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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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.

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

Andy Ellis Memorial Trust

Number and street (or P.O. box, if mail is not delivered to street address)

105 N. Main

Room/suite

City or town, state or country, and ZIP + 4

Blackwell, OK 74631

D Employer identification number

73-6258313

E Telephone number

580-363-3684

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: ▶ N/A**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 ▶ \$**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	100.00
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	1,222.25
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	(311.21)
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
6c	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		
7b	Less: cost of goods sold	7b		
7c	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	1,011.04	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	2,000.00
	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	353.36
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶)	16	
	17	Total expenses. Add lines 10 through 16 ▶	17	2,353.36
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(1,342.32)
	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	33,901.99
	20	Other changes in net assets or fund balances (attach explanation)	20	3,657.31
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	37,559.30

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	33,901.99	37,559.30
23 Land and buildings	0	0
24 Other assets (describe ▶)	0	0
25 Total assets	33,901.99	37,559.30
26 Total liabilities (describe ▶)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	33,901.99	37,559.30

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2009)

SCANNED JUN 25 2010

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

Expenses

What is the organization's primary exempt purpose?	Scholarship for Blackwell High Graduates
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.	

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

28	Scholarship for outstanding student graduating from Blackwell High School.		
	(Grants \$ 2,000.00) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	28a	2,000.00
29			
	(Grants \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	30a	
31	Other program services (attach schedule) ▶ <input type="checkbox"/>		
	(Grants \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a) ▶	32	

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

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		✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
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?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		✓
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		
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?		✓
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?		✓
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 ▶ _____ ; 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 Schedule L, Part I		✓
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.		✓
41 List the states with which a copy of this return is filed. ▶ _____		
42a The organization's books are in care of ▶ <u>James R. Rodgers</u> Telephone no. ▶ <u>580-363-3684</u> Located at ▶ <u>105 N. Main, Blackwell, OK</u> ZIP + 4 ▶ <u>74631-2226</u>		
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)?	Yes	No
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.?		✓
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 ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
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		✓

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	<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	49b	<input type="checkbox"/>

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."

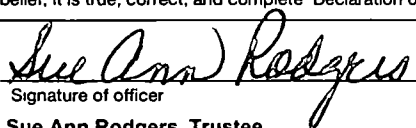

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

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		5-13-10 Date	
Paid Preparer's Use Only	Preparer's signature 		Date	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 _____		Check if self-employed <input type="checkbox"/>	EIN <input type="checkbox"/>
			Phone no <input type="checkbox"/>	

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

Andy Ellis Memorial Trust

Employer identification number

73 6258313

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)(vii)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % 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 33 1/3 % 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?

(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? ☐

(ii) A family member of a person described in (i) above? ☐

(iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐

	Yes	No
11g(i)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11g(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11g(iii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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	
Blackwell High School	73-0722241	A public school	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total									

Part I

Line 20

Realized and unrealized gains and losses and income for year less amount paid out. Unrealized gain is \$3,239.13 for year. This is shown on first page of 2009 accounting attached to return

Part III

Scholarship recipients are chosen from graduates of Blackwell High School, who have evidenced leadership qualities, have participated in sports, and have a desire to continue the educational process. It is the goal of the Trust to encourage students to excel in these endeavors to be eligible for the scholarship and improve the overall quality of education at Blackwell High School.

Andy Ellis Memorial Trust 2009

Assets 12/31/09

Trust Account	156.06	
Columbia Cash Reserves	844.33	
100 Shares Imperial TOB Group @ 63.302	6,330.20	
200 Shares XCEL Energy Inc Com @ 21.22	4,244.00	
200 Shares Alliant Energy Corp @ 30.26	6,052.00	
Market Value of CFO Investment	19,932.71	
Includes realized & unrealized gains & losses & income for year less amounts paid out, unrealized gain is \$3,239.13 for year		
Total Market Value of Assets 12-31-09		\$37,559.30

Transactions in Trust Account 2009

Balance 1-1-09	56.06	
1/5/2009 Weiberg contribution	100.00	
7/20/2009 Transfer from Col. Cash Res.	2,000.00	
Total		\$2,156.06

Paid Out: University of Oklahoma for Jordan Brown	\$2,000.00	
Total		\$2,000.00

Balance 12-31-09 **\$156.06**

Transactions Columbia Cash Reserves

Balance 1-1-09	2,160.22	
Corporate Dividends 2009	684.11	
Total		\$2,844.33

Paid Out: Transfer to Trust Account	2,000.00	
Total Paid Out		\$2,000.00

Balance 12-31-09 **\$844.33**

Transactions Communities Foundation of Oklahoma 2009

Book Value Balance 1-1-09	18,601.14
Realized Income and Gain 2009	538.14
Realized Loss 2009	<u>-311.21</u>

Total	\$18,828.07
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Less: Paid Out 2009	
Management Fee	<u>353.36</u>

Total Paid Out	<u>353.36</u>
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Book Value Balance 12-31-09	\$18,474.71
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Gains and Donations

Income, and Losses Received in 2009, All Accounts

Net Dividends	684.11
Com. Foundation of Oklahoma, Inc.	538.14
Donation Weiberg	100.00
Com. Foundation of Oklahoma Losses	<u>-311.21</u>

Total	\$1,011.04
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Paid Out 2009, All Accounts

Scholarships:	
	2,000.00
Management Fee - Com. Found of OK	<u>353.36</u>

Total	<u>\$2,353.36</u>
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Net for Year - 2009	<u><u>-\$1,342.32</u></u>
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Application of Net Decrease for 2009

Beginning of Year:

Com. Found. Of Oklahoma (Book Value)	\$18,601.14
Col. Cash Reserves	\$2,160.22
Trust Account	<u>\$56.06</u>

Total

\$20,817.42

End of Year:

Com. Found. Of Oklahoma (Book Value)	\$18,474.71
Col. Cash Reserves	\$844.33
Trust Account	<u>\$156.06</u>

Total

\$19,475.10

Difference

-\$1,342.32

Blackwell CF/Andy Ellis Trust Scholarship Endowment Fund # 179

Changes in Fund Balance for the Period Ended March 31, 2009

	Quarter To Date	Year To Date
Net Assets - As Of Beginning of Period	16,802.02	21,363.37
Contributions	0.00	0.00
Pledges	0.00	0.00
Program Revenues	0.00	0.00
Interest and Dividend Income	109.45	459.65
Realized Gains (Losses)	-43.73	-1,175.23
Unrealized Gains (Losses)	-773.56	-3,378.52
Total Revenues and Support	-707.84	-4,094.10
Grants Voted (including amounts to be paid in future periods)	0.00	-1,000.00
Program Expenses	0.00	0.00
Management Fees	-80.49	-255.58
Credit Card Fees on Gifts Rec'd	0.00	0.00
Total Expenses	-80.49	-1,255.58
Net Assets - As Of End of Period	16,013.69	16,013.69

Blackwell CF/Andy Ellis Trust Scholarship Endowment Fund # 179
Changes in Fund Balance for the Period Ended June 30, 2009

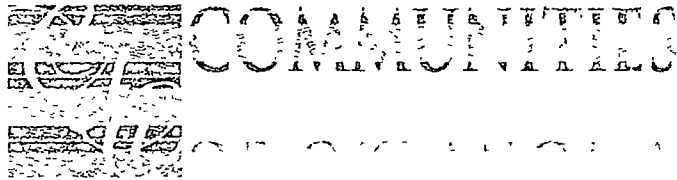
	Quarter To Date	Year To Date
Net Assets - As Of Beginning of Period	16,013.69	21,363.37
Contributions	0.00	0.00
Pledges	0.00	0.00
Program Revenues	0.00	0.00
Interest and Dividend Income	127.74	587.39
Realized Gains (Losses)	-39.86	-1,215.09
Unrealized Gains (Losses)	1,563.90	-1,814.62
Total Revenues and Support	1,651.78	2,442.32
Grants Voted (including amounts to be paid in future periods)	0.00	-1,000.00
Program Expenses	0.00	0.00
Management Fees	-84.39	-339.97
Credit Card Fees on Gifts Rec'd	0.00	0.00
Total Expenses	-84.39	-1,339.97
Net Assets - As Of End of Period	17,581.08	17,581.08

Blackwell CF/Andy Ellis Trust Scholarship Endowment Fund # 179

Changes in Fund Balance for the Period Ended September 30, 2009

CORRECTED STATEMENT

	Quarter To Date	Year To Date
Net Assets - As Of Beginning of Period	17,581.08	17,581.08
Contributions	0.00	0.00
Pledges	0.00	0.00
Program Revenues	0.00	0.00
Interest and Dividend Income	106.17	106.17
Realized Gains (Losses)	-78.80	-78.80
Unrealized Gains (Losses)	1,842.53	1,842.53
Total Revenues and Support	1,869.90	1,869.90
Grants Voted (including amounts to be paid in future periods)	0.00	0.00
Program Expenses	0.00	0.00
Management Fees	-91.52	-91.52
Credit Card Fees on Gifts Rec'd	0.00	0.00
Total Expenses	-91.52	-91.52
Net Assets - As Of End of Period	19,359.46	19,359.46



April 27, 2010

Blackwell CF/Andy Ellis Trust Scholarship Endowment Fund # 179
Changes in Fund Balance for the Period Ended December 31, 2009

	Quarter To Date	Year To Date
Net Assets - As Of Beginning of Period	19,359.46	17,581.08
Contributions	0.00	0.00
Pledges	0.00	0.00
Program Revenues	0.00	0.00
Interest and Dividend Income	194.78	300.95
Realized Gains (Losses)	-148.82	-227.62
Unrealized Gains (Losses)	606.26	2,448.79
Total Revenues and Support	652.22	2,522.12
Grants Voted (including amounts to be paid in future periods)	0.00	0.00
Program Expenses	0.00	0.00
Management Fees	-96.96	-188.48
Credit Card Fees on Gifts Rec'd	0.00	0.00
Total Expenses	-96.96	-188.48
Net Assets - As Of End of Period	19,914.72	19,914.72