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Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Treated as a Private Foundation

OMB No 1545-0052 2010

For calendar year 2010, or tax year beginning , and ending G Check all that apply Initial return of a former public charity Final return Initial return Amended return Address change Name change Name of foundation Employer identification number DEXTER G. JOHNSON EDUCATIONAL & 23-7389204 BENEVOLENT TRUST Telephone number (see page 10 of the instructions) 918-588-6407 Number and street (or P O box number if mail is not delivered to street address) Room/suite P.O. BOX 1620 If exemption application is pending, check here City or town, state, and ZIP code 1 Foreign organizations, check here TULSA OK 74101-1620 2. Foreign organizations meeting the Section 501(c)(3) exempt private foundation H Check type of organization 85% test, check here and attach computation Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at X Cash J Accounting method Accrual end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination 4,228,043 (Part I, column (d) must be on cash basis under section 507(b)(1)(B), check here line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (d) Disbursements (b) Net investment expenses per (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal for chantable hooks ıncome ıncome purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ► |X| if the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 97,062 97,062 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets motion line 10 Gross sales price for all assets profile 68 -6,958 ,192,196 7 Capital gain net income (from Part W) ne 2) Net shoft-term capital gain 2011 8 Income hodifications 9 sales less returns & allowance 10a cost of goods sold N b profit of (loss) (attach schedule) c Other income (attach schedule) STMT 1 28,703 28,653 11 118,807 125,715 12 Total. Add lines 1 through 11 0 23,662 13 Compensation of officers, directors, trustees, etc 23,662 Operating and Administrative Expenses 45,000 14 Other employee salaries and wages 45,000 15 Pension plans, employee benefits 16a Legal fees (attach schedule) STMT 2 10,925 10,925 b Accounting fees (attach schedule) C Other professional fees (attach schedule) 17 Interest Taxes (attach schedule) (see page 14 of the instructions) STMT 3 6,284 2,055 18 4,229 19 Depreciation (attach schedule) and depletion 20 3,000 3,000 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Other expenses (att. sch.) STMT 4 6,199 8,800 23 1,985 24 Total operating and administrative expenses. Add lines 13 through 23 95,070 10,855 88,801 25 86,963 Contributions, gifts, grants paid 86,963 10,855 26 Total expenses and disbursements. Add lines 24 and 25 182,033 0 175,764 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -63,226114,860 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

Part	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only (See instructions)	Beginning of year	End of	f year
ган	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing			-
2	Savings and temporary cash investments	155,192	51,367	51,367
3	Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see page 15 of the			
ļ	instructions)			
7	Other notes and loans receivable (att schedule) ▶ 2,872			
	Less allowance for doubtful accounts ▶ 2,872			
8 9 9 10a	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
₹ 10a	Investments—U S and state government obligations (attach schedule) STMT 5	251,750	248,177	246,195
b	Investments—corporate stock (attach schedule)			
С	Investments—corporate bonds (attach schedule) SEE STMT 6	429,498	208,042	210,550
11	Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach sch.) ▶			
12	Investments—mortgage loans			
13	Investments—other (attach schedule) SEE STATEMENT 7	2,767,493	3,033,121	3,635,572
14	Land, buildings, and equipment basis			
1	Less accumulated depreciation (attach sch) ▶ STMT 8 334			
15	Other assets (describe ► SEE STATEMENT 9)	12,670	12,670	84,359
16	Total assets (to be completed by all filers—see the			
+	instructions. Also, see page 1, item l)	3,616,603	3,553,377	4,228,043
17	Accounts payable and accrued expenses			
2 18	Grants payable			
19	Deferred revenue			
19 20 21	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)	ļ		
22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0	9	
S 24	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
일 24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
25 26 27 27 28 29 30 31	Foundations that do not follow SFAS 117, check here ▶ X and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds	3,616,603	3,553,377	
y 28	Paid-in or capital surplus, or land, bldg , and equipment fund		····································	
29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see page 17 of the			
	instructions)	3,616,603	3,553,377	
Ž 31	Total liabilities and net assets/fund balances (see page 17			
<u>L</u>	of the instructions)	3,616,603	3,553,377	
Part				
	I net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree with		
end-	of-year figure reported on pnor year's return)		1_1_	3,616,603
2 Ente	er amount from Part I, line 27a		2	-63,226
3 Othe	er increases not included in line 2 (itemize)		3	
4 Add	lines 1, 2, and 3		4	3,553,377
5 Dec	reases not included in line 2 (itemize) ▶		5	
6_Tota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b),	line 30	6	3,553,377

Part IV Capital Gains a	<u>nd Losses for Tax on Investme</u>	nt Incom	e				
	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)	_		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a INVESTMENT SECU	RITIES			P	VARIO	ous	VARIOUS
_b		·					
С							
d						_	
		l .					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		g) Cost or o plus expens				ı or (loss)) mınus (g)
a 1,192,196	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · ·	1,199,154			-6,958
b							0,330
c					***	-	·
d							
е					-		
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12	2/31/69		(I) G	Sains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col (col (l	k), but not	less than -0-) or om col (h))
а							-6,958
b							· · · · · · · · · · · · · · · · · · ·
С							
d							
e	<u> </u>	! !					
2 Capital gain net income or (net ca	If gain, also enter in lift (loss), enter -0- in lift (loss), enter -0- in lift (loss)		}		2		-6,958
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)						
If gain, also enter in Part I, line 8,	column (c) (see pages 13 and 17 of the in	structions)	¬.				
If (loss), enter -0- in Part I, line 8					3	_	
Part V Qualification Ur	nder Section 4940(e) for Reduc	<u>ed Tax or</u>	<u>Net In</u>	vestment Incor	ne		<u></u>
(For optional use by domestic private	foundations subject to the section 4940(a)) tax on net ii	nvestmen	t income)			
If section 4940(d)(2) applies, leave the	s part blank						
Was the foundation liable for the secti	on 4942 tax on the distributable amount o	f any vear in	the base	nerod?			Yes X No
	fy under section 4940(e) Do not complete		ille base	periou			
	each column for each year, see page 18 of	<u> </u>	one befor	e making any entries			
(a)		r trie iristructi	ons belon		<u> </u>		(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	ns I	Net value o	(c) f noncharitable-use ass	ets		ribution ratio
2009	111/	,432		3,339,		(60) (6) (0.053424
2008		,983		4,101,			0.064852
2007		,594		4,786,	428		0.052773
2006	133	,832		4,416,			0.030301
2005		,971		4,066,			0.028519
2 Total of line 1, column (d)					2		0.229869
•	5-year base period—divide the total on line	2 by 5, or b	y the		-	İ	
<u> </u>	as been in existence if less than 5 years	•	•		3		0.045974
	·						-
4 Enter the net value of nonchantab	ole-use assets for 2010 from Part X, line 5				4		3,770,704
5 Multiply line 4 by line 3					5		173,354
6 Enter 1% of net investment incom	ie (1% of Part I, line 27b)				6	L	1,149
7 Add lines 5 and 6					7	ļ	174,503
							4== ===
8 Enter qualifying distributions from					8		175,764
·	line 7, check the box in Part VI, line 1b, a	ind complete	that part	using a 1% tax rate	See the		
Part VI instructions on page 18							

Form 990-PF (2010)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Form 990-PF (2010)

4a

X

Total number of other employees paid over \$50,000

Form	990-PF (201	0) DEXTER G. JOHNSON EDUCATIONAL &	23-7389204		Page 7
	rt VIII	Information About Officers, Directors, Trustees, Foundation	dation Managers, Highly Paid Em	oloyees,	
		and Contractors (continued)			
3	Five highes	st-paid independent contractors for professional services (see page 2	23 of the instructions). If none, enter "NON	E."	
		(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NO	NE				
					
Tota	number of o	thers receiving over \$50,000 for professional services		•	
					<u> </u>
Pa	rt IX-A	Summary of Direct Charitable Activities			
		's four largest direct charitable activities during the tax year. Include relevant statistica other beneficiaries served, conferences convened, research papers produced, etc.	if information such as the number of	Expe	nses
1	REVIEW	APPLICATIONS TO DETERMINE IF LOW I	NCOME		-
	INDIV	IDUALS NEED FINANCIAL ASSISTANCE WIT	H MEDICAL		
-	EXPENS	SES.			
2					
-					
3					
, -					
7					
Pa	rt IX-B	Summary of Program-Related Investments (see page	e 24 of the instructions)		
De		argest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amoun	t
1	N/A				
-					
2					
AD	other program	related investments. See page 24 of the instructions			
3	omer brogram-	related investments. See page 24 of the instructions			
·					

Form 990-PF (2010)

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

Pa	Irt X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	see page 24 of the instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	3,561,023
b	Average of monthly cash balances	1b	182,744
С	Fair market value of all other assets (see page 25 of the instructions)	1c	84,359
d	Total (add lines 1a, b, and c)	1d	<u>3,</u> 828,126
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	3,828,126
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	57,422
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,770,704
6	Minimum investment return. Enter 5% of line 5	6	188,535
Pa	Irt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private open	erating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	188,535
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	1,149
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	187,386
4	Recoveries of amounts treated as qualifying distributions	4	4,586
5	Add lines 3 and 4	5	191,972
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	191,972
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		4.7.7.7.4
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	175,764
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	175,764
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	1,149
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	174,615
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	1	

Form 990-PF (2010)

Pa	rt XIII Undistributed Income (see page 26 o	f the instructions)			
	1	(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7		· -		191,972
2	Undistributed income, if any, as of the end of 2010				
a	Enter amount for 2009 only			130,134	
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2010		- 	·	
	From 2005				
	From 2006				
	From 2007				
ď	From 2008	- 			
a -		-			
e	From 2009	-			
f .	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$175,764			100 101	
	Applied to 2009, but not more than line 2a			130,134	
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount				45,630
е	Remaining amount distributed out of corpus				· · · · · · · · · · · · · · · · · · ·
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the same		1		
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Pnor years' undistributed income Subtract				 -
	line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions				
e	Undistributed income for 2009 Subtract line				
_	4a from line 2a Taxable amount—see page				
	27 of the instructions		(
f	Undistributed income for 2010 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2011				146,342
7	Amounts treated as distributions out of corpus				-10,542
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	Instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)		- 		
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a			_	
10	Analysis of line 9	1			
а	Excess from 2006				
þ	Excess from 2007	_			
C	Excess from 2008	_			
d	Excess from 2009				
е	Excess from 2010				

Form	990-PF (2010) DEXTER G. JO	HNSON EDUCA	TIONAL &	23-73892	204	Page 10
Pa	ort XIV Private Operating Fou	indations (see pa	ige 27 of the instr	uctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or o					
	foundation, and the ruling is effective for 2	010, enter the date of t	he ruling	•		
b	Check box to indicate whether the foundar	tion is a private operati	ng foundation describe	d in section 4	942(J)(3) or 49	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) T akal
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in	•				
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public			-		
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income		L	<u> </u>	<u> </u>	<u> </u>
Pa	art XV Supplementary Inform	•	-		d \$5,000 or more	e in assets at
	any time during the ye		of the instruction	ns.)		
1	Information Regarding Foundation Mai	_				
а	List any managers of the foundation who			-	the foundation	
	before the close of any tax year (but only	f they have contributed	more than \$5,000) (S	ee section 507(d)(2))		
	N/A	400/ 54				
b	List any managers of the foundation who				ortion of the	
	ownership of a partnership or other entity)	of which the foundatio	n nas a 10% or greate	interest		
_	N/A	0'0 1 0-1	Landilla etc. December			
2	Information Regarding Contribution, G					
		makes contributions to				
	unsolicited requests for funds. If the found			t the instructions) to inc	lividuals or	
	organizations under other conditions, com			ho oddroood		
а	The name, address, and telephone numb	er of the person to who	m applications should	oe addressed		
	BETTY CREWS	N OF 7200E				
	P.O. BOX 850250 YUKO			alanda malada		
Ь	The form in which applications should be	submitted and informat	ion and materials they	snoula include		
	SEE STATEMENT 10					· · · · · · · · · · · · · · · · · · ·
С	Any submission deadlines N/A					
	Any restrictions or limitations on awards,	such as by geographic	al areas chantable field	ls kinds of institutions	or other	
u	factors	as by geographica	a. a. cao, chandon hen	io, milios or iristitutions,	J. 011101	
	N/A					
DAA				· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2010)

Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	ntinued)	turo Payment		
	If recipient is an individual,	Foundation		
Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE ATTACHED STMT				
		MEDICAI	EXPENSE	86,963
,				
Total			▶ 3a	86,963
b Approved for future paymentN/A				
,				
Total			▶ 3b	
DAA				Form 990-PF (2010)

D 1 30 1 1 (2		the state of				- uge in
Part XVI-A			d business income	Evoluder	d by section 512, 513, or 514	(e)
Enter gross am	ounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program se	ervice revenue					the instructions)
		.		ļ		
ь		.		ļ		
				<u> </u>		
d				-		
f		-		 		
	nd contracts from government agencies	-				
	p dues and assessments			 		
	savings and temporary cash investments and interest from securities		·	14	97,062	
	ncome or (loss) from real estate			 	37,002	
	nanced property			 		
	bt-financed property					
	ncome or (loss) from personal property					
7 Other inves				15	28,653	
	ss) from sales of assets other than inventory			18	-6,958	· · · · · · · · · · · · · · · · · · ·
,	or (loss) from special events				,	· ·
	t or (loss) from sales of inventory					
11 Other rever						
b MISC	ELLANEOUS			1	50	
С						
е				ļ		
12 Subtotal A	dd columns (b), (d), and (e)		0		118,807	
	line 12, columns (b), (d), and (e)				13	118,807
	t in line 13 instructions on page 29 to verify calculation					
Part XVI-E						
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpoinstructions.)					the
N/A						
	<u> </u>					
			 		· · · · · · · · · · · · · · · · · · ·	
					· —	
	 	<u>-</u>				
	<u> </u>		· · · · · · · · · · · · · · · ·			
						
			· · · · - · · · · · · · · · · · · ·			
	 					
	 					·
	 					
						

Pai	t XVII	Information Regardanization	_	ansfers To and	d Transaction	ns and Relation	ships With	Noncharitable		
1	Did the ord	janization directly or indir	rectly engage	in any of the follow	wing with any othi	er organization desc	ribed		Yes	No
	_	501(c) of the Code (other		-	-	-			1	
	organizatio		· man cooner	1 00 1 (0)(0) 01 gamz	anono, or in secti	or ozr, relating to p	ontical			1
	•		ation to a nam	abartabla avamat	araaasatsan af					ľ
		from the reporting founda	ation to a non	спантаріе ехетірі	organization of					٠,,
	(1) Cash							<u>1a(</u>		X
	(2) Other	assets						<u>1a(</u>	2)	X
b	Other trans	sactions								
	(1) Sales	of assets to a noncharita	ible exempt o	rganization				16(1)	X
	(2) Purcha	ases of assets from a no	ncharitable e	xempt organization	1			1b(2)	Х
	(3) Rental	of facilities, equipment,	or other asse	ets				1b(Х
		ursement arrangements						1b(х
	•	or loan guarantees						1b(X
		mance of services or me	mbarahin ar	fundroioina oolioito	tions					X
								1b(
	_	facilities, equipment, ma	•	•				10	:	X
		er to any of the above is				-				
	value of the	e goods, other assets, or	r services giv	en by the reporting	foundation If the	e foundation received	d less than fair	market		
	value in an	y transaction or sharing	arrangement	, show in column (d) the value of the	e goods, other asset	s, or services	received		
	Line no	(b) Amount involved	(c) Name	of noncharitable exer	npt organization	(d) Description	of transfers, tra	nsactions, and sharing arrai	ngements	
<u> </u>	•									
				·			•			
			1				 			
				· - · · · · ·						
										
									_	
2a	ls the found	dation directly or indirect	lv affiliated w	ith or related to or	ne or more tax-ex	emnt organizations				
		in section 501(c) of the C	•			. •			v T	٠,٨ [
		emplete the following sch		1811 3001011 301(0)((3)) or in section (,21			Yes X	j INO
		a) Name of organization	eduic	(b) Type of o	reasuration		(c) Decemb	ion of relationship		
N	/A	a) Name of organization		(b) Type or c	ngamzadon		(C) Descript	on or relationship		
	<i>/ F</i> .									
										
		 								
				L						
	Under p	penalties of perjury, I declare	that I have exa	amined this return, inc	luding accompanyir	ig schedules and staten	nents, and to the	best of my knowledge and		
Sign	belief, if	is true cornect and comple	te Declaration	of preparer (other tha	an taxpayer or fiduci	ary) is based on all info	mation of which	preparer has any knowledge	•	
lere				1	8/	25/11 \	OFFI	CER		
	Sig	nature of officer or trustee			Date		Title			
	Print/	Type preparer's name			Preparer's signat	ure 🙃		Date		$\overline{\Box}$
aid		At a brahaman a manna			, topa.or o digital	\sim		2 / /	Check	∐ lf
	FOR MADE	R. DYER			1 500	ノメクカ		8/12 /	self-em	pioyea
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oc U	- T				JITE 200			PTIN PU017 Firm's EIN ▶ 73-13		
	Firm's				73102-225	.1	}	405.0		
		UKLIAR	IUMA LI	II. UR A	131UZ~ZZ3) <u>L</u>		Phone no 405-2	39-/	40

	Adjusted Net Income	Charitable Purpose \$ 10,925 \$ 10,925	Charitable Purpose \$ 4,229	Charitable Purpose \$ 649 1,336
	- Other Income 653 \$ 28,653 703 \$ 28,653	Adjusted Net	Adjusted Net	Adjusted Net S
Statements	1 - Form 990-PF, Part I, Line 11 - Other Revenue per Books \$ 28,653 \$ 50 \$ 50	Part I, Line 16b - Accounting Fees Net Investment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Net line 18 - 2, 055 2, 055 2, 055	Net Net Sament Same Sament Same Sament Same Sament Same Sament Same Sament Same Sament S
Federal	Statement 1 - Form 990-P	Statement 2 - Form 990-PF, Total \$ 10,925	Statement 3 - Form 990-PF, Total \$ 2,055 \$ 4,229 \$ \$ 6,284 \$	Statement 4 - Form 990-PF, Total \$ 649 -4,586 1,336 8,800 \$ 6,199
23-7389204	Description OIL & GAS ROYALTIES MISCELLANEOUS TOTAL	State Description INDIRECT ACCOUNTING FEES TOTAL	Description GROSS PRODUCTION TAXES PAYROLL TAXES TOTAL	Description EXPENSES INSURANCE BAD DEBTS NET OF RECOVERIES OFFICE SUPPLIES MINERAL INTEREST FEES TOTAL

Government Investments
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Form
Statement 5

Description		Beginning of Year		End of Year	Basis of Valuation	Fair	Fair Market Value
FHLB - 6/17/2013	ጭ	100,000	ዏ	0	COST	٠	
FHLM - 10/13/2028 FHLB - 03/16/2016		50,000		48,243	COST		4 / , 944
FHLB - 2/10/2020		•		50,000	COST		50,217
FHLB - 10/26/2016				50,000	COST		48,522
FNMA - 11/4/2013				50,020	COST		49,391
FHLMC - 1/28/2025				49,912	COST		50,121
TOTAL	\$	251,750	တ	248,177		S	246, 195

Statement 6 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description		Beginning of Year		End of Year	Basis of Valuation	u.	Fair Market Value
CWALT SER - 12/25/2035	w	53,257	\ \	47,487	COST	ۍ پ	40,721
EMERSON ELECTRIC - 12/15/2014		60,836		60,836	COST		66,518
GENERAL ELECTRIC CAP CORP		25,000		25,000	COST		25,916
HOUSEHOLD FINANCE - 10/15/2011		74,719		74,719	COST		77,395
TARGET CORP - 8/15/2010		162,552			COST		
SOUTHWESTERN BELL TELCO - 9/29/2010		53,134			COST		
TOTAL	တ တ	429,498	က	208,042		် က	210,550

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

		Beginning		End of		<u> </u>	air Market
Description		of Year	ı	Year			Value
AMER BEACON LG CAP VAL-INST FD#0066	ዏ	352,944	‹ ›	362,945	COST	V)-	436,886
AMER BEACON INT'L EQ-INST FD#0067		98,639					
AMERICAN GRTH FD OF AMER F2 FD#0605		272,033		272,032			423,857
ARTISAN MID CAP VALUE FD#1464		194,976		198,678			236,630
HARBOR INTERNATIONAL-INSTL FD#2011		62,790		62,790			114,067
LAZARD EMRG MKTS PORT-IN FD #0638		236,096		236,096			283,722
MFS INTL NEW DISCOVERY FD #0874		126,186		126,186			110,250
PIMCO COMMOD RR STRAT-INS FD#0045		276,221		276,222			218,840
PIMCO TOTAL RETURN-INST FD #0035		225,000		225,000			229,183
TEMPLETON GLOBAL BD-ADV FD#0616		100,000		200,000			210,208

Federal Statements

23-7389204

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments (continued)

Description		Beginning of Year		End of Year	Basis of Valuation		ar Market · Value
VANGUARD EXPLORER FD-ADM #5024 VANGUARD INSTITUTIONAL INDEX #0094	ς	127,652	ᡐ	127,652	COST	ᡐ	175,369.
VANGUARD MIDCAP GWTH IN-INV FD#0832		149,881		149,881	1000 1000 1000 1000		267,419 267,419
VANGUARD SM CP VI IDX- INST FD #0865 CAVANAL HILL SH TM INC-INST FD#0504		172,390		172,390	COST		192,309
VANGUARD INTERMED INDX-INST FD #0504 WM BLAIR INTL GROWTH-I FD #1747				50,000	COST		50,179 50,179 90,617
TOTAL	· ω	2,767,493	φ.	3,033,121		w 	3,635,572

Statement 8 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Net FMV		0
	ᡐ	ς
d Accumulated Depreciation	334	334
End Ac Depr	တ	S
End Cost / Basis	334	334
Cost	တ	ς, W
Jinning t Book		0
Bec	တ	w w
Description	EQUIPMENT	TOTAL

23-7389204

Federal Statements

Statement 9 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year		End of Year		Fair Market Value
OIL & GAS MINERALS	\$ 12,670	\$_	12,670	\$_	84,359
TOTAL	\$ 12,670	\$_	12,670	\$_	84,359

Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

PART XV, LINE 2(B) AND 2(D):

THE APPLICATION SHOULD INCLUDE FINANCIAL INFORMATION, FAMILY HISTORY, PHYSICAL CONDITION, AGE, EDUCATION GOALS AND OTHER DATA NECESSARY TO SHOW NEED FOR LOAN OR AN OUTRIGHT GRANT.

ASSIST BY OUTRIGHT GRANTS OR LOANS TO PHYSICALLY HANICAPPED CHILDREN, YOUNG MEN OR WOMEN IN OBTAINING:

- 1. CORRECTIVE SURGERY AND HOSPITALIZATION;
- 2. NECESSITIES OF LIFE WHILE IN CONVALESCENCE;
- 3. VOCATIONAL TRAINING TO ENABLE THEM TO EARN THEIR OWN LIVING

TO PROVIDE A STUDENT LOAN FUND TO MAKE LOANS TO DESERVING STUDENTS WHO DO NOT POSSESS AND CANNOT OBTAIN FUNDS ELSEWHERE TO COMPLETE THEIR EDUCATION IN OKLAHOMA HIGH SCHOOLS, OKLAHOMA STATE UNIVERSITY, OKLAHOMA CITY UNIVERSITY AND THE UNIVERSITY OF OKLAHOMA, GIVING PREFERENCE TO THE FOLLOWING:

- 1. PHYSICALLY HANDICAPPED STUDENTS
- STUDENTS WHO BY MISFORTUNE OR CALAMITY CANNOT COMPLETE THEIR EDUCATION.

DEXTER JOHNSON EDUCATION & BENEVOLENT TRUST FORM 990-PF, LINE 25, CONTRIBUTIONS, GIFTS, GRANTS PAID 12/31/2010

<u>Name</u>	Relationship	Foundation Status	Purpose	Amount
Broadbent, Parker Hearts for Hearing	N/A	Public	Benevolent	4,075
Cameron, Robert Blake OU Graduates Orthodontics Kevin S. Smith, DDS	N/A	Public	Benevolent	4,836
Casas, Elena Kevin S. Smith, DDS	N/A	Public	Benevolent	2,352
Chaves, Jasper Hearts for Hearing	N/A	Public	Benevolent	1,966
Davis, Marissa Hearts for Hearing	N/A	Public	Benevolent	7,176
Graf, Issac Hearts for Hearing	N/A	Public	Benevolent	2,500
Hamm, Robert III Kevin S. Smith, DDS	N/A	Public	Benevolent	1,398
John, Emma Hearts for Hearing	N/A	Public	Benevolent	4,800
Kerr, Harrison Hearts for Hearing	N/A	Public	Benevolent	4,500
Krupa, Sydney Hearts for Hearing	N/A	Public	Benevolent	5,250
Murray, Gabriel Hearts for Hearing	N/A	Public	Benevolent	10,756
Ramirez, Jordan Hearts for Hearing	N/A	Public	Benevolent	2,450
Seibel, Luke Hearts for Hearing	N/A	Public	Benevolent	7,176
Sing, Jasmyne Kevin S. Smith, DDS	N/A	Public	Benevolent	1,957
Smith, Audrey Kevin S. Smith, DDS	N/A	Public	Benevolent	1,594
Steelman, Elijah Kevin S. Smith, DDS	N/A	Public	Benevolent	3,353

Kevin S. Smith, DDS	N/A	Public	Benevolent	3,427
Kevin S. Smith, DDS - Refund	N/A	Public	Benevolent	(3,427)
Stuth, Waylon				
Metro Anethesia Services	N/A	Public	Benevolent	600
Surgery Center of Oklahoma	N/A	Public	Benevolent	2,440
Children's Eye Care Clinic	N/A	Public	Benevolent	3,000
Waddell, Jack				
Kevin S. Smith, DDS	N/A	Public	Benevolent	6,989
Kevin S. Smith, DDS	N/A	Public	Benevolent	364
Watson, Nora				
Hearts for Hearing	N/A	Public	Benevolent	3,500
Winchester, Harrison				
Hearts for Hearing	N/A	Public	Benevolent	3,931
				86,963

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Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMR No. 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization **Employer identification number** Type or DEXTER G. JOHNSON EDUCATIONAL & print 23-7389204 BENEVOLENT TRUST File by the due date for Number, street, and room or suite no. If a P O. box, see instructions filma your P.O. BOX 1620 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions OK 74101-1620 04 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Application Return Return Code Is For Code Is For 01 Form 990-T (corporation) Form 990 07 Form 990-BL 02 Form 1041-A NΑ 03 Form 4720 Form 990-EZ 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 Form 990-T (trust other than above) 12 The books are in the care of ▶ BANK OF OKLAHOMA Telephone No. ▶ 918-588-6407 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box I if it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15/11, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS

(Electronic Federal Tax Payment System). See instructions.

3b \$

Comparison of the payment overpayment with this form, if required, by using EFTPS

(Electronic Federal Tax Payment System). See instructions.

3c \$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

, and ending

calendar year 2010 tax year beginning

Change in accounting period

nonrefundable credits. See instructions.

If this tax year entered in line 1 is for less than 12 months, check reason:

1,000

1,000

Final return

3a

Initial return

Form 8868 (Rev. 1-2011)	······				Page 2	
 If you are filing for an Additional (Not Automatic) 3-Month Ext 	tension, com	plete only Part II and check this box			► X	
Note. Only complete Part II if you have already been granted an auto	omatic 3-mor	nth extension on a previously filed Form 8	8868			
If you are filing for an Automatic 3-Month Extension, complete						
Range Additional (Not Automatic) 3-Month Ex	tension o	f Time. Only file the original (n	o copie	<u>s needed)</u>	·	
Type or Name of exempt organization			Employ	er identifica	tion number	
print DEXTER G. JOHNSON EDUCAT	IONAL 8	*				
File by the BENEVOLENT TRUST			23-7	389204	<u>.</u>	
extended Number, street, and room or suite no. If a P O box, due date for	see instructi	ons				
P.O. BOX 1620	· · · · · · · · · · · · · · · · · · ·					
return See City, town or post office, state, and ZIP code For a	-					
Instructions TULSA OF	K 74101	1620			,	
Enter the Return code for the return that this application is for (file a	separate app	elication for each return)			04	
Application	Return	Application		····	Return	
Is For	Code	Is For			Code	
Form 990	01					
Form 990-BL	02	Form 1041-A			08	
Form 990-EZ	03	Form 4720			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.						
BANK OF OKLAHOMA, N.	Α.					
BANK OF OKLAHOMA TOW	ER					
The books are in the care of ▶ TULSA				OK	74101	
Telephone No ▶ 918-588-6407	FAX No.	▶				
• If the organization does not have an office or place of business i	in the United	States, check this box			▶ 🗌	
If this is for a Group Return, enter the organization's four digit Group Return, enter the organization's four digit Group Return, enter the organization's four digit Group Return, enter the organization of the content of the	roup Exempti	on Number (GEN) If this is	s		_	
for the whole group, check this box 🛒 🕨 📙 . If it is for par	t of the group	o, check this box	attach a			
list with the names and EINs of all members the extension is for.				·		
••••	/15/11					
5 For calendar year 2010, or other tax year beginning		, and ending				
6 If the tax year entered in line 5 is for less than 12 months, che	ck reason:	Initial return Final return				
Change in accounting period						
7 State in detail why you need the extension						
ADDITIONAL TIME IS REQUESTED	IO GATI	HER INFORMATION TO P	REPAI	E A CC	MPLETE	
AND ACCURATE RETURN.						
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or	6069, enter t	the tentative tax, less any		ŀ		
nonrefundable credits. See instructions.			8a	\$	1,149	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, er	-					
estimated tax payments made Include any prior year overpay	ment allowed	d as a credit and any			4 600	
amount paid previously with Form 8868.			8b	\$	1,679	
c Balance Due. Subtract line 8b from line 8a. Include your payr	nent with this	form, if required, by using EFTPS		1.	•	
(Electronic Federal Tax Payment System). See instructions.		3.34 ****	8c	\$	0	
Under penalties of perjury, I declare that I have examined this form, including a true, correct, and complete, and that I am authorized to prepare this form	•	nd Verification schedules and statements, and to the best of m	y knowledg	e and belief, it i	s	
Signature Male D	т	ite ▶ CPA FOR THE TAXP	AYER	Date D	3/9/11	
· (V)				Form	8868 Rev 1-2011)	