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Form 990-EZ

Department of the Treasury  
Internal Revenue Service

**Short Form  
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

**2009**

**Open to Public  
Inspection**

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

July 1, 2009, and ending

June 30, 2010

B Check if applicable	C Name of organization	D Employer identification number
<input type="checkbox"/> Address change	Southeast Tulsa Rotary Foundation, Inc.	73-1382054
<input type="checkbox"/> Name change	Number and street (or P O box, if mail is not delivered to street address)	E Telephone number
<input type="checkbox"/> Initial return	P. O. Box 33025	918-250-8627
<input type="checkbox"/> Terminated	City or town, state or country, and ZIP + 4	F Group Exemption Number ►
<input type="checkbox"/> Amended return	Tulsa, OK 74135	
<input type="checkbox"/> Application pending		

• 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: ► [www.setulsarotary.org](http://www.setulsarotary.org)

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 ► \$ 19,876

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

	Revenue	1	11,541
	2	2	
	3	3	
	4	4	1,731
	5a	5a	
	5b	5b	
	5c	5c	
	6a	6a	6,604
	6b	6b	2,770
	6c	6c	3,834
	7a	7a	
	7b	7b	
	7c	7c	
	8	8	
	9	9	17,106
	10	10	14,003
	11	11	
	12	12	
	13	13	
	14	14	
	15	15	
	16	16	150
	17	17	14,153
	18	18	2,953
	19	19	84,231
	20	20	
	21	21	87,184
1	Contributions, gifts, grants, and similar amounts received . . . . .	1	11,541
2	Program service revenue including government fees and contracts . . . . .	2	
3	Membership dues and assessments . . . . .	3	
4	Investment income . . . . .	4	1,731
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 ► <input checked="" type="checkbox"/>		
a	Gross revenue (not including \$ 947 of contributions reported on line 1) . . . . .	6a	6,604
b	Less: direct expenses other than fundraising expenses . . . . .	6b	2,770
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c	3,834
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, 5a, 5c, 6c, 7c, and 8 ► . . . . .	9	17,106
10	Grants and similar amounts paid (attach schedule) . . . . .	10	14,003
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	
14	Occupancy, rent, utilities, and maintenance . . . . .	14	
15	Printing, publications, postage, and shipping . . . . .	15	
16	Other expenses (describe ► Financial Service Charge) . . . . .	16	150
17	Total expenses. Add lines 10 through 16 ► . . . . .	17	14,153
18	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	2,953
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	84,231
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	87,184

**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	84,796	22	87,983
23		23	
24		24	
25	84,796	25	87,983
26	(565)	26	(799)
27	84,231	27	87,184

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

Cat No 106421

Form 990-EZ (2009)



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

	<b>Yes</b>	<b>No</b>
33 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 changes . . . . .	34	X
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.	35a	X
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? . . . . .	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	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a	0	
b Did the organization file Form 1120-POL for this year? . . . . .	37b	X
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	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	38b	N/A
39 Section 501(c)(7) organizations. Enter:	39a	N/A
a Initiation fees and capital contributions included on line 9 . . . . .	39b	N/A
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A	40b	X
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 . . . . .	40c	
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 . . . . . ► N/A	40d	
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization . . . . . ► N/A	40e	X
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. ► Oklahoma		
42a The organization's books are in care of ► David L. Shepherd Telephone no. ► 918-250-8627 Located at ► 4101 S. Quinua Ave., Broken Arrow, OK ZIP + 4 ► 74011		
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	X
If "Yes," enter the name of the foreign country: ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42c	X
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: ► N/A		
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 N/A		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44	X
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

**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.

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

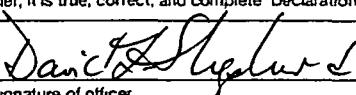
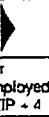
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ► 0

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 ► 0

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  David L. Shepherd, Treasurer Type or print name and title		Date 11/9/10
	Paid Preparer's Use Only	Preparer's signature  Firm's name (or yours if self-employed), address, and ZIP + 4	Date

May the IRS discuss this return with the preparer shown above? See instructions ►  Yes  No

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

## Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

**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.

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**Name of the organization**

**Employer identification number**

73

1382054

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

	Yes	No
11g(i)	✓	
11g(ii)	✓	
11g(iii)	✓	

(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	
See Statement 4									
Total	5	6	7	8	9	10	11	12	13

**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.) N/A

**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 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 <b>Total.</b> Add lines 1 through 3						
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 <b>Public support.</b> Subtract line 5 from line 4						

**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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 <b>First five years.</b> 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						► <input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a <b>33½% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
b <b>33½% support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
17a <b>10%-facts-and-circumstances test—2009.</b> 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		► <input type="checkbox"/>
b <b>10%-facts-and-circumstances test—2008.</b> 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		► <input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► <input type="checkbox"/>

**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.)

N/A

**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 . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support</b> (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
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First five years.</b> 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 ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

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

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	%
<b>19a</b> <b>33 1/3 % support tests—2009.</b> 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 ► <input type="checkbox"/>		
<b>b</b> <b>33 1/3 % support tests—2008.</b> 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 ► <input type="checkbox"/>		
<b>20</b> <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

**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

N/A \*

SOUTHEAST TULSA ROTARY FOUNDATION, INC.

EIN 73-1382054

FORM 990EZ AND SCHEDULE A (FORM 990)  
FOR THE TAX YEAR 7/1/09 TO 6/30/10

Statement 1

Form 990EZ, Part I, Line 6 - Special Events and Activities

	Special Event	Card	Bean	Zone	Sport	Total
		Draw	Supper	Institute	Ticket Auction	
Gross Receipts		1,895	5,536	20	100	7,551
Less Contributions		(947)	0	0	0	(947)
Gross Revenue		948	5,536	20	100	6,604
Less Direct Expenses		(965)	(1,245)	(560)	0	(2,770)
Net Income or (Loss)		(17)	4,291	(540)	100	3,834

Statement 2

Form 990EZ, Part I, Line 10 - Grants and Similar Amounts Paid

Domestic Violence Intervention Services, Tulsa, OK	890	Help victims of domestic viol
Jamie Odom (Metro Christian School)-4 Way Speech Contest	50	Promote better understanding
Duncan Stewart (Jenks Public School)-4 Way Speech Contest	100	Promote better understanding
Courtney Kayza (Jenks Public School)-4 Way Speech Contest	100	Promote better understanding
Medical Supplies Network	3,200	Haiti Disaster Relief Fund
Rotary International Foundation - Every Rotarian Every Year	2,292	Annual Foundation Drive
Rotary International Foundation - Polio Plus	195	Eradicate Polio Fund
Rotary District 6110 Foundation	900	District Rotary Initiatives
The Little Light House, Tulsa, OK	1,000	Help children w/disability
Tulsa Area Immunization Coalition, Tulsa, OK	1,000	Help immunize children
Happy Hands Education Center	100	School for Children with Hearing Loss
Union Public Schools - Dictionary Project, Tulsa, OK	2,322	Dictionary for 3rd graders
Wheelchair Foundation	371	Purchase of wheelchairs
Union Public School-Roy Clark Elem-Adopt-A-Dad, Tulsa, OK	483	Promote better understanding
University of Tulsa - Art Scholarship, Tulsa, OK	1,000	Art scholarship
<b>Total</b>	<b>14,003</b>	

Statement 3

Form 990EZ, Part V, Line 35 - Explanation of not reporting income on Form

Card Draw - The event involved the sale of tickets to enter a drawing for the chance to draw the winning card. Half of each ticket price goes directly to the Foundation as a contribution. The other half of the ticket sale is accumulated for the eventual winner. The event was excluded because no "income" was generated. Also, all work related to the card draw is performed for the Foundation without compensation.

Bean Supper - The event consisted of members selling tickets to a bean supper. Expenses represented cost of food, facility and door prizes. Net proceeds were designated to fund supported organizations of the Foundation. The event was excluded since it was carried on once and the labor was all volunteer.

Zone Institute - Event consisted of selling hats at Rotary Zone Institute. Expense was for hats. The event was excluded as no income was generated and labor to sell was volunteer.

Sport Ticket Auction - The events consisted of raffling off donated Tulsa area university basketball tickets. The events were excluded because they are not regularly carried on (occurred twice during year), the tickets were donated and the labor to raffle was voluntary.

Statement 4

Schedule A (Form 990EZ), Part I, Line 11(h) - Supported Organizations

(I) Names of Supported Organizations	(II) EIN	(III) Type	(IV) Listed	(V) Notify	(VI) Organized in US	(VII) Amount of Support
Domestic Violence Intervention Services, Tulsa, OK	73-1028332	9	No	Yes	Yes	890
Jamie Odom (Metro Christian School)-4 Way Speech Contest	Student	2	No	Yes	Yes	50
Duncan Stewart (Jenks Public School)-4 Way Speech Contest	Student	2	No	Yes	Yes	100
Courtney Kayza (Jenks Public School)-4 Way Speech Contest	Student	2	No	Yes	Yes	100
Medical Supplies Network	73-1507095	9	No	Yes	Yes	3,200
Rotary International Foundation - Every Rotarian Every Year	36-3245072	9	No	Yes	Yes	2,292
Rotary International Foundation - Polio Plus	36-3245072	9	No	Yes	Yes	195
Rotary District 6110 Foundation	73-6161777	9	No	Yes	Yes	900
The Little Light House, Tulsa, OK	73-0939422	9	No	Yes	Yes	1,000
Tulsa Area Immunization Coalition, Tulsa, OK	73-1511781	9	No	Yes	Yes	1,000
Happy Hands Education Center	73-1425473	9	No	Yes	Yes	100
Union Public Schools - Dictionary Project, Tulsa, OK	73-0998080	2	No	Yes	Yes	2,322
Wheelchair Foundation	94-3353881	9	No	Yes	Yes	371
Union Public School-Roy Clark Elem-Adopt-A-Dad, Tulsa, OK	73-0998080	2	No	Yes	Yes	483
University of Tulsa - Art Scholarship, Tulsa, OK	Student	2	No	Yes	Yes	1,000
						<b>14,003</b>