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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2010

For c	calendar year 2010, or tax year beginning	DEC	1, 2010	, and ending	NOV 30, 2011	
G C	Check all that apply Initial return		Initial return of a fo	· · · ·	Final return	
	Amended return		Address chang	je <u> </u>	Name change	
Nar	ame of foundation NORTHWEST OKLAHOMA	OS	ͲϜΛΡΔͲΗΤϹ		A Employer identification	number
	FOUNDATION	. 05	IEOFAIIIC		73-0622115	
Nun	imber and street (or P.O. box number if mail is not delivered	to street	address)	Room/suite	B Telephone number	
	4125 WEST OWEN K G	ARR	IOTT RD	A-1	580 234-60	61
City	ty or town, state, and ZIP code				C If exemption application is p	ending, check here
	ENID, OK 73703-94	46			D 1. Foreign organizations	, check here
H_C			empt private foundation		Foreign organizations me check here and attach co	eting the 85% test, mputation
<u> </u>	Section 4947(a)(1) nonexempt charitable trust				E If private foundation stat	
	Fair market value of all assets at end of year J Ac			X Accrual	under section 507(b)(1)	
	from Part II, col. (c), line 16) \$\Bigs\\$ 3,490,981. (Part)		her (specify)	nacis)	F If the foundation is in a (
	art Analysis of Revenue and Expenses	1, 0010			under section 507(b)(1)	(d) Disbursements
re	(The total of amounts in columns (b), (c), and (d) ma necessarily equal the amounts in column (a))	y not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received		101,174.	·····		(January Control
	2 Check if the foundation is not required to attach S	ch B	, - · - •			
	3 Interest on savings and temporary cash investments		11,838.	11,838.	11,838.	STATEMENT 1
	4 Dividends and interest from securities		56,246.	56,246.		STATEMENT 2
	5a Gross rents		15,088.	15,088.	15,088.	STATEMENT 3
	b Net rental income or (loss)15,08	<u>8.</u>		······	• • • • • • • • • • • • • • • • • • •	
<u>•</u>	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 220 27		33,858.			STATEMENT 4
Revenue	b Gross sales price for all 330, 37	<u>0.</u>		33,358.	——————————————————————————————————————	}
Rev	7 Capital gain net income (from Part IV, line 2)	JE.	701	33,338	0.	
	8 Net short-term capital-gain	,		***************************************	•	
	9 Income modifications 10a Gross sales less returns O Gross sales less returns	301	. 101	······································		
	10a and allowances b Less Cost of goods sold	101				<u> </u>
	c Gross profit or (loss)					
	11 Other income		59,072.	2,602.	59,072.	STATEMENT 5
	12 Total. Add lines 1 through 11		277,276.	119,132.		
	13 Compensation of officers, directors, trustees, etc		3,275.	0.		0
	14 Other employee salaries and wages		122,274.	22,747		0
ç	15 Pension plans, employee benefits		48,921.	9,784.	14,676.	0
Expenses	16a Legal fees					
Хре	b Accounting fees C Other professional fees STMT	6	40,121.	34,789	2,000.	0
ė E	c Other professional fees STMT	U	40,121.	34,703	2,000.	
Administrative	18 Taxes STMT	7	10,439.	1,900	3,787.	0
istr	19 Depreciation and depletion	•	13,166.	2,633.		
Ē	20 Occupancy		14,300.	0.		0
Ad	21 Travel, conferences, and meetings		16,726.	3,340.		0
and	22 Printing and publications					
		8	104,628.	2,487.	95,930.	0
Operating	24 Total operating and administrative		0.00 0.00	nn 200	105 610	
O De	expenses. Add lines 13 through 23		373,850.	77,680.	185,612.	55 044
_	25 Contributions, gπs, grants paid		55,844.			55,844
	26 Total expenses and disbursements.		429,694.	77,680	185,612.	55,844
	Add lines 24 and 25 27 Subtract line 26 from line 12		429,094.	11,000	103,012.	33,044
	27 Subtract line 25 from line 12:	_	-152,418.			
	b Net investment income (if negative, enter -0-)	.5		41,452	•	
	c Adjusted net income (if negative, enter -0-)			_ , _ _	0.	
0225						

NORTHWEST OKLAHOMA OSTEOPATHIC

Form 990-PF (2010)

FOUNDATION

73-0622115

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	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-sear amounts only	Beginning of year	End of	f year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing .	-348.	102.	102.
	2	Savings and temporary cash investments	43,664.	22,171.	22,171.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶	1,608.		
	4	Pledges receivable -			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
şţ	8	Inventories for sale or use	2,755. 5,527.	3,275. 5,891.	3,275. 5,891.
Assets	9	Prepaid expenses and deferred charges	5,527.	5,891.	<u>5,891.</u>
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13		3,273,708.	3,136,186.	3,120,995.
	14	Land, buildings, and equipment basis \triangleright 560, 445.	251 512	222 545	222 545
		Less accumulated depreciation 221,898.	351,713.	338,547.	338,547.
	15	Other assets (describe			
		-	2 670 627	2 506 172	2 400 001
	1.	Total assets (to be completed by all filers)	3,070,027.	3,506,172. 14,734.	3,490,981.
	17	· · · · · · · · · · · · · · · · · · ·	20,703.	14,/34.	
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
Ë	21	Other liabilities (describe STATEMENT 11)	40,250.	35,957.	
		Other habilities (describe)		00,757,0	
	23	Total liabilities (add lines 17 through 22)	66,955.	50,691.	
_	1	Foundations that follow SFAS 117, check here		· · · · · · · · · · · · · · · · · · ·	
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	3,611,672.	3,455,481.	
au	25	Temporarily restricted			
B	26	Permanently restricted			
Net Assets or Fund Balanc		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Ž	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances	3,611,672.	3,455,481.	
_	31	Total liabilities and net assets/fund balances	3,678,627.	3,506,172.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)	••	1	3,611,672.
2	-	r amount from Part I, line 27a		2	-152,418.
3		r increases not included in line 2 (itemize)	SEE STA	ATEMENT 9 3	1,424.
-		lines 1, 2, and 3		4	3,460,678.
5		eases not included in line 2 (itemize) INCOME TAX EXP	ENSE	5	5,197.
6		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	3,455,481.
			·		Form 990-PF (2010)

Part IV Capital Gains and Losses for Tax on Investment Income

Page 3

2-story brick warehouse, or common stock, 200 shs. MLC Co)			P - Purchase		c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr)	
	WARD JONES INVESTMENTS WARD JONES INVESTMENTS P VAR WARD JONES INVESTMENTS P VAR				ARIOUS	VARIOUS	
				ARIOUS	VARIOUS		
c CAPITAL GAINS I	DIVIDENDS						
đ							
		,					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain or (loss (e) plus (f) minus	
a 35,969.			35,96	9.			0.
b 287,830.			260,54	3.			27,287.
c 6,071.							6,071.
d							
. 6							
Complete only for assets showing	gain in column (h) and owned by t	the foundation	on 12/31/69			Sains (Col. (h) gain	
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (J), If any			k), but not less tha Losses (from col	
<u>a</u>							0.
b							27,287.
С							6,071.
d							
В							
2 Capital gain net income or (net cap	ortal loss) If gain, also enter	n Part I, line : in Part I, line :	7 7	} 2			33,358.
3 Net short-term capital gain or (loss	•						
If gain, also enter in Part I, line 8, c		- (-))			
If (loss), enter -0- in Part I, line 8			- <u>-</u>	<u> </u>			0.
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	<u>Investme</u>	nt Inco	me	
If section 4940(d)(2) applies, leave the Was the foundation liable for the section of the sectio	on 4942 tax on the distributable am	mplete this pa	rt				Yes X No
(a) Base penod years	(b)			(c)		Distri	(d) bution ratio
Calendar year (or tax year beginnin			Net value of nor			(col (b) dr	vided by col (c))
2009		2,763. 2,415.		3,428 3,060			.041640
2008		$\frac{2,415}{4,645}$.		3,848			.030194
2007		5,496.		4,748		<u> </u>	.026429
2006		$\frac{3,430.}{1,311.}$		4,288			.021294
2003		1/3110		1/200	, 0 1 1 •	1	.021254
2 Total of line 1, column (d)						2	.219504
3 Average distribution ratio for the 5	-vear base period - divide the total c	on line 2 by 5.	or by the number	of vears			
the foundation has been in existen-		o _ 0,	or by the name or	J. , Jul. J		3	.043901
4 Enter the net value of noncharitable	e-use assets for 2010 from Part X, I	line 5				4	3,287,937.
5 Multiply line 4 by line 3						5	144,344.
							415
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6	415.
7 Add lines 5 and 6						,	144,759.
7 Add lines 5 and 6						7	144,133.
8 Enter qualifying distributions from	Part XII, line 4			_		8	99,213.
· · · ·	line 7, check the box in Part VI, line	1b. and comp	lete that part using	a 1% tax rate	,	***************************************	*
See the Part VI instructions			and part daily		· 		. <u>.</u>
							000 DE (00.00)

NORTHWEST OKLAHOMA OSTEOPATHIC

73-0622115 Form 990-PF (2010) FOUNDATION Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here And enter N/A on line 1 __ (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 829. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here \(\bigs \) and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 829 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-5 Credits/Payments 3,500. a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a b Exempt foreign organizations - tax withheld at source 6b 6c c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 3,500. 7 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 2,671 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 900 . Refunded ▶ 11 11 Enter the amount of line 10 to be Credited to 2011 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х any political campaign? 1a 16 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. X c Did the foundation file Form 1120-POL for this year? 16 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 • (2) On foundation managers ▶ \$ (1) On the foundation > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? X 7 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) OK b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X 8b of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10

NORTHWEST OKLAHOMA OSTEOPATHIC 73-0622115 Page 5 Form 990-PF*(2010) FOUNDATION Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X section 512(b)(13)? If "Yes." attach schedule (see instructions)... 11 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before X August 17, 2008? 12 X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 N/A Website address 14 The books are in care of ► STEVE WHITFILL Telephone no ▶580-234-6071 ZIP+4 ▶73703 Located at ▶4125 W. GARRIOTT, STE. A-1, ENID, 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 No 16 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, Yes X 16 securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X 1c before the first day of the tax year beginning in 2010? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(i)(3) or 4942(i)(5)). a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning 🗌 Yes 💢 No before 2010? If "Yes," list the years ▶ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A 2b statement - see instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time ___ Yes X No during the year? b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, N/A Form 4720, to determine if the foundation had excess business holdings in 2010.) 3b

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4a

X

X

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

orm 990-PF (2010) F'OUNDA'I' LON			<u> 73-06221</u>	15 Pag	ge 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a, During the year did the foundation pay or incur any amount to		_			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indir				
any voter registration drive?	•		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	? .	Ye	ıs 🗓 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t				
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations	4-		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	еге				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		_ /			
expenditure responsibility for the grant?	. N	I∕A . ∐_Ye	s No		
If "Yes," attach the statement required by Regulations section 53.494	5-5 <i>(d</i>).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?	•	Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ļ	6b .	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/		
Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their	componentian				
List an officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evnan	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expen	ther
	to position	enter -0-)	compensation	allowance	es
SEE STATEMENT 12		2 275	0.		Ο.
SEE STATEMENT 12		3,275.	0.	<u> </u>	<u>.</u>
		1			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "			
	(b) Title, and average	enter HOHE.	(d) Contributions to	(e) Expen	ISB
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, ot	ther
STEVE WHITFILL	ADMINISTRATOR		compensation	allowance	55
1502 OSAGE, ENID, OK 73703	40.00	107,493.	30,634.		Ο.
1302 OBAGE, ENID, OR 73703	40.00	107,493.	30,034.		<u>.</u>
		 			
	<u> </u>	 			
· · · · · · · · · · · · · · · · · · ·					
		-			
Catal number of other amployees paid over \$50,000		1		L	0
CATAL COLUMN OF OTHER EMPLICACE ASIA AVAI \$511 (1111)			- '		

NORTHWEST OKLAHOMA OSTEOPATHIC

73-0622115 Form 990-PP (2010) Page 7 **FOUNDATION** Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficianes served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A

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3

All other program-related investments. See instructions

Total. Add lines 1 through 3

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations	, see 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	3,305,212.
	Average of monthly cash balances	1b	32,795.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	3,338,007.
	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	3,338,007.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	50,070.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,287,937.
6	Minimum investment return. Enter 5% of line 5	6	164,397.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	
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)		
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	99,213.
þ	Program-related investments - total from Part IX-B	1b	0.
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	
b	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	99,213.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	99,213.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies f	or the section

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2009	2009	2010
1 Distributable amount for 2010 from Part XI,				
line 7 .			***************************************	
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only				••••••••••••••••••••••••••••••••••••••
b Total for prior years				
			······································	
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	• • • • • • • • • • • • • • • • • • • •			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ▶ \$				
a Applied to 2009, but not more than line 2a			······································	
b Applied to undistributed income of prior				
years (Election required - see instructions)			······································	<u></u>
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus			·,·,, ,,···	
5 Excess distributions carryover applied to 2010	·············			
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior 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 instructions				
e Undistributed income for 2009. Subtract line				
4a from line 2a Taxable amount - see instr				
f Undistributed income for 2010 Subtract	¥			
lines 4d and 5 from line 1 This amount must			,	
be distributed in 2011			•	
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2006	1			
b Excess from 2007	1			
c Excess from 2008	1			
d Excess from 2009	1			
e Excess from 2010		<u></u>	<u> </u>	5 000 DF (0040)

NORTHWEST OKLAHOMA OSTEOPATHIC 73-0622115 FOUNDATION Form 990-PF (2010) Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling X 4942(i)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (e) Total (d) 2007 (a) 2010 (b) 2009 (c) 2008 income from Part I or the minimum investment return from Part X for 0 161,291. 0. 161,291 0 each year listed 137,097. Ō 137,097. 0 0 **b** 85% of line 2a c Qualifying distributions from Part XII. 726,069. 99,213 146,260 92,415 388,181 line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of 0 0 0 0 0. exempt activities e Qualifying distributions made directly for active conduct of exempt activities 99,213. 146,260. 92,415. 388,181. 726,069. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter 3,894,348. 3,797,617. 3,199,979. 14,382,925. 3,490,981. (1) Value of all assets (2) Value of assets qualifying 3,199,979.14,382,925. 3,797,617. 3,490,981. 3,894,348. 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 0. listed c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 0. 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in 0. section 4942(j)(3)(B)(iii) (3) Largest amount of support from 0. an exempt organization . (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
 - Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.
 - a The name, address, and telephone number of the person to whom applications should be addressed
 - b The form in which applications should be submitted and information and materials they should include
 - c Any submission deadlines:
 - d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form 990-PF (2010)

FOUNDATION

73-0622115 Page 11

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the You		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year ENID COMMUNITY CLINIC 1106 E. BROADWAY ENID, OK 73701	NONE	PUBLIC CHARITY	endowment	48,000.
INTEGRIS BASS BAPTIST HEALTH CENTER P.O. BOX 3168 ENID, OK 73702	NONE	PUBLIC CHARITY	DONATION	1,035.
MISCELLANEOUS CHARITIES ENID, OK 73701	NONE	PUBLIC CHARITY	DONATION	3,709.
OKLAHOMA STATE UNIVERSITY FOUNDATION 400 S. MONROE STILLWATER, OK 74075	NONE	PUBLIC FOUNDATION	ENDOWED SCHOLARSHIP FUND	2,000.
OKLAHOMA EDUCATIONAL FOUNDATION FOR OSTEOPATHIC MEDICINE - 4848 N. LINCOLN BLVD	NONE	PUBLIC FOUNDATION	SCHOLARSHIP	600.
OKLAHOMA OSTEOPATHIC ASSOCIATION 4848 N. LINCOLN BLVD OKLAHOMA CITY3, OK 73105	NONE	PUBLIC CHARITY	DONATION	500.
Total			▶ 3a	55,844.
b Approved for future payment				
NONE				
Tabl			▶ 3b	0.
Total		.	<u> </u>	

Part XVI-A Analysis of Income-Producing Activities

Form 990-PF*(2010)

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		led by section 512, 513, or 514	(6)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a PROGRAM FEES			1 1		53,890.
b					
C					
d					
e		"	1 1		
1			<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					2,580.
3 Interest on savings and temporary cash					
investments			14	11,838.	
4 Dividends and interest from securities			14	11,838. 56,246.	
5 Net rental income or (loss) from real estate			1		
a Debt-financed property					
b Not debt-financed property			16	15,088.	·
6 Net rental income or (loss) from personal	}		 		
property					
7 Other investment income	<u> </u>		15	2,602.	
8 Gain or (loss) from sales of assets other			 		
than inventory			14	6,071.	27,787.
9 Net income or (loss) from special events			+	0,0,11	2,7,0,0
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue			1		
			1		
a			 		
b			+ +		
<u> </u>	-		1		
d					
40 Cubbahi Add aslumas (b) (d) and (s)		0.		91,845.	84 257
12 Subtotal Add columns (b), (d), and (e)	<u>L</u>		<u> </u>	13	84,257. 176,102.
13 Total. Add line 12, columns (b), (d), and (e)				13	170,102.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of E	kempi	t Purposes	
Line No. Explain below how each activity for which incom	no ic ranostad	in column (a) of Part VI/I-A	contrib	uted importantly to the accomi	olichment of
the foundation's exempt purposes (other than b			COILLID	uted importantly to the accomp	phoninent of
1 PROGRAM FEES & MEMBERSH			יית.דע:	H AND EDUCATIO	N PROGRAMS
AND SERVICES TO LOW-INC			MIL	I AND EDUCATIO	I I NOGIVERO
AND DERVICED TO LOW-INC	OHL III	DIVIDORIO	-		
					
		 			
		<u></u>			
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		· · ·			
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					4. t t.
					

NORTHWEST OKLAHOMA OSTEOPATHIC

Form 990-PF*(2	010) FOUND	ATION					73-062	2115	Pa	ge 13
Part XVII	Information Re Exempt Organ	-	sfers To a	nd Trans	actions a	and Re	lationships With Noncha	ritable)	
1 Did the or	ganization directly or indi	rectly engage in any	of the followin	g with any oth	ier organizatio	on descrit	oed in section 501(c) of		Yes	No
the Code ((other than section 501(c))(3) organizations) o	r ın section 52	7, relating to p	political organ	ıızatıons?				
a Transfers	from the reporting found:	ation to a noncharital	ble exempt or	ganization of.						
(1) Cash								1a(1)		<u>X</u>
(2) Other	assets	•	•	•				1a(2)		X
b Other tran	sactions									
	of assets to a noncharita							16(1)		<u>X</u>
, ,	nases of assets from a no	•	rganization					1b(2)		X
	il of facilities, equipment,		•				•	1b(3)		X
	bursement arrangements	•						1b(4)		X
	s or loan guarantees							1b(5)		X
• •	rmance of services or me	· ·	-					1b(6)		X
•	f facilities, equipment, ma	-			(h) ah awid ah			10		
	-		-			-	w the fair market value of the goods, transaction or sharing arrangement, s		ers,	
	s given by the reporting it I) the value of the goods,			eu 1699 illali la	III IIIaikel vail	Je ili aliy i	transaction or snaring arrangement, s	JIOW III		
	(b) Amount involved		noncharitable	exempt orga	nization	(4)	Description of transfers, transactions, and	shanno an	angeme	nts
(4) 2.110 110	(5) /	(0) 1141110 01	N/A	oxompt orga			y beautifuel of dallotter, dallottering, and	onamy an	ango mo	
										
		1	-							
						_				
										
	ndation directly or indirec	-			exempt organi	izations d	escribed	¬ _v ,,	X	ا ا
	501(c) of the Code (othe)(3)) or in sect	10n 52/?			L	Yes	Δ	1 NO
D II Yes, Co	omplete the following sch (a) Name of org			(h) Type of	organization	T	(c) Description of relations	hin		
	N/A	Junization.		(6) 1) 10 01	organization .		(c) boothpass of foldations			
						<u> </u>				
			·· ·							
Unde	penalties of perjury, I declar	e that I have examined the	his return, includ	ing accompanyir	ng schedules an	d statemen	its, and to the best of my knowledge and be	lief, it is tru	ie, corre	ct,
Sign ""	complete Declaration of prepa	arer (other than taxpayer	or nauciary) is bi	ased on all infor			as any knowledge			
Here	Theren C	Juit	_		1-31-1	2	EXECUTIVE DO	RECTO	M.	
	Signature of officer or tru		,		Date		Title			
	Print/Type preparer's na	ame	Preparer's s	ignature		Date	Check rf PTIN			
			11.1	Brye	CDA	/-2	27-(2 self- employed			
Paid	CHERYL BRY									
Preparer	Firm's name ► COL	LINS, BUT	LEK &	CO., P	.C.		Firm's EIN ►			
Use Only	Firm's address > 0.0	1 WATE	ATE							
	Firm's address > 90	ID, OK 73		a a			Phone no (580)233	_11	41
	l EN	ILU OK 13	,,01-30					m 990		
							11		(01

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

Employer identification number

2010

NORTHWEST OKLAHOMA OSTEOPATHIC 73-0622115 FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation X 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. J For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
NORTHWEST OKLAHOMA OSTEOPATHIC
FOUNDATION

Employer identification number 73-0622115

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	INTEGRIS BASS BAPTIST HOSPITAL 600 S. MONROE ENID, OK 73701	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page

of

of Part II

Name of organization
NORTHWEST OKLAHOMA OSTEOPATHIC
FOUNDATION

73-0622115

Employer identification number

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) of Part III Employer identification number Name of organization NORTHWEST OKLAHOMA OSTEOPATHIC FOUNDATION 73-0622115 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTEREST ON SAVINGS A	AND TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
EDWARD JONES			11,83	8.
TOTAL TO FORM 990-PF, PART I, LINE	E 3, COLUMN A		11,83	8.
FORM 990-PF DIVIDENDS AND	O INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	
EDWARD JONES	62,317.	6,071.	56,24	6.
TOTAL TO FM 990-PF, PART I, LN 4	62,317.	6,071.	56,24	6.
FORM 990-PF REI	NTAL INCOME		STATEMENT	3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCO	ME
RENTAL		1	15,08	8.
TOTAL TO FORM 990-PF, PART I, LINI	E 5A		15,08	8.

FORM 99	90-PF G	AIN OR (LOSS)	FROM SALE	OF	ASSETS	STA	PEMENT
DESCRII	(A) PTION OF PROPERTY	_			MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
EDWARD	JONES INVESTMENT	s			PURCHASED	VARIOUS	VARIOUS
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)		(F)
	SALES PRICE	OTHER BASIS	SALE		DEPREC.		OR LOSS
	35,969.	35,969. 		0.		0.	0
DESCRII	(A) PTION OF PROPERTY				MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
EDWARD	JONES INVESTMENT	s			PURCHASED	VARIOUS	VARIOUS
	(B)	(C)	(D)		(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF.	DEPREC	. GAIN	OR LOSS
	287,830.	260,543.		0.		0.	27,287
DESCRI	(A) PTION OF PROPERTY				MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
1993 F	ORD PICKUP	_			PURCHASED	06/10/93	10/12/1
	(B)	(C)	(D)		(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPREC	. GAIN	OR LOSS
	500.	12,383.		0.	12,38	83.	500
NET GA	IN OR LOSS FROM S	ALE OF ASSETS					27,787
	L GAINS DIVIDENDS				,		6,071
	TO FORM 990-PF, P						33,858
TOIME .	10 10101 330-11, 1	THE TABLE OF	•				23,030

FORM 990-PF	OTHER	INCOME	S	TATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY INCOME PROGRAM FEES MEMBERSHIP DUES AND ASSESSMEN	TS	2,602. 53,890. 2,580.	2,602. 0. 0.	2,602. 53,890. 2,580.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	59,072.	2,602.	59,072.
FORM 990-PF C	THER PROFE	SSIONAL FEES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	40,121	. 34,789	2,000.	0.
TO FORM 990-PF, PG 1, LN 16C	40,121	34,789	2,000.	0.
FORM 990-PF	ТА	XES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROPERTY TAX PAYROLL TAXES	571 9,868			
TO FORM 990-PF, PG 1, LN 18	10,439	1,900	3,787.	0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT	. 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		ABLE
INSURANCE ADVERTISING & PROMOTION OFFICE EXPENSE PROGRAM EXPENSES TELEPHONE, INTERNET &	10,064. 3,564. 11,482. 73,324.	8	72. 25. 60. 0.	4,91 3,47 8,47 73,32	6. 4. 4.	0.0.0.
UTILITIES DUES & SUBSCRIPTIONS	5,551. 643.		30.	5,55 19	2.	0.
TO FORM 990-PF, PG 1, LN 23	104,628.	2,4	87.	95,93	30.	0.
CHANGE IN MARKET VALUE OF DEE	EERRED COMPE	ENSATION			1.	424
CHANGE IN MARKET VALUE OF DEF		ENSATION				
						424.
TOTAL TO FORM 990-PF, PART II	OTHER INV		воо	K VALUE	1,	-
TOTAL TO FORM 990-PF, PART II FORM 990-PF	OTHER INV	VESTMENTS		K VALUE ,114,098. 22,088.	STATEMENT FAIR MARK VALUE 3,085	424. T 10
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION EDWARD JONES	OTHER INV	VESTMENTS ALUATION METHOD COST	3	,114,098.	STATEMENT FAIR MARK VALUE 3,085	424. T 10 XET
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION EDWARD JONES EDWARD JONES DEFERRED COMPENS	OTHER INV OTHER INV PARTION I, LINE 13	VESTMENTS ALUATION METHOD COST	3	,114,098. 22,088.	STATEMENT FAIR MARK VALUE 3,085,	424. F 10 KET .619.
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION EDWARD JONES EDWARD JONES DEFERRED COMPENS TOTAL TO FORM 990-PF, PART II	OTHER INV OTHER INV PARTION I, LINE 13	VESTMENTS ALUATION METHOD COST COST -	3	,114,098. 22,088.	STATEMENT FAIR MARK VALUE 3,085, 35,	424. T 10 XET .619. .376.
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION EDWARD JONES EDWARD JONES DEFERRED COMPENS TOTAL TO FORM 990-PF, PART II FORM 990-PF	OTHER INV OTHER INV A SATION I, LINE 13 OTHER LIA	VESTMENTS ALUATION METHOD COST COST -	3	,114,098. 22,088. ,136,186.	STATEMENT FAIR MARK VALUE 3,085, 35, 3,120, STATEMENT EOY AMOUNT	424. T 10 XET .619. .376.

	- LIST OF OFFICERS, DI S AND FOUNDATION MANAG		STATI	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
EDNA MAE HOLDEN P.O. BOX 3833 ENID, OK 73702	MEMBER 0.50	435.	0.	0.
STUART MEUPOLDER 2609 DANS COURT ENID, OK 73703	MEMBER 0.50	190.	0.	0.
JAMES R. PARRISH 1414 E. WILLOW ENID, OK 73701	MEMBER 0.50	0.	0.	0.
LARRY ROYE 2417 N. VAN BUREN ENID, OK 73703	MEMBER 0.50	435.	0.	0.
CHRIS SHEARER, D.O. 915 E. GARRIOTT, SUITE C ENID, OK 73701	PRESIDENT 0.50	435.	0.	0.
PATRICK DONEHUE, CPA 211 N. ROBINSON, SUITE 600 OKLAHOMA CITY, OK 73102	ADVISORY MEMBER 0.50	190.	0.	0.
JEFFREY JONES, D.O. 620 S. MADISON, SUITE 209 ENID, OK 73701	MEMBER 0.50	245.	0.	0.
BILL ANDREW 215 KENWOOD BLVD ENID, OK 73701	ADVISORY MEMBER 0.50	95.	0.	0.
KIRK DEPRIEST, D.O. 620 S MADISON, SUITE 108 ENID, OK 73701	VICE PRESIDENT 0.50	190.	0.	0.
C. MICHAEL OGLE, D.O. P.O. BOX 1467 ENID, OK 73702	MEMBER 0.50	435.	0.	0.
JOHN GOULART, D.O. 620 S. MADISON, SUITE 108 ENID, OK 73701	SECRETARY/TREAS	SURER 190.	0.	0.

' NORTHWEST OKLAHOMA OSTEOPATHIC FOUNDATIO		73-0	0622115
GARY PATZKOWSKY, D.O. 401 S. THIRD ENID, OK 73701 ADVISORY 0.50		0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII	3,275.	0.	0.

For the Period December 1, 2010 to November 30, 2011

Column	Asset ID	Placed in	Depr	Life Yr	Book Cost	Depr & AFYD	Beginning	Current Depr &	YEAR TO DATE Net Sec	Net Additions E	nding Accum
March Marc					Dook Cost						
SULDING-11011 ERROADWAY 06195000 S.100FM 99	Location: Clinic			<u> </u>							
061502000 S.100TM 29 0 84,918 2,928 30,990 2,928 0 0 0 33,9190 062120201 S.100MM 15 0 5,000 333 3,167 333 0 0 0 3,56 062120201 S.100MM 15 0 2,260 151 1,406 151 0 0 0 1,55 002507 ROOF REPURS 10062005 S.100MM 39 0 1,250 32 164 32 0 0 0 15 002509 REMODEL 11172005 S.100MM 39 0 1,665 422 2,128 422 0 0 0 2 2,50 002509 REMODEL 11172005 S.100MM 39 0 16,655 422 2,128 422 0 0 0 2 2,50 002509 SEVERLINE 00182006 MC150AHY 15 0 3,312 206 1,248 205 0 0 1,45 Subtotal RAPR-CLINIC 003011 AUTOMATIC DOOR 00182000 MC150AHY 15 0 3,312 208 1,248 205 0 0 0 1,45 Subtotal RAPR-CLINIC 003011 AUTOMATIC DOOR 00182000 None 0 0 10,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Class BLDG										
061592000 SL100FM 29 0 84.918 2,928 30.990 2,928 0 0 0 33.91 061512001 SL100MM 15 0 5,000 333 3,167 333 0 0 0 3,58 061512001 SL100MM 15 0 5,000 333 3,167 333 0 0 0 3,58 061512001 SL100MM 15 0 2,280 151 1,406 151 0 0 0 1,55 061512001 SL100MM 39 0 1,250 32 164 32 0 0 0 15 061512005 SL100MM 39 0 1,250 32 164 32 0 0 0 0 15 061512005 SL100MM 39 0 1,6465 422 2,128 422 0 0 0 2 2,56 06152006 SEVERLINE 061512005 MC150MM 39 0 15,465 422 2,128 422 0 0 0 2 2,56 0615200 MC150MM 39 0 15,465 422 2,128 422 0 0 0 0 4,45 0615200 MC150MM 15 0 3,312 206 1,248 205 0 0 1 4,45 061612006 O1/20/2008 MC150AHY 15 0 3,312 206 1,248 205 0 0 0 4,45 06161200 MRPR-CLINIC 061613 MRPR-CLINIC 061614 MRPR-CLINIC 061614 MRPR-CLINIC 061614 MRPR-CLINIC 061614 MRPR-CLINIC 061615 MRPR		BUILDING - 11	01 E BROADWA	·Υ							
BLIGG MAPROVENENTS		06/15/2000	SL100FM	29 0	84.918	2.928	30.990	2.928	3 0	0	33,918
OBSTITUTION SLICOMM 15 0 5,000 333 3,167 333 0 0 3,56	000504	BLDG IMPROV			,-	_,,	,	-,			,
BLOG MARQUEMENTS				15.0	5 000	333	3 167	33.	3 0	0	3 500
OBITIZADDI SLIOMM 15 2,260 151 1,466 151 0 0 1,55	000606			130	3,000	555	5,107	33.	, ,	U	3,500
MOSPORT REDURE 1008GROS SLICOMM 39 0 1,250 32 164 32 0 0 0 15	000303			45.0	0.000	454	4.400	45		0	4 557
1008/2005 S. 100MM 39 0 1,250 32 164 32 0 0 15	000507			15 0	2,260	151	1,406	15	1 0	U	1,557
Marie Mari	000507										
111/17/2005 SL100MM 39 0 16,465 422 2,128 422 0 0 2,55 SEWERLINE			SL100MM	39 0	1,250	32	164	32	2 0	0	196
100509 SEWERLINE	000508										
O1/20/2008 MC 150AHY 15 0 3.312 206 1.248 206 0 0 1.45		11/17/2005	SL100MM	39 0	16,465	422	2,128	423	2 0	0	2,551
Subtotal BLDG (6)	000509	SEWERLINE									
Subtotal BLDG (6)		01/20/2006	MC150AHY	150	3,312	206	1,248	206	5 0	0	1,454
Class IMPR-CLINIC AUTOMATIC DOOR A	Subtotal BLDG (6)										43,176
MODIFICE					,	,,,,,		.,		•	,
	Class: IMPR_CLIN	ıc									
Main			OOP								
Subtotal MAPR CLINIC	000401			4E 0	1 552	204	774	20.	4 0	٥	1.075
Class LAND	0.14:44.44.000.01.000	05/05/2006	SE IUUIVIIVI	150							
Class LAND Class LAND O0501					4,553	304	//1	304	4 U	U	1,075
000510											
OB/15/2000 None O O O O O O O O O											
October Donated Land rest to Clinic 11/30/2005 None 0.0 500 0.	000501		BROADWAY								
11/30/2006		06/15/2000	None	0 0	10,000	0	0	(0	0	0
Class: MED	000510	Donated Land	next to Clinic								
Class MED		11/30/2006	None	0 0	500	0	, 0	(0	0	0
Class MED Class MED Control Contro	Subtotal LAND (2)			•	10.500	0	0) 0	0	0
ORIGINAL PURCH EQUIP					,						
ORIGINAL PURCH EQUIP	Class: MED										
OBSTITE OBST		ORIGINAL PLI	BCH EOUID								
000556	000303			3.6	4 510	0	4.510	,	n 0	٥	4 510
Subtotal MED (2) SL100MM 3 0 380 0 380 0 0 0 0 380 380 0 0 0 0 380 380 0 0 0 380 380 380 0 0 0 380	000500			30	4,510	U	4,510	,	, ,	U	4,510
Subtotal MED (2) 4,890 0 4,890 0 0 0 4,850 Subtotal Clinic (11) 133,148 4,376 44,765 4,376 0 0 49,14 Location NWOOF Class AUTO 000091 REPAIRS FOR PICKUP 000092 1993 FORD PICKUP 06/10/1993 SL 100FM 3 0 658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -658 0 0 -11,725 0 0 -11,725 0 0 -11,725 0 0 -11,725 0 0 0 0 0 6,60 0 0 0 0 0 0 6,60 0 0 0 0 0 0 0 0 0 0	000506						200			•	000
Subtotal Clinic (11)		02/01/2001	SL100MM	30							380
Location NWOOF Class AUTO	Subtotal. MED (2)				4,890	0	4,890	(0	0	4,890
Location NWOOF Class AUTO											
Class AUTO	Subtotal Clinic (11)				133,148	4,376	44,765	4,370	5 0	0	49,141
Class AUTO											
REPAIRS FOR PICKUP 12/22/1998 SL100FM 3 0 658 0 658 0 0 0 658 0 0 0 0 0 0 0 0 0	Location NWOOF										
12/22/1998 SL100FM 3 0 658 0 658 0 0 658 0 0 658 000092 1993 FORD PICKUP 06/10/1993 SL100FM 5 0 11,725 0 11,725 0 0 -11,725 000911 2009 ACURA MDX (VIN 2HNYD28609H525347) 10/15/2010 SL100FM 5 0 52,163 4,900 1,739 4,900 0 0 0 6,63 Less Disposals Adjustment to eliminate cost values of disposed assets -12,383 Subtotal AUTO (4) 52 COMP Class COMP 000053 PS2 COMPUTER 07/01/1988 SL100FM 5 0 2,500 0 2,500 0 0 0 0 0 2,50 000054 PRINTER 03/30/1990 SL100FM 5 0 776 0 776 0 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 0 0 0 11,897	Class AUTO										
12/22/1998 SL100FM 3 0 658 0 658 0 0 658	000091	REPAIRS FOR	RPICKUP								
1993 FORD PICKUP 06/10/1993 SL100FM 5 0 11,725 0 11,725 0 0 0 -11,725 0 000911 2009 ACURA MDX (VIN 2HNYD28609H525347) 10/15/2010 SL 100FM 5 0 52,163 4,900 1,739 4,900 0 0 0 6,63 0 0 0 0 0 0 0 0 0		12/22/1998	SL100FM	30	658	0	658	(0	-658	0
06/10/1993 SL100FM 5 0 11,725 0 11,725 0 0 -11,725 000911 2009 ACURA MDX (VIN 2HNYD28609H525347)	000092										
2009 ACURA MDX (VIN 2HNYD28609H525347) 10/15/2010 SL 100FM 5 0 52,163 4,900 1,739 4,900 0 0 0 6,655	000032			5.0	11 725	n	11 725		n 0	-11 725	0
10/15/2010 SL100FM 5 0 52,163 4,900 1,739 4,900 0 0 0 6,65	000011					·	11,720	· ·		-11,120	v
Less Disposals Adjustment to eliminate cost values of disposed assets Subtotal AUTO (4)	000911					4 000	4 720	4.00		0	6 620
-12,383 Subtotal AUTO (4) 52,163 4,900 14,122 4,900 0 -12,383 6,63 Class COMP 000053 PS2 COMPUTER						4,900	1,739	4,90	0	U	0,039
Subtotal AUTO (4) 52,163 4,900 14,122 4,900 0 -12,383 6,63 Class COMP 000053 PS2 COMPUTER	Less Disposals	Adjustment to	eliminate cost va	lues of dispo							
C/ass COMP 000053 PS2 COMPUTER 007/01/1988 SL100FM 5 0 2,500 0 2,500 0 0 0 0 0 2,500 000054 PRINTER 03/30/1990 SL100FM 5 0 776 0 776 0 0 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 0 0 0 11,897											
000053 PS2 COMPUTER 07/01/1988 SL100FM 5 0 2,500 0 2,500 0 0 0 2,500 000054 PRINTER 03/30/1990 SL100FM 5 0 776 0 776 0 0 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 0 0 11,897	Subtotal AUTO (4)				52,163	4,900	14,122	4,90	0 0	-12,383	6,639
000053 PS2 COMPUTER 07/01/1988 SL100FM 5 0 2,500 0 2,500 0 0 0 2,500 000054 PRINTER 03/30/1990 SL100FM 5 0 776 0 776 0 0 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 0 0 11,897											
000053 PS2 COMPUTER 07/01/1988 SL100FM 5 0 2,500 0 2,500 0 0 0 2,500 000054 PRINTER 03/30/1990 SL100FM 5 0 776 0 776 0 0 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 0 0 11,897	Class COMP										
000054 PRINTER 000055 NETWORK 04/28/1992 SL100FM 5 0 2,500 0 2,500 0 0 0 2,500 0 0 2,500 0 0 0 2,500 0 0 0 2,500 0 0 0 0 0 0 2,500 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		PS2 COMPUT	ER								
000054 PRINTER 03/30/1990 SL100FM 5 0 776 0 776 0 0 0 776 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 11,897			_	5 0	2.500	0	2,500	(0 0	0	2,500
03/30/1990 SL100FM 5 0 776 0 776 0 0 776 0 0 776 000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 11,897	000054				_,	_	-•				• • •
000055 NETWORK 04/28/1992 SL100FM 5 0 11,897 0 11,897 0 0 11,897 0 0 11,897	330001		SI 100EM	5.0	776		776		0 0	n	776
04/28/1992 SL100FM 5.0 11,897 0 11,897 0 0 11,897	000055		SE TOUT IVI	30	110	. 0	110	,	. 0	U	770
	000000		01 400514				44.00=		n ^	^	44.00=
000056 RAM BOARD			2L100FM	5 0	11,897	U	11,897	(0	U	11,89/
	000056	RAM BOARD									
											2 50 1604

Page 1

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For the Period December 1, 2010 to November 30, 2011

Asset ID	Placed in	Depr	Life Yr	Book Cost	Depr & AFYD	Beginning	Current Depr &	YEAR TO DATE	Net Additions E	nding Accum
Asset ID	service	Meth/Conv	Mo	BOOK COST	This Period	Accum Depr	AFYD	Net Sec 179/Sec 179A	Deletions E	Depr
Location NWOOF										
Class COMP										
	08/31/1992	SL100FM	50	298	0	298	1	0	0	298
000057	BATTERY BACI									
000000	08/31/1992	SL100FM	5 0	594	0	594	'	0	0	594
000058	GPS HARD DRI 10/28/1992	SL100FM	5 0	500	0	500		0 0	0	500
000059	3-17MB HARD (30	500	U	300			U	500
000000	12/17/1993	SL100FM	5 0	795	0	795		0 0	0	795
000060	MOUSE				_			-	•	
	12/12/1994	SL100FM	10	19	0	19		0 0	0	19
000061	HEWLETT PRIN	NTER								
	05/22/1995	SL100FM	5 0	973	0	973		0 0	0	973
000062	FILE SERVER				_			_	_	
00000	12/31/1996	SL100FM	5 0	4,633	0	4,633		0 0	0	4,633
000063	8 MEG MEMOR 03/25/1997	SL100FM	5 0	124	0	124		0 0	0	124
000064	NETWARE COM		30	124	U	124		0 0	U	124
000004	03/25/1997	SL100FM	50	571	0	571		0 0	0	571
000065	MODEM INSTA		•	· · ·	•	.			•	• • • • • • • • • • • • • • • • • • • •
	03/31/1997	SL100FM	50	16	0	16		0 0	0	16
000066	FILE SERVER!	NSTAL								
	03/31/1997	SL100FM	50	649	0	649		0 0	0	649
000067	MODEM INSTA				_			_	_	
000000	03/31/1997	SL100FM	50	57	0	57		0 0	0	57
000068	ADVANCED OF 05/31/1997	SL100FM	50	450	0	450		0 0	0	450
000069	ACCOUNTING		30	450	U	430		0	· ·	450
00000	10/15/1997	SL100FM	30	1,443	0	1,443		0 0	0	1,443
000070	ACCOUNTING			,						.,
	10/15/1997	SL100FM	30	1,443	0	1,443		0 0	0	1,443
000071	ADVANCE OFF	ICE								
	11/15/1997	SL100FM	30	162	0	162		0 0	0	162
000072	ADVANCE OFF		0.0	500	•	500				500
000073	11/15/1997 ADVANCE OFF	SL100FM	30	590	0	590		0 0	0	590
000073	11/15/1997	SL100FM	30	1,370	0	1,370		0 0	0	1,370
000074	ADVANCE OFF		30	1,570	·	1,010		•	v	1,070
	12/15/1997	SL100FM	30	544	0	544		0 0	0	544
000075	ADVANCE OFF	ICE								
	12/15/1997	SL100FM	30	243	0	243		0 0	0	243
000076	ADVANCE OFF							_	_	
	12/15/1997	SL100FM	30	1,826	0	1,826		0 0	0	1,826
000077	ADVANCE OFF		2.0	20	0	20		0 0	0	38
000078	12/15/1997 TOTAL TIME C	SL100FM	30	38	U	38		0 0	U	30
000078	12/04/1998	SL100FM	30	700	0	700		0 0	0	700
000079	ADVANCE OFF				_					
	11/15/1997	SL100FM	30	174	0	174		0 0	0	174
000080	GAIL'S COMPL	JTER								
	09/15/1999	SL100FM	4 0	1,357	0	1,357		0 0	0	1,357
000081	H/R COMPUTE		4.0		_				•	
000000	09/15/1999	SL100FM	4 0	1,356	0	1,356		0 0	0	1,356
000082	H/R COMPUTE 11/30/1994	SL100FM	50	1,838	0	1,838		0 0	0	1,838
000083	GREAT PLAINS		30	1,000	U	1,000		• 0	U	1,000
730000	CHERT FUNITY	J. J. 111 L								

Federal Tax

Asset ID	Placed in	Depr	Life Yr	Book Cost	Depr & AFYD		Current Depr &	Net Sec	Net Additions	Ending A	
	service	Meth/Conv	Мо		This Period	Accum Depr	AFYD	79/Sec 179A	Deletions	Dep	
ocation NWOOF. Class. COMP											
Class. COMP	05/24/1995	SL100FM	50	2,035	0	2,035	0	0	,	0	2,035
000084	PAYROLL UPD		30	2,033	U	2,033	U	U	,	,	2,033
700004	04/21/1997	SL100FM	50	118	0	118	0	0		0	118
000085	SOFTWARE LI		30	110	U	110	U	U	,	J	110
00000	08/08/1997	SL100FM	50	613	0	613	0	0	(0	613
000086	PAYROLL SET		30	010	v	013	U	U	,	,	013
00000	05/30/1997	SL100FM	50	1,200	0	1,200	0	0	(0	1,200
000087	NO DESC AVA		• • •	1,200	v	1,200	V	v	`	,	1,200
	11/30/1997	SL100FM	50	652	0	652	0	0	1	0	652
000088	CASH MNGMT			**-	•	****	·	ū	·	•	002
	05/31/1995	SL100FM	5 0	1,250	0	1,250	0	0	,	0	1,250
000116	HP 21 PRINTER			1,200		.,200	·	· ·	·		1,200
	03/30/2001	SL100FM	50	757	0	757	0	0	,	0	757
000129	HP COMPUTER				_		_	_			
	03/07/2006	MC200AHY	50	3,321	191	3,130	191	0	4	0	3,321
000130	COMPUTER (E	NID TYPEWRIT	ER)	,							-,
	02/06/2007	SL100FM	50	2,193	439	1,681	439	0	ı	0	2,120
000132	LAPTOP & TYP	EWRITER (ENI	D TYPEWR	ITER)							•
	11/29/2007	SL100FM	50	2,919	584	1,800	584	0	(0	2,384
000133	OPTIMA 771 PF	ROJECTOR									
	02/07/2008	SL100FM	50	1,423	285	806	285	0	(0	1,091
000134	COMPUTER - E	ELAINE (ENID T	YPEWRITE	R)							
	08/12/2010	SL100FM	50	1,347	269	90	269	0	1	0	359
Subtotal ⁻ COMP (42)			-	55,764	1,768	52,068	1,768	0		0 !	53,836
01 5010											
Class. EQIP	TYPEWOITED										
000001	TYPEWRITER 04/16/1992	SL100FM	50	140	0	140	0	0		0	140
000002	COPIER	SCIOUPIVI	30	140	U	140	U	U	,	J	140
000002	11/29/1994	SL100FM	50	6,200	0	6,200	0	0		0	6,200
000003	OLYMPUS CAN		30	0,200	U	0,200	U	U	'	J	0,200
000003	12/09/1995	SL100FM	50	174	0	174	0	0		0	174
000004	DRUM UNIT FO		30	1/7	Ū	174	Ū	Ū	·		114
000004	02/07/1995	SL100FM	10	228	0	228	0	0		0	228
000005	PANASONIC P		. •	220	v	220	ŭ	J		•	
00000	01/29/1996	SL100FM	30	647	0	647	0	0		0	647
000006	VACUM SWEE			01.	ŭ	0.,	ŭ	J		•	٠.,
	12/31/1997	SL100FM	50	151	0	151	0	0		0	151
000007	AEROBICS EQ				•		•	_		-	
	09/20/1999	SL100FM	50	509	0	509	0	0		0	509
000008	CANON CALCU	JLATOR									
	02/06/1995	SL100FM	50	92	. 0	92	0	0		0	92
000093	FAX SPLINTER										
	11/05/1994	SL100FM	50	298	0	298	0	0		0	298
000094	FAX MACHINE										
	10/31/1994	SL100FM	100	747	. 0	747	0	0		0	747
000120	ELIPITICAL EX	ERCISE MACH	NE								
	12/01/2003	SL100FM	70	1,500	0	1,500	0	0		0	1,500
000121	AIRDYNE BICY	'CLE									
	02/23/2004	SL100FM	70	650	15	635	15	0		0	650
000123	DIGITAL CAME	:RA									
	06/28/2004	SL100FM	50	616	. 0	616	0	0		0	616
000124	TELEPHONE S	YSTEM									
	12/01/2003	SL100FM	10 0	7,229	723	5,060	723	0		0	5,783
000128	SAVIN COPIER			•		-					

For the Period December 1, 2010 to November 30, 2011

Asset ID		nen	Life Yr	Book Cost	Depr & AFYD	Beginning	Current Depr &	Net Sec	Net Additions E	nding Accum
	Placed in service	Depr Meth/Conv	Mo	D00x C03t	This Period	Accum Depr	AFYD	179/Sec 179A	Deletions	Depr
ocation NWOOF			-	•					-	
Class: EQIP										
	06/15/2006	MC200AHY	50	6,681	385	6,296	385	0	0	6,681
000131	ICE MACHINE	CI 100EM	7.0	142	20	69	20	0	0	90
Subtotal EQIP (16)	07/20/2007	SL100FM	70	26,004	1,143	23,363	1,143		0	24,506
Subtotal EQIF (10)				20,004	1,140	20,000	1,140	,	v	21,000
Class FURN										
000009	VIDEO DISPLA									
	05/27/1987	SL100FM	80	1,449	0	1,449	C	0	0	1,449
000010	FURNISHINGS	CI 100EM	20 0	4.050	0	4,950	C) 0	0	4,950
000011	06/06/1987 STACKING CH/	SL100FM	20 0	4,950	U	4,530		, ,	U	4,350
700011	03/10/1987	SL100FM	30	715	0	715	C	0	0	715
000012	HON DESK									
	06/12/1989	SL100FM	15 0	358	0	358	C	0	0	358
000013	DESK CHAIR				_		_		•	200
000044	06/12/1989	SL100FM	15 0	322	0	322	() 0	0	322
000014	MONITOR-PS2 10/26/1989	SL100FM	50	404	0	404	() 0	0	404
000015	OFFICE EQUIP		30	101	v	,,,,		,	·	,,,
	12/12/1988	SL100FM	15 0	4,841	0	4,841	(0	0	4,841
000016	DESK CHAIR									
	03/30/1990	SL100FM	15 0	669	0	669	() 0	0	669
000017	COMPUTER CE		10.0	436	0	436	() 0	0	436
000018	06/07/1991 OFFICE DESK	SL100FM	10 0	430	U	430	,	, ,	v	700
500010	06/12/1991	SL100FM	20 0	1,739	43	1,696	43	3 0	0	1,739
000019	FILE CABINET									
	09/09/1991	SL100FM	10 0	141	0	141	(0	0	141
000020	FILE CABINET		40.0	10.5	•	405	,		0	405
000004	04/21/1992 CHAIR	SL100FM	10 0	195	0	195	•	0	0	195
000021	05/19/1992	SL100FM	10 0	172	. 0	172	!	0	0	172
000022	WORKSTATIO				•					
	06/04/1992	SL100FM	10 0	339	0	339) (0 0	0	339
000023	BOOK CASE								•	444
	08/23/1993	SL100FM	50	114	0	114	,	0 0	0	114
000024	LOBBY FURNI 09/30/1993	SL100FM	10 0	933	. 0	933	.	0 0	0	933
000025	CLOCK & CON		100	330	,	000	,	•	•	
000020	11/10/1993	SL100FM	10 0	519	0	519)	0 0	0	519
000026	CONF ROOM	CHAIRS								
	11/10/1993	SL100FM	10 0	1,969) 0	1,969	,	0 0	0	1,969
000027	LOBBY FURNI		40.0	1.20/	` .	1,200	`	0 0	0	1,200
000000	11/10/1993 MISC ITEMS	SL100FM	10 0	1,200) 0	1,200	,	0 0	U	1,200
000028	11/23/1993	SL100FM	50	66	5 0	66	5	0 0	0	66
000029	COMMUNITY I									
	11/06/1993	SL100FM	10 0	5,740) 0	5,740)	0 0	0	5,740
000030	MISC ITEMS				<u> </u>			^ ^		
	11/02/1993	SL100FM	5 0	79	9 0	79	;	0 0	0	79
000031	BOOK CASE 11/12/1993	SL100FM	50	14:	5 0	145	5	0 0	0	145
000032	STEP BENCH		30	14,			-	-	·	
00002	01/04/1994	SL100FM	10 0	429	9 0	429)	0 0	0	429

For the Period December 1, 2010 to November 30, 2011

Asset ID	Placed in	Depr	Life Yr	Book Cost	Depr & AFYD	Beginning	Current Depr &	YEAR TO DATE Net Sec	Net Additions	Ending Accum
	service	Meth/Conv	Мо		This Period	Accum Depr	AFYD	179/Sec 179A	Deletions	Depr
Location. NWOOF		•								
Class FURN	01.001/									
000033	CLOCK	01.400514	40.0	20	•	20			,	. 20
000034	01/19/1994	SL100FM	10 0	38	0	38	0	0	() 38
000034	VACUUM SWEE		40.0	404	0	404	•		,	124
000025	05/11/1994	SL100FM	10 0	134	0	134	0	0	() 134
000035	ICE MACHINE	01.400514	40.0	500	0	500			,	
000000	08/08/1994	SL100FM	10 0	502	0	502	0	0	(502
000036	STEP BENCHES		40.0	20	0	20			,	20
000007	08/02/1994	SL100FM	10 0	32	0	32	0	0	(32
000037	DESK	01.400514	40.0	500	•	500			,	
22222	10/31/1994	SL100FM	10 0	500	0	500	O	0	(500
000038	FOUR BOOKCA		40.0			4 175				
	10/31/1994	SL100FM	10 0	1,475	0	1,475	0	0	() 1,475
000039	BULLETIN BOA		40.0	250		050	_			
	10/31/1994	SL100FM	10 0	250	0	250	C	0	(250
000040	CONFERENCE				_		_	_		
	10/31/1994	SL100FM	10 0	275	0	275	0	0	() 275
000041	LAMP TABLE									
	11/11/1994	SL100FM	50	107	0	107	O	0	() 107
000042	DESK									
	11/09/1994	SL100FM	10 0	1,204	0	1,204	0	0	() 1,204
000043	CLOCK									
	12/16/1993	SL100FM	10 0	37	0	37	0	0	(37
000044	DESK									
	02/16/1995	SL100FM	50	136	0	136	C	0	() 136
000045	MANAGER'S CH	HAIR								
	02/03/1995	SL100FM	50	172	0	172	0	0	() 172
000046	CHAIR									
	02/16/1995	SL100FM	50	162	0	162	C	0	() 162
000047	HON FILE									
	02/16/1995	SL100FM	50	161	0	161	C	0	(161
000048	DESK W/ RETU	IRN								
	05/19/1995	SL100FM	50	429	0	429	C	0	(429
000049	CHAIR									
	05/19/1995	SL100FM	50	162	0	162	C	0	() 162
000050	AEROBICS BE	NCHES								
	04/10/1997	SL100FM	50	505	0	505		0	(505
000051	OFFICE CHAIR									
	09/22/1997	SL100FM	50	403	0	403	C	0	(403
000052	CHROMECRAF	T CHAIR								
	05/19/1995	SL100FM	50	325	0	325	•	0	(325
Subtotal FURN (44)				34,933	43	34,890	43	0		34,933
Class IMPR										
000095	DANCE MIRRO	RS								
	07/01/1988	SL100FM	15 0	518	0	518	() 0	(518
000096	WATER HEATE	R								
	01/12/1989	SL100FM	15 0	415	0	415	•	0	() 415
000097	TWO FURNACE	E HEATERS								
	01/30/1989	SL100FM	10 0	1,795	0	1,795) 0	•	1,795
000098	WAREHOUSE S	SHELVES								
	07/25/1991	SL100FM	15 0	3,143	0	3,143	(0	(3,143
000099	CEILING FANS	AEROBIC								
	08/31/1993	SL100FM	10 0	813	0	813		0	(813
000100	INSTALL CEILI	NG FAN								

For the Period December 1, 2010 to November 30, 2011

Asset ID	Placed in	Depr	Life Yr	Book Cost	Depr & AFYD	Beginning	Current Depr &	YEAR TO DATE Net Sec	Net Additions	Ending Accum
	service	Meth/Conv	Mo	BOOK COST	This Period	Accum Depr	AFYD	179/Sec 179A	Deletions	Depr
ocation, NWOOF									•	
Class IMPR										
	10/21/1993	SL100FM	50	465	0	465	0	0		0 465
000101	PRINTS-CONF	ROOM								
	12/14/1993	SL100FM	10 0	93	0	93	0	0		0 93
000102	POSTER FRAM	IING								
	12/31/1993	SL100FM	10 0	142	0	142	0	0		0 142
000103	FRONT DOOR						_	_		
	12/15/1995	SL100FM	10 0	1,795	0	1,795	0	0		0 1,795
000104	REMODEL			·			_	_		,
	06/05/1987	SL100FM	20	35,963	0	35,963	0	0		0 35,963
000117	AIR CONDITION			00,000	•	55,545	•	•		00,000
	11/01/2001	SL100FM	5 0	708	0	708	0	0		0 708
000126	CARPETING				·	, 55	•	·		,,,,
	07/11/2005	SL100AHY	15 0	4,250	283	1,558	283	0		0 1,842
000127	LEASEHOLD IN			1,200	200	1,000	200			1,042
.00121	05/24/2005	SL100AHY	15 0	4,129	275	1,514	275	0		0 1,789
000300	ELECTRICAL U		100	4,120	2.0	1,514	2,0			0 1,703
,0000	04/07/2004	SL100MM	15 0	2,102	140	928	140	0		0 1,068
000301	A/C COMPRES		100	2,102	140	320	140			0 1,000
700301	03/07/2006	MC200AHY	70	2,647	236	2,057	236	0		0 2,293
Subtotal IMPR (15)	00/01/2000	MOZOOAIII		58,978	935	51,907				0 52,842
Subtotal Intil 11 (10)				30,370	333	31,307	300	·		0 32,042
Class LAND										
000105	BLOCK 52, LOT	S 1&2								
	03/27/1985	None	10	48,804	0	0	O	0		0 0
000106	BLOCK 52 LOT	3 & 4				_		_		
	10/17/1984	None	10	27,641	0	0	C	0		0 0
000107	BLK 52, LOTS 5			2.,5	•	•	-	•		•
	09/15/1982	None	10	3,915	0	0	C	0		0 0
000108	BLK 5211,14,1			-,	·	•	_	-		•
	09/15/1983	None	10	21,805	0	0	C	0		0 0
000109	BLK 52, LOTS 1			2.,,000	-	-	•	·		
	04/14/1985	None	10	3,915	0	0	C) 0		0 0
000110	BLK 52, LT 17,1		. •	0,0.0	·	J	•	,		•
	01/20/1984	None	10	23,280	0	0	C) 0		0 0
000111	EXPANSION LA		. •	20,200	ŭ	ŭ	•	,		·
000111	05/15/1984	None	10	18,269	0	0	C) 0		0 0
000114 2	BLK 60 LT10,11			10,200	·	·	•	,	•	•
0001142	12/28/1983	None	10	20,764	0	0	(0		0 0
000115	APPRAISAL CO			20,704	v	•	`	, ,		
000113	07/01/2000	None	10	750	0	0	() 0		0 0
000118	317 E PARK A		10	750	U	O	,	, ,		
000118	10/23/2008	None	0 0	30,313	0	0	. () 0		0 0
Subtotal I AND (10)	10/23/2000	HUITE		199,456					<u>-</u>	0 0
Subtotal LAND (10)				133,430	U	U		, 0		
Subtotal NWOOF (131)			-	427,298	8,789	176,349	8,789	0	-12,38	3 172,756
Grand Total				560,446	13,166	221,115	13,166	5 0	-12,38	3 221,897

Note There may be differences due to rounding