GRANTS AND SIMILAR AMOUNTS PAID ATTACHMENT 1: PAGE 1 - 990-EZ PAGE 1, PART I	TS PAID PART I, LINE	10 - GRANTS AND	SIMILAR AMOUNTS	TES PAID	
31.	For Calendar year 2009, or tax year perlod beginning	r perlod beginning		_ =		
Name of Organization OKLAHOMA TUREGRASS	RESEARCH FOUNDATION		7	Employer Identification Number 73 – 6103397	lon Number	
Class of Activity	Recipi	Recipient's Name and Address		Amount (FMV)	Purpose of Payment to Affiliate	ent to Affiliate
GRANTS Relationship	WAYNE HUFFINE SCHOLARSHIP OKLAHOMA STATE UNIVERSITY OKLAHOMA STATE UNIVERSITY OSU STILLWATER OK 74078 STILLWATER OK 74078 CASH CASH	FUND 200 200 4,600	How Book Value is Determined ACTUAL CASH ACTUAL CASH	200 T 200 T D D D D D D D D D D D D D D D D D D	SSIST WI UFFINES URFGRASS EVELOPME SSISTANC	WITH WAYNE IS SCHOLARSHIP ASS RESEARCH & MENT ACE Date of Gift
JVA Copyright Forms (Software Only) - 2009 TW	Total Togs TW L0819F	14,800				09_E0EZGR110L

	SCHEDIII E OE OTHED	EVDENCES	
Δ ΥΥΔ Ο ΙΜΕ ΝΥ	SCHEDULE OF OTHER 2: PAGE 1 - 990-EZ PAGE 1, PART 1	EXPENSES TIME 16	
OPEN TO PUBLIC	2: PAGE 1 - 990-E2 PAGE 1, PART .	r, mine to	<u> </u>
INSPECTION	For calendar year 2009 or tax period beginning	, and ending	
Name of Organizati	on	Employ	er Identification Number
OKLAHOMA T	URFGRASS RESEARCH FOUNDATION	73-61	.03397
	Description of Other Expenses		Amount
ANNUAL CON	VENTION		6,991
ANNUAL GOL	F TOURNAMENT		9,118
DEPRECIATI	ON		509
		Total	16,618
IVA Converget Form	C/Software Only 2000 TW 10940E		00 50576877

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SCHEDITE OF	OTUED ACCET		
SCHEDULE OF ATTACHMENT 3: PAGE 1 - 990-EZ PAGE 1, 1	OTHER ASSETS	5	
OPEN TO PUBLIC	FART 1, Danie	21	
. INSPECTION For calendar year 2009 or tax period beginning	, and er		
Name of Organization OKLAHOMA TURFGRASS RESEARCH FOUNDATION			ntification Number 97
	Beginning	End	EOY FMV
	of Year		(990-PF Only)
COMPUTER/PRINTER PRIOR YEARS ADJUSTMENTS	Beginning of Year 18,458	End of Year 1,000	EOY FMV (990-PF Only)
Totals	18,458	1,000	
IVIEIS	10,430	1,000	

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PRIMARY EXEMPT PURPOSE

ATTÀCHMENT 4: PAGE 1 - 990-EZ PAGE 2, PART III

OPEN TO PUBLIC

Name of Organization

INSPECTION For calendar year 2009 or tax period beginning

, and ending

Employer Identification Number

OKLAHOMA TURFGRASS RESEARCH FOUNDATION

73-6103397

Primary Purpose

THE PURPOSE OF OTRF IS TO PROMOTE EDUCATIONAL OBJECTIVES BY ENCOURAGING, FOSTERING, AND CONDUCTING SCIENTIFIC RESEARCH AND INVESTIGATIONS IN AGRIC-ULTURE, PARTICULARLY PERTAINING TO AND IN THE DEVELOPMENT OF BETTER TURF, FOR GOLF COURSES, PARKS, CEMETERIES, AIRPORTS, PUBLIC AND PRIVATE SCHOOLS, COLLEGES, UNIVERSITIES, INSTITIUTIONS, PRIVATE BUSINESS, AND INDIVIDUALS IN COOPERATION WITH OR INDEPENDENTLY OF OKLAHOMA STATE UNIVERSITY AND ALL OTHER AGENCIES INTERESTED IN TURF. OTRF ALSO COOPERATES WITH THE USGA-GREEN SECTIONS, FEDERAL, STATE AND OTHER AGENCIES INTERESTED IN TURF. OTRF MAKES GRANTS OR GIFTS OF MONEY OR PROPERTY TO AG EXPERIMENT AND DEMO STATIONS, OR DEPTS. TO AID IN PAYING SALARIES OR PERSONS ENGAGED IN AG RESEARCH OR EDUCATION, TO GIVE OR GRAND SUCH FUNDS OR PROPERTY FOR THE PURPOSE OF DEFRAYING EXPENSES, OR FOR ANY OTHER PURPOSES NOT INCONSISTENT WITH THE PURPOSES HEREIN CONTAINED.

PROGRAM SERVICE ACCOMPLISHMENT ATTÀCHMENT 5: PAGE 1 - 990-EZ PAGE 3, PART III OPEN TO PUBLIC INSPECTION For calendar year 2009 or tax period beginning , and ending Name of Organization **Employer Identification Number** OKLAHOMA TURFGRASS RESEARCH FOUNDATION 73-6103397 Part III - Statement of Program Service Accomplishments Grants and allocations 14,600 Amount includes foreign grants Program service expenses **Exempt Purpose Achievements** THE OTRF PROVIDES FUND TO THE OKLAHOMA STATE UNIVERSITY HORTICULTURE DEPARTMENT FOR TURFGRASS RESEARCH AND DEVELOPMENT.

PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 5: PAGE 2 - 990-EZ PAGE 3, PART III

· OPEN TO PUBLIC

INSPECTION For calendar year 2009 or tax period beginning , and ending

Name of Organization

OKLAHOMA TURFGRASS RESEARCH FOUNDATION

Employer identification Number

73-6103397

Part III - Statement of Program Service Accomplishments

Grants and allocations

Amount includes foreign grants | Program service expenses

6,991

Exempt Purpose Achievements

THE OTRF SPONSORS AN ANNUAL CONVENTION PROVIDING TECHNICAL SPEAKERS, CONFERENCES, PRODUCT EXHIBITS, CONTINUING EDUCATION CREDITS AND GENERAL EDUCATION.

11 .

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 6: PAGE 1 - 990-EZ PAGE 2, PART IV									
OPEN TO PUBLIC	av nariad harinning	الديدو	andina						
INSPECTION For calendar year 2009 or t	ax period beginning	, and	ending	-Aldi - Al Norsel					
Name of Organization OKLAHOMA TURFGRASS RESEAF	רט פרוואורא ידר או	Employer Identification Number							
(A) Name and Address	(B) Title and Average	(C) Compensation (If	(D) Cont to Employee	73 - 6103397 Cont to Employee (E) Expense Account					
(A) Name and Address	Hrs per Week	not paid, enter 0)	Ben Plans & Def. Comp						
MIKE BUXTON	PRESIDENT	not paid, enter of	Den Tians & Den Comp	d Offici Allowances					
5203 N WASHINGTON	5.00			•					
STILLWATER, OK 74075		0	0	0					
SABRINA BUXTON			_	_					
5203 N WASHINGTON	SECRETARY/TRE								
STILLWATER, OK 74075	10.00	6,000	0	0					
DENNIS BRIGHAM	VICE								
2211 WESTPARK DR	PRESIDENT								
NORMAN, OK 73069	5.00	0	0	0					
BRAD BABEK	DIRECTOR GOLF								
RT 1 BOX 218	COURSE								
DUNCAN, OK 73533	PRIVATE								
•	5.00	o	0	0					
DON CASH	DIRECTOR								
PO BOX 116 W NEEDLES	INDUSTRY								
BIXBY, OK 74008	ATHLETIC FAC								
•	5.00	0	0	0					
DENNIS MARTIN	EDUCATION								
OSU DEPT OF HORTICULTURE	DIRECTOR								
&	5.00								
LANDSCAPE ARCHITECTUR									
STILLWATER, OK 74078		0	0	0					
DAVE WOLFARD									
8086 S. YALE, SUITE 267	PRODUCTS/SERV								
TULSA, OK 74163	DIRECTOR								
	5.00	0	0	0					
RICK MURRAY	DIRECTOR								
3333 S. 14200 E. AVENUE	INDUSTRY								
TULSA, OK 74134	5.00	0	0	0					
DENNIS LINDEMANN	DIRECTOR								
16803 E. PINE ST.	INDUSTRY			_					
TULSA, OK 74116	5.00	0	0	0					
			!						
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7-YEAR ASSETS PLACED IN SERVICE DURING 2009 USING GENERAL DEPRECIATION SYSTEM

OKLAHOMA TURFGRASS RESEARCH FOUNDATION 73-6103397

19c Asset Description	(b) Date in Service	(c) Basis	(d) Period	(e) Convention	(f) Method	(g) Depreciation
COMPUTER	10-01-2009					
PRINTER FAX COPIER .	10-01-2009	300 200	7 7	MQ MQ	S/L S/L	5 4
•						
				,		
			i			
			:			
<u> </u>			l			

Total 9

BOOKS ARE IN CARE OF ATTACHMENT 7 - 990-EZ PAGE 3, PART V, LINE 42A OPEN TO PUBLIC INSPECTION For calendar year 2009 or tax period beginning , and ending Name of Organization **Employer Identification Number** OKLAHOMA TURFGRASS RESEARCH FOUNDATION 73-6103397 Part V - Line 42a SABRINA BUXTON Individual Name or **Business Name** 5203 N. WASHINGTON US Address 74074 City STILLWATER State OK Zip code or Foreign Address City Province or State Country Postal code (405)818-9720 Phone Number Fax Number

11 1