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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

EXTENSION ATTACHED

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A F	or th	ne 201	1 calendar year, or tax year beg	inning	, 2011,	and ending	<u> </u>			, 20		
B	heck if a	nnlicable	C Name of organization							ication numb	er	
ان ت	_		UNITED WAY OF CENTRA	AL OKLAHOMA, INC.			7	3-058	8982	29		
L	Addr		Doing Business As									
	_ Name	e change	- Number and street (or P O box if mail i	s not delivered to street address)		Room/suite		elephone			-	
	Instra	l return	1444 NW 28TH STREET				(40	5) 2:	36-8	3441		
	1	unated	City or town, state or country, and ZIP +									
	Ame:	n	OKLAHOMA CITY, OK 73				G G	ross recei	ipts \$	30,	303	,601
	Appli pend	cation ing	F Name and address of principal officer					s this a gr affiliates?	oup reti	urn for	Yes	X
			1444 NW 28TH STREET	OKLAHOMA CITY, OK	7310	6		Are all affil	liates in	cluded?	Yes	N
	Tax-ex	empt st	atus X 501(c)(3) 501(c) () ◀ (insert no) 494	47(a)(1) c	or 527		f "No," att	ach a lis	st (see instruct	ions)	
			WWW.UNITEDWAYOKC.ORG						-	number 🕨		
		of organ	zation X Corporation Trust	Association Other		L Year of	formation 1	952 м	State	e of legal don	nıcıle	OF
Pa	rt I	Sur	nmary								_	
	1		describe the organization's mission									
Ф		TO]	MPROVE THE HEALTH, SA	FETY, EDUCATION &	ECON	OMIC WEL	L-BEING	OF				
Activities & Governance		IND	[VIDUALS & FAMILIES IN	NEED IN CENTRAL (OKLAH	OMA.						
Ē								 -				
٥	2	Check	this box I if the organization	discontinued its operations or	dispose	d of gnere ther	1125% of its	net asse	 ets			
ž	3	Numb	er of voting members of the governin	g body (Part VI, line 1a)		ハヒしに	IVLD	70l.	. 3			68
es	4	Numb	er of independent voting members of	the governing body (Part VI, Iii	ne (15 5)		~)Š	4			68
	5	Total r	number of individuals employed in ca	ilendar year 2011 (Part V, line 2	(a) (B)	MOA S	1 2012		. 5			5.5
A S	6		number of volunteers (estimate if nece					Œ	6		2	,502
-	7a	Total (unrelated business revenue from Part	VIII, column (C), line 12		OCDE			7 a	-		
	b	Net ur	related business taxable income from	n Form 990-T, line 34		OGDE	= 10, 0		. 7b			
							Prio	r Year		Curre	ent Yo	ear
۰	8	Contri	butions and grants (Part VIII, line 1h)				18,	615,5	22.	29,	508	,863
	9		am service revenue (Part VIII, line 2g)						0			
Kevenue	10		ment income (Part VIII, column (A), lii					31,5	13.		346	,005
-	11		revenue (Part VIII, column (A), lines !					102,9	146.		131	,708
Ì	12		evenue - add lines 8 through 11 (mu				18,	749,9	81.	29,	986	,576
	13	Grants	s and similar amounts paid (Part IX, co	olumn (A), lines 1-3)			16,	511,8	313.	16,	369	,635
	14		its paid to or for members (Part IX, co						0			
2	15		es, other compensation, employee be				1,	978,0	07.	1,	962	,740
	16a		ssional fundraising fees (Part IX, colum						0			
Expenses	b	Total f	undraising expenses (Part IX, column	(D), line 25) ▶ 1,69	4,856	5.						
۱ "			expenses (Part IX, column (A), lines 1				1,	656,7	16.	1,	537	,202
Ì	18		expenses Add lines 13-17 (must equi				20,	146,5	36.	19,	869	,577
	19	Reven	ue less expenses Subtract line 18 fro	om line 12		[-1,	396,5	55.			,999
salances							Beginning of	Current	Year	End	of Yea	ar
틽	20	Total a	assets (Part X, line 16)			[24,	434,6	29.	32,	615	,523
ğ	21	Total I					10,	685,8	372.	9,	011	,850
	22	Net as	sets or fund balances Subtract line 2	21 from line 20			13,	748,7	57.	23,	603	,673
a	rt II	Sig	nature Block	·								
Jnc	der pe	nalties of	perjury, I declare that I have examined this	s return, including accompanying si	chedules a	and statements	, and to the be	est of my	knowl	edge and be	lief, it	is true
-con	rect, a	nd comp	lete Declaration of preparer (other than of	ficer) is based on all information of	which pre	eparèr has any l	knowledge	,3t 01 my			———	
ig												
			Signature of officer					Date				
er	re					-						
			Type or print name and title				**					
	l parer	Print/	Type preparer's name	Preparer's signature		Date		Check	ıf	PTIN		
aid		M. 1	BRANDON YOUNG	m.RUL	2	11-13-		elf-emplo		P004	1408	341
		Fırm's	name GRANT THORNTON	LLP				EIN ►	36.	-605555		
se	Only		address ▶ 211 N ROBINSON STE 120	O OKLAHOMA CITY, OK 73102		·	Phone			5-218-2		
av	the !		cuss this return with the preparer sho			-	1 - 110016			XYe		N
1				22010 1000 1100 0000110						147140	ادد	. IN/

Form 990 (2011)	Page 2
Part III- Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	\neg
1 Briefly describe the organization's mission	
TO IMPROVE THE HEALTH, SAFETY, EDUCATION & ECONOMIC WELL-BEING OF	
INDIVIDUALS & FAMILES IN NEED IN CENTRAL OKLAHOMA BY CONNECTING	
COMMUNITY RESOURCES WITH RESPONSIVE & ACCOUNTABLE HEALTH & HUMAN	
SERVICE ORGANIZATIONS.	
· · · · · · · · · · · · · · · · · · ·	X No
If "Yes," describe these new services on Schedule O 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? —Yes	X No
If "Yes," describe these changes on Schedule O	
4 Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (Code) (Expenses \$17,020,647. including grants of \$16,369,635.) (Revenue \$29,986,576)	
ATTACHMENT 1	
4b (Code:) (Expenses \$ including grants of \$) (Revenue \$))
	- ·n
	
4c (Code.) (Expenses \$ including grants of \$) (Revenue \$	`
To (code:)(Expenses vincluding grains of v)(Neverlae v)	,
·	
4d Other program services (Describe in Schedule O.)	
(Expenses \$ including grants of \$)(Revenue \$)	
4e Total program service expenses ► 17,020,647.	

Part	V Checklist of Required Schedules			
			Yes	No
ì	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			Х
_	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Х
^	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	-		
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1.	22 G Å	1
''	VII, VIII, IX, or X as applicable.		ite in A List of	
9	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		Them.	Call Frie
а	Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X	17
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	446		X
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		X
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		^
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		x
47	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and N	10	 	- "
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		х
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	 ''	 	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		†
.13	If "Yes," complete Schedule G, Part III	19		Х
20 =	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	†	

			Yes	No
21`	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	-		
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		_ X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Χ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		2
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
•	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		2
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
-0	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	х	
b	and the second s			
b	Schedule L, Part N	28b	x	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part N	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive under thair \$25,000 in horizont contributions in respect contributions of art, historical treasures, or other similar assets, or qualified			
30	conservation contributions? If "Yes," complete Schedule M	30		}
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>			
) I	Part I	31		, ,
2 2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>		
32	complete Schedule N, Part II	32		۱ ک
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u></u>		H
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33)
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		-
34		34		,
	<i>IV, and V, line 1</i>	35a	 	7
35a	•	35a		H
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	256		,
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	├	 '
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			,
	Part VI	37	-	>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		x	
J U	19? Note. All Form 990 filers are required to complete Schedule O	38		

Form 990 (2011)

Par				
	Check if Schedule O contains a response to any question in this Part V		V I	ليك
1 2	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		1	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and		-	
Ū	reportable gaming (gambling) winnings to prize winners?	1c	I	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 55		.	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_ X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			v
L	account)?	4a		<u>X</u>
D	If "Yes," enter the name of the foreign country ►	-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	AND SECTION	
7	Organizations that may receive deductible contributions under section 170(c).			
а		金髓	还 X	.
b	and services provided to the payor?	7a 7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			-
	required to file Form 8282?	7c	ļ	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year		質性	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? \dots	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	46-21)=-	÷1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ž.
	organization, have excess business holdings at any time during the year?	8	#:77	
9	Sponsoring organizations maintaining donor advised funds.	J. 1. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
а	Did the organization make any taxable distributions under section 4966?	9a	CRAA I	-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	1	4	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	્કૃ		
11	Section 501(c)(12) organizations. Enter	,		.*
	Gross income from members or shareholders	<u>.</u> -	₹. m. 1 .	
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	\$\begin{align*} \text{\$\delta\$} & \$\delta\$	المحق ا	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	• (
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	7 1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		, A.	[
b	Enter the amount of reserves the organization is required to maintain by the states in which	J.	· .	·
	the organization is licensed to issue qualified health plans	1.,	-	ļ. ·
	Enter the amount of reserves on hand		,	<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

Sect	ion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are 1a	68			
	material differences in voting rights among members of the governing body, or if the governing body	}			
	delegated broad authority to an executive committee or similar committee, explain in Schedule O	ł	1		
b	Enter the number of voting members included in line 1a, above, who are independent 1b	68	İ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship of	with			
	any other officer, director, trustee, or key employee?		2	X	
3	Did the organization delegate control over management duties customarily performed by or under the di				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	1	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	í	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app				
	One or more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members and the subject to approval by t				
_	stockholders, or persons other than the governing body?		7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken du				
-	the year by the following	9			
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8 b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reache				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	_	Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	enue (Code	.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chap				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		l
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	n?	11a	_X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	_X	
b	and the second s				!
	rise to conflicts?		12b	X	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes,"	.		
	describe in Schedule O how this was done		12c	_X	ļ
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?	!	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	}			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decis	ion?			
а	The organization's CEO, Executive Director, or top management official		15a		<u> </u>
b	Other officers or key employees of the organization		15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment			
	with a taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			,	
	organization's exempt status with respect to such arrangements?		16b		
Sect	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶_OK,		_		-
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Se	ction 5	01(c)((3)s c	nly)
	available for public inspection. Indicate how you made these available. Check all that apply				
	Own website Another's website X Upon request	-			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, con	iflict of	f inte	est	oolicy,
	and financial statements available to the public during the tax year.				

State the name, physical address, and telephone number of the person who possesses the books and records of the organization > KIM JOHNSON 1444 NW 28TH STREET OKLAHOMA CITY, OK 73106 (405)523-3518

Form 990 (2011)

Section A.

Form 990 (201	1)	UNIT	ED WAY O	F CENTRA	TP OI	KLAHOMA, .	INC.	/3-	-0369629	۲
Part VII	Compensation of		Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	 Independent Co 	ntractors								

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor a	any related	orga	nıza	tion	cor	npens	sate	d any current offic	er, director, or trus	tee	_
(A) Name and Title	(B) Average hours per week (describe hours for related	box, office	not ch unles	(C) Position neck more than one as person is both an if a director/trustee)				(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations	_
(1) DOUG STUSSI	1 00			,,							^
CHAIRMAN OF THE BOARD (2) DAVID HARLOW	1.00	X		X				0	0		_0
SECRETARY/ TREASURER	1.00	х		х				c	o		0
(3) SHANE WHARTON ASSISTANT SECRETARY/TREASURER	1.00	х		х				C	0		0
(4) SEE STATEMENT 1 BOARD MEMBER	1.00	х						C	0		0
(5) AMY MONTOYA CFO (OUTGOING)	38.00			х				86,012.	0		0
(6) DEBBY HAMPTON CEO & PRESIDENT	38.00			х				130,070.	0		0
(7) KIM JOHNSON CFO (INCOMING)	38.00			х				4,522.	0		0
											_
(9)											_
(10)									-	:	_
	-			 	· -				_	-	-
_(12)			 								-
									_		
											-
					1		1	·	<u> </u>	<u> </u>	_

Form 990 (2011)

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	rt VII Section A. Officers, Directors, Tru	istees, Ke	y Em	plo	yee	es,	and I	lig	hest Compensat	ed Employees	(continu	ed)	
	, , (A) Name and title	(B) Average hours per week (describe	box, office	not ch unles	s pe lad	ition more rson irect	e than o is both or/trust	an ee)	(D) - Reportable compensation from the	(E) Reportable compensation fron related organizations	n a	(F) stimated mount of other npensat	of
-		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	orç ar	rom the ganization of relate anization	on ed
		-							-				
												•	
C	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	ection A .						▶	220,604.		0		0
	Total number of individuals (including but not reportable compensation from the organizatio	limited to t	hose	liste					eceived more than	\$100,000 of			
3	Did the organization list any former officemployee on line 1a? If "Yes," complete Sched										3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations grundividual	sum of repeater than	portat	ole (com	per	nsatio <i>"Ye</i> :	n a s,"	nd other compen	sation from the	4		x
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mper	satı	on	fror	n any	ur ur	related organizati	on or individual	5		X
_	ction B. Independent Contractors								11-4	- 4b 6400 000	- 6		
1	Complete this table for your five highest comcompensation from the organization Report of year	compensated	inaepi ion fo	r the	ent e ca	len	dar ye	ear o	ending with or wit	hin the organizat	ion's tax	•	
	(A) Name and business add	dress			- -				(B) Description of se	ervices	(C Compe) nsation	ı
_							. .	+				-	
_		· · · · · · · · · · · · · · · · · · ·						\downarrow		,			
2	Total number of independent contractors (i				nıte	d t	_	se	listed above) who	received	•		
ĪSA	more than \$100,000 in compensation from the	ie organiza	tion I	<u> </u>			0			- [<u> </u>	000	

Pa	it VII	Statement of Revenue					-,
		·. · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated ₋ business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns 1	29,508,863				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues	1	1			
A, G	C	Fundraising events		1			
sifts ar /						_	_
s, C	- d			•			-
ion	e	g (co)	-	,			
the the	l t	1,3 1,3 1,1					
E O		and similar amounts not included above . 11	30.000				
g č	g	Noncash contributions included in lines 1a-1f \$		20 500 063			-
<u> </u>	<u>h</u>	Total. Add lines 1a-1f	Business Code	29,508,863.			
Program Service Revenue			Business Code	1			•
₹ 8	2a		_		· · · · · · · · · · · · · · · · · · ·		
8	b		_				
Σ̈́	С		-				ļ
Š	d		_				
гап	е		_				
5 go	f	All other program service revenue				<u>.</u>	<u> </u>
	g	Total. Add lines 2a-2f	<u> ▶</u>	0			<u> </u>
	3	Investment income (including dividends, in	terest, and				
		other similar amounts). ATTACHMEN	T .2 ▶	33,755.			33,755.
	4	Income from investment of tax-exempt bor		0			
	5	Royalties · · · · · · · · · · · · · · · · · · ·		0			
		(ı) Real	(II) Personal	小冷 (142)	,		
	6a	Gross rents		1 1 1 1 1 1 1 1 1 1 1			
	ь	Less rental expenses		医科斯丁第一种 类		-	
	C	Rental income or (loss)			*		_
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of (i) Securitie	s (II) Other	75.	320	-	
	' a	assets other than inventory 100,3	00. 528,975.			-	
	Ь	Less cost or other basis		,这是一种一个	₹	€	-
	-	and sales expenses 100,3	00. 216,725.	A STATE OF THE STA			
	c	Gain or (loss)	312,250		x -		
	d	Net gain or (loss)		312,250.	,	·	312,250.
ø	8a	Gross income from fundraising			Ţa.		
П	""	events (not including \$, ,		
Ş		of contributions reported on line 1c)		The state of the state of	∮		
8		See Part IV, line 18		1. 建燃管管	\$,		-
ē	ь	Less direct expenses			Ş- ·		
Other Revenu	C	Net income or (loss) from fundraising even					1
O	1	Gross income from gaming activities					
	9 a	See Part IV, line 19	_		` `.		
		Less direct expenses			-		į
	b	Net income or (loss) from gaming activities		.† '			
	i			ļ		 	
	10a	Gross sales of inventory, less returns and allowances	•				1
				-		_	
	Ь	Less cost of goods sold		-	,		-
	С	Net income or (loss) from sales of inventory Miscellaneous Revenue	Business Code	0			
			Dusiliess Code	<u> </u>	·		1
	11a	MISC. INCOME		86,185.			86,185.
	b	ADMIN. FEE FROM UNITED WAY LOGAN COU		22,914.	22,914.		
	С	ADMIN. FEE FROM UNITED WAY CANADIAN	COUR	22,609.	22,609.		
	ď	All other revenue		 		<u> </u>	
	e	Total. Add lines 11a-11d · · · · · · · ·		131,708.	·-		<u> </u>
	12	Total revenue. See instructions	<u> </u>	29,986,576.	45,523.		432,190.

73-0589829

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (Å) but are not required to complete columns (B); (C), and (D).

Check if Schedule O contains a responsion of include amounts reported on lines 6b,		(B)	(C)	(D)
7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21.	16,369,635.	16,369,635.		_
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0	-	-	
3 Grants and other assistance to governments,				
organizations, and individuals outside the				
United States See Part IV, lines 15 and 16	- 0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors,				
trustees, and key employees	220,604.	46,507.	73,695.	100,402
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	1,309,828.	276,132.	437,564.	596,132
8 Pension plan accruals and contributions (include section				
401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	304,678.	88,068.	91,691.	124,919
10 Payroll taxes	127,630.	27,952.	42,194.	57,484
1 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	0			
d Lobbying				
e Professional fundraising services See Part IV, line 17	0			. <u>-</u>
f Investment management fees	94,337.	C 000	27.256	FA 003
g Other		6,088.	37,356.	50,893
12 Advertising and promotion	120,621. 152,636.	11,610. 15,029.	46,144. 58,249.	62,867 79,358
13 Office expenses	132,636.	15,029.	30,249.	/9,336
14 Information technology	0			
15 Royalties	183,870.		77,832.	106,038
16 Occupancy	23,891.	3,546.	8,612.	11,733
17 Travel	23,691.	3,340.	0,012.	11,733
18 Payments of travel or entertainment expenses	o			
for any federal, state, or local public officials	14,788.	2,537.	5,186.	7,065
19 Conferences, conventions, and meetings	0	2,337.	3,100.	7,003
20 Interest	184,491.	42,331.	60,176.	81,984
21 Payments to affiliates ATCH. 3	212,725.	12,001.	90,047.	122,678
· F	0		30,0171	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If				
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O)				
a CFC CAMPAIGN EXPENSE	196,318.	-	79,515.	116,803
b STATE CAMPAIGN EXPENSE	51,811.		20,985.	30,826
CITY CAMPAIGN EXPENSE	50,332.	•	20,386.	29,946
d DISASTER RELIEF	74,580.	74,580.		,-10
e All other expenses	176,802.	56,632.	4,442.	115,728
25 Total functional expenses. Add lines 1 through 24e	19,869,577.	17,020,647.	1,154,074.	1,694,856
26 Joint costs. Complete this line only if the			., =,	=,:::,:00
organization reported in column (B) joint costs			ļ	
from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If				
following SOP 98-2 (ASC 958-720)	o			
JSA				Form 990 (2011

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Part X		· · · · · · · · · · · · · · · · · · ·	Page I I
		(A)	(B)
•	•	Beginning of year	End of year
1	Cash - non-interest-bearing	9,224,224. 1	11,641,672.
2	Savings and temporary cash investments	1,359,176. 2	1,258,876.
3	Pledges and grants receivable, net	9,232,624. 3	15,480,332.
4	Accounts receivable, net	0 4	0
5-	Receivables from current and former officers, directors, trustees, key		
	employees, and highest compensated employees. Complete Part II of		
	Schedule I	d 5	5 0
6	Receivables from other disqualified persons (as defined under section		
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary		
,	employees' beneficiary organizations (see instructions)	d e	5 0
[7	Notes and loans receivable, net	0 7	7 0
Assets 8	Inventories for sale or use	0 8	3 0
9	Prepaid expenses and deferred charges	0 9	0
10:	Land, buildings, and equipment: cost or		
	other basis Complete Part VI of Schedule D 10a 6,078,035.	:	
l l	Less accumulated depreciation	4,564,800.10	4,155,263.
11	Investments - publicly traded securities	0 1	1 0
12	Investments - other securities. See Part IV, line 11	Q 1 :	2 0
13	Investments - program-related See Part IV, line 11	0 1:	3 0
14	Intangible assets	0 1	
15	Other assets See Part IV, line 11	53,805. 1	
16	Total assets. Add lines 1 through 15 (must equal line 34)	24,434,629.1	
17	Accounts payable and accrued expenses	7,185,872.	
18	Grants payable	<u>q</u> 1:	
19	Deferred revenue	0 1	
20	Tax-exempt bond liabilities	0 2	
<u>s</u> 21	Escrow or custodial account liability. Complete Part IV of Schedule D	0 2	1 0
<u>≡</u> 22	Payables to current and former officers, directors, trustees, key		
Liabilities 72	employees, highest compensated employees, and disqualified persons.	d a	
	Complete Part II of Schedule L	3,500,000.2	
23	Secured mortgages and notes payable to unrelated third parties ATCH 4		
24	Unsecured notes and loans payable to unrelated third parties.	0 2	4
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X		
	of Schedule D	0 2	5 0
26	Total liabilities. Add lines 17 through 25	10,685,872.2	
1	Organizations that follow SFAS 117, check here X and complete	20,000,0120,2	3,022,000.
S	lines 27 through 29, and lines 33 and 34.		
Fund Balances 8 2 2 9	Unrestricted net assets	13,087,763. 2	20,822,730.
<u> </u>	Temporarily restricted net assets		2,780,943.
호 29	Permanently restricted net assets	0 2	9 0
or Fur	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.		
	Capital stock or trust principal, or current funds	1	10
31	Paid-in or capital surplus, or land, building, or equipment fund		31
8 32	Retained earnings, endowment, accumulated income, or other funds		32
Net Assets 33 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Total net assets or fund balances		23,603,673.
34	Total liabilities and net assets/fund balances		32,615,523.
			Form 990 (2011)

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Forr	n 990 (2011)		Pa	ge 12
Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI		X	
1	Total revenue (must equal Part VIII, column (A), line 12)	29,9	86,	576.
2	Total expenses (must equal Part IX, column (A), line 25)	19,8	69,	<u>577.</u>
3	Revenue less expenses Subtract line 2 from line 1	10,1		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			757.
5	Other changes in net assets or fund balances (explain in Schedule O)		62,	083
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	23,6	503,	673.
Pa	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash _X Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain it Schedule O	ן		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a		X
b	Were the organization's financial statements audited by an independent accountant?	2 b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O	n		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer	e		
	issued on a separate basis, consolidated basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth i	n		
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	e		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b	<u></u>	<u> </u>

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the agreement on

► Attach to Form 990 or Form 990-EZ See separate instructions

Inspection

Name of	the organization							Employ		fication number
UNITE	O WAY OF CENTR									0589829
Part I	Reason for Publ	ic Charity Status	(All organizations mu	st com	plete	this pa	rt) Se	e instru	ictions.	····
The orga			ause it is (For lines 1 th						. –	
1	A church, convention	n of churches, or	association of churches	describ	ed in s	ection 1	170(b)(1)(A)(i).		
2			1)(A)(ii). (Attach Schedul							
3			ervice organization descr						-	
4	A medical research	n orgánization ope	erated in conjunction wi	ith a h	ospital	descri	bed in	section	170(b)(1)(A)(iii). Enter the
	hospital's name, city									
5	An organization op	erated for the ber	nefit of a college or univ	ersity o	owned	or ope	rated b	y a gov	vernmer	ntal unit described in
	section 170(b)(1)(A									
6			or governmental unit des							
7 X	-		es a substantial part of it	s supp	ort fro	m a go	vernme	ntal un	it or fro	m the general public
	described in section									
8			on 170(b)(1)(A)(vi). (Com					_		
9			s (1) more than 331/3%							
			exempt functions - sub							
			me and unrelated busi						1 511 1	tax) Irom businesses
40			e 30, 1975 See section							
10			ted exclusively to test for rated exclusively for the							or to carry out the
11			pported organizations de							
			es the type of supporting							
	a Type I	b Type				ally inte				Type III - Other
е			the organization is not			-	_	rectly b		J ''
- [gers and other than one							
	509(a)(1) or section		-		•			_		
f	If the organization	received a writte	n determination from th	ie IRS	that it	ıs a Ty	pe I, T	ype II,	or Type	e III supporting
	organization, check									
g	Since August 17, 2	006, has the organ	nization accepted any gif	t or co	ntributi	on from	any of	the		
	following persons?									
			ectly controls, either alo							
		-	ly of the supported orgai	nization	?					
	• •	•	scribed in (i) above?							
			on described in (i) or (ii) a							[11g(iu)]
<u>h</u>			ut the supported organiz	1		1		r		
(i)	lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	organi	Is the zation in		ou notify anization		s the zation in	(vii) Amount of support
	0.9424.0		above or IRC section	col (I)	listed in overning	in col	(ı) of	col (ı) o	rganized	
			(see instructions))		Ment?	Yes	No No	Yes	US?	
				165	140	165	110	163		
(A)							}			
·				+	<u> </u>					<u> </u>
(B)					Ì					
						 			<u> </u>	····
(C)		-		1						
-				 -	†	1				
(D)			-							
				1	†					
(E)										
Total					1			1		1

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

	V = 110 + 4 + 4 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)	
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify un	ıder
•	Part III If the organization fails to qualify under the tests listed below, please complete Part III)	

						
	(-) 2007	(L) 2009	(=) 2000	(4) 2010	(a) 2011	(A Total
ndar year (or fiscal year beginning in)	(a) 2007	(B) 2008	(c) 2009	(0) 2010	(e) 2011	(f) Total
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	18,333,297	18,649,224	19,091,271.	18,659,882	- 29, 554, 386	104,288,060
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
Total. Add lines 1 through 3	18,333,297.	18,649,224	19,091,271.	18,659,882.	29,554,386.	104,288,060.
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount	_			, J.a.,		535,053.
• •) A		
		٠ , هـ		2011		103,753,007.
	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
					 	104,288,060.
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	173,533.	98,879.	20,441.	31,513.		358,121.
Net income from unrelated business activities, whether or not the business is regularly carried on						
Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . ATCH. 1	218,222.	64,075.	74,198.	58,586.	86,185.	501,266.
•			<u> </u>	` -	, 3, ,, -, ,	105,147,447.
	see instructions) .		<i></i> .		12	
First five years. If the Form 990 is f	or the organizat	ion's first, secor	nd, third, fourth,	or fifth tax ye	ar as a section	
tion C. Computation of Public Sup	port Percenta	ge				
Public support percentage for 2011 (li	ne 6, column (f) divided by line	11, column (f))		14	98.67%
Public support percentage from 2010	Schedule A, Pa	art II, line 14			15	98.82%
• •	•					
•						
_						
_						i 1
IIISTUUUIIS						
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	A contribution in the con	Action A. Public Support Indar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	Anounts from line 4	tion A. Public Support Inder year (or fiscal year beginning in) Inder year you supported on its behalf Inder year you supported on its behalf Inder year you granted you governmental unit to the organization or departmental unit to the organization without charge Inder year you granted you governmental unit to the organization without charge Inder year (or fiscal year beginning in) Inder year (or	Indar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants"). Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge. Total. Add lines 1 through 3. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 11, column (f). Public support. Subtract line 5 from line 4. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Net income from unrelated business activities, whether or not the business is regularly carried on. Circle rich and portion of total captor to the organization's first, second, third, fourth, or fifth tax year as a section organization, check this box and stop here (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (b) 2009 (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (c) 2009 (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (c) 2009 (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (c) 2009 (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (c) 2009 (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (d) 2010 (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (e) 2011 18, 333, 297. 18, 649, 224. 19, 091, 271. 18, 659, 882. 29, 554, 386. (e) 2011 2012 2013 2013 2014 2015 2016 201

Darf III	Support Cabadula	for Organizations	Described in Section	E00/a1/21
raitiii	Support Schedule	101 Organizations	Described in Section	i Justaj(Z)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

alei	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")						`
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						1
	organization's tax-exempt purpose						1
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513]
4	Tax revenues levied for the				 		
	organization's benefit and either paid						ļ
	to or expended on its behalf						l
5	The value of services or facilities		· · · · · · · · · · · · · · · · · · ·				
•	furnished by a governmental unit to the						
	organization without charge						
c		.		<u> </u>			
	Total. Add lines 1 through 5	 					
1 a	Amounts included on lines 1, 2, and 3						
b	received from disqualified persons Amounts included on lines 2 and 3		 				
	received from other than disqualified				1		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			ļ 		 	
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6)		<u> </u>			1	
<u>sec</u>	tion B. Total Support					- ,	
aleı	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	. <u></u>					
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
	sources					 	
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975					ļ <u>. </u>	
С	Add lines 10a and 10b						<u></u>
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV)						
3	Total support. (Add lines 9, 10c, 11,			1			
	and 12)						
14	First five years. If the Form 990 is for	the organization	on's first, second.	third, fourth, or	r fifth tax year	as a section 501	(c)(3)
	organization, check this box and stop here .						1
Sec	tion C. Computation of Public Sup						
5	Public support percentage for 2011 (line 8,			mn (f))		15	
6	Public support percentage from 2010 Sche						
	tion D. Computation of Investmer					.1	·
7	Investment income percentage for 2011 (III			13 column (f))	-	17	-
18	Investment income percentage for 2011 (in						
	331/3% support tests - 2011. If the org						and line
Ja			-				,
	17 is not more than 331/3%, check the						
	331/3% support tests - 2010. If the orga				•		
b	line 18 is not more than 331/2% chock	This hav and a					
b 20	line 18 is not more than 331/3%, check Private foundation. If the organization		•	•			

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions)

				=	ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCO	ME				
DESCRIPTION -	2007	2008	2009	2010	2011	TOTAL
TICKET /REGISTRATION REVENUE	20,650.	18,900	16,430.	17,275	17,742.	90,997
MISCELLANEOUS REVENUE	197,572.	45,175.	57,768.	41,311	68,443.	410,269
TOTALS	218,222.	64,075	74,198.	58,586.	86,185.	501,266

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," to Form 990,

OMB No 1545-0047

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization 73-0589829 UNITED WAY OF CENTRAL OKLAHOMA, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year)..... Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register...... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ ______ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

							-				
3,	Using the organization's acquisition collection items (check all that apply		on, and other	record	s, check	c any of	the follow	ring that ar	e a sigr	nificant use of	ıts
а	Public exhibition		d		Loa	n or exch	ange prog	rams			
b	Scholarly research		е		Oth	er					
С	Preservation for future gen	erations									_
4	Provide-a description of the organi		ollections and	explai	n how t	hey furth	er the or	ganization's	exemp	t purpose in P	art
	XIV		· · · · ·	•	-	,	`	•	•	• •	
5	During the year, did the organization	solicit or	receive donation	ons of	art, histo	orical trea	sures, or	other simila	ır		
•	assets to be sold to raise funds rathe									Yes	No
Dar	t IV Escrow and Custodial Ar										
rai	line 9, or reported an am					iizalioi i c	ilisweieu	163 (01	Omi 33	o, raitiv,	
-	inte o, or reported arrange	ount on i	01111 000, 1 41		10 2 1.						
1.	Is the organization an agent, trustee	custodiar	or other inter	madia	ry for co	ntribution	ne ar athai	accate not			
ıa	included on Form 990, Part X?									Yes 🗍	No
									[res	NO
D	If "Yes," explain the arrangement in	Part XIV a	na complete tr	ie iolio	wing tai	ne L				·	
	-					H		Ar	nount		—
	Beginning balance										
d	Additions during the year										
е	Distributions during the year								· · · · · · · ·		
	Ending balance					_			т		
2a	Did the organization include an amo	ount on Fo	rm 990, Part X	I, line 2	17				[Yes	No
	If "Yes," explain the arrangement in										
Par	t V Endowment Funds. Com	plete if th				"Yes" to	Form 99				
		(a) Curre	nt year (b) Prior	year	(c) Two	years back	(d) Three ye	ears back	(e) Four years ba	ıck
1 a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains,									1	
	and losses										
d	Grants or scholarships										
е	Other expenditures for facilities .										
	and programs					1					
f	Administrative expenses										
g	End of year balance					· · · · · · · · · · · · · · · · · · ·					
2	Provide the estimated percentage o	f the curre	nt vear end ba	lance	(line 1a	column (a)) held as				
a	Board designated or quasi-endowm		%		· · · · · · · · · · · · · · · · · · ·	,	- //				
b	Permanent endowment ►	~									
	Temporarily restricted endowment i		%								
_	The percentages in lines 2a, 2b, and										
3 a	Are there endowment funds not in t			ıanızat	ion that	are held	and admi	nistered for	the		
	organization by:	no pocooc	,0,0,1,0,0,1,0	,		0.0	a a			Yes	No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
h	If "Yes" to 3a(II), are the related organizations.									3b	
	Describe in Part XIV the intended us										
4											—
Par	t VI Land, Buildings, and Equ	ipment. S		T T			1				
	Description of property		(a) Cost or other to (investment)	asis		or other basi other)		cumulated reciation	·	d) Book value	
	Land	<u> </u>									
þ	Buildings	[<u></u>			570,54		23,261.		3,847,28	
C	Leasehold improvements	• • • •				192,70		85,217		7,48	
d	Equipment	[171,04		71,550		299,49	}1.
е	Other	<u></u> . [143,74	4. 1	42,744.		1,00	0.
Tota	II. Add lines 1a through 1e. (Column	(d) must e	qual Form 990	Part >	K, colum	n (B), line	10(c).)	▶		4,155,20	53.
		, =,	-,		,	(=/,	-1-/-/			,, <u>-</u>	

Schedule D (Form 990) 2011

Page	3
raue	

Part VIi	Investments - Other Securities. See	Form 990, Part X, Iin	e 12.
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al derivatives		
• •	-held equity interests		
(B)			
<u>(C)</u> (D)			
(E)			
(F)			-
(G)			
(H)			
(I)			
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	>	
Part VIII	Investments - Program Related. See	e Form 990, Part X, Iir	ne 13
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)	>	
Part IX	Other Assets. See Form 990, Part X		
		(a) Description	(b) Book value
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	nn (b) must equal Form 990, Part X, col (B) line 15)		<u></u>
Part X	Other Liabilities. See Form 990, Pa		150
1.	(a) Description of liability	(b) Book val	ue
	eral income taxes		
(2)			
(3)			
(4)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			الم المستعدد
	mn (b) must equal Form 990, Part X, col (B) line		7.00
2. FIN 48	(ASC 740) Footnote. In Part XIV, provide t	he text of the footnote to	o the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XIV Supplemental Information (continued)

PART XII, LINE 2D AND 4B

OTHER AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART VIII, LINE 12 OF \$533,516 ARE NET REVENUE FROM UNITED WAY LOGAN COUNTY (FEIN 73-1279596) AND UNITED WAY CANADIAN COUNTY (FEIN 30-0092336) OF \$226,060 AND \$307,456, RESPECTIVELY. THESE ORGANIZATIONS ARE INCLUDED IN THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS BUT FILE SEPARATE FORM 990'S.

OTHER AMOUNTS INCLUDED INCLUDED ON FORM 990, PART VIII, LINE 12 BUT NOT ON LINE 1 INCLUDE: \$7,008,119, WHICH REPRESENTS AMOUNTS DESIGNATED BY DONORS FOR SPECIFIC ORGANIZATIONS.

PART XIII, LINE 2D AND 4B

OTHER AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25 INCLUDE \$226,060 OF GRANTS PAID BY UNITED WAY LOGAN COUNTY (FEIN: 73-1279596) AND \$307,456 OF GRANTS PAID BY UNITED WAY CANADIAN COUNTY (FEIN: 30-0092336). THESE ORGANIZATIONS ARE INCLUDED IN THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS BUT FILE SEPARATE FORM 990'S.

OTHER AMOUNTS INCLUDED ON FORM 990, PART IX, LINE 25 INCLUDE: \$7,008,119, WHICH REPRESENTS GRANTS PAID FROM DONORS WHO RETAINED THE ABILITY TO DESIGNATE SPECIFIC ORGANIZATIONS AS RECIPIENTS.

Part XIV Supplemental Information (continued)

PART XI, LINE 8

ASC 715 ADJUSTMENT - (\$262,083)

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations

OMB No 1545-0047

(Form 990)	Giains ai		diality and Other Assistance to Organizations,	0 OI yai 112a	tions,		
	Governmer	its, and In	nts, and Individuals in the United States	the United	d States		
Department of the Treasury Internal Revenue Service	Complete if the or	ganization ans ► Att	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	orm 990, Part IV,	line 21 or 22.		Open to Public Inspection
Name of the organization						Employer identification number	ion number
UNITED WAY OF CENTRAL OKLAHOMA,	A, INC.					73-0589829	6
Part General Information on Grants and Assistance	and Assistance						-
1 Does the organization maintain records to substantiate the	o substantiate the		grants or assistan	ce, the grantees'	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	or assistance, and	[
the selection criteria used to award the grants or assistance?	rants or assistance	oring the use of	f arant funds in the				X Yes No
į,	to Governments	and Organiza	tions in the Unit	ed States Com	and Organizations in the United States. Complete if the organization answered "Yes"	ation answered "Ye	.v.
_	onal space is ne	that received eded	more than \$5,00	0. Check this b	that received more than \$5,000. Check this box if no one recipient received more than \$5,000 eded	nt received more th	an \$5,000 ▶
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SEE STATEMENT 2	1		16,369,635.				GRANTS IN SUPPORT OF
							_
(3)							
(4)						-	
(5)						4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(6)							
(6)						-	
(10)							-
(11)							-
(1 <u>2</u>)							
2 Enter total number of section 501(c)(3) and government or 3 Enter total number of other organizations listed in the line 1	and government or	ganizations liste	ganizations listed in the line 1 table table	0			
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ne Instructions for	· Form 990.				Sched	Schedule I (Form 990) (2011)
JSA		•	1	,			

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Schedule 1 (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed.	grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)					
Part III Grants and Other Assistance to Part III can be duplicated if addition	(a) Type of grant or assistance			S	9	

EXPLANATION FOR SCHEDULE I, PART 1

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

MEMBER ORGANIZATIONS APPLY ANNUALLY FOR ALLOCATIONS FROM THE ANNUAL

UNITED WAY FUNDRAISING CAMPAIGN. THESE ORGANIZATIONS ARE REVIEWED

ANNUALLY BY THE BOARD OF DIRECTORS. THE BOARD EITHER ACCEPTS OR REJECTS

THE APPLICATIONS. ORGANIZATIONS MUST MEET MEMBERSHIP REQUIREMENTS WHICH

ORGANIZATIONS MUST INCLUDE AMONG OTHER REQUIREMENTS, THE FOLLOWING: 1.

CONDUCT A RECOGNIZED PROGRAM OF HEALTH AND WELLNESS WITHIN CENTRAL

OKLAHOMA. 2. ORGANIZATIONS MUST SHOW EVIDENCE THAT THEY ARE EFFECTIVELY

MEETING A MAJOR NEED. 3. IF LOCAL, ORGANIZATIONS MUST BE INCORPORATED

UNDER THE STATE LAWS OF OKLAHOMA AS A NON-PROFIT CHARITABLE ORGANIZATION

Schedule I (Form 990) (2011)

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2	-					
က						-
4						
5						
9						
7						
Part IV	Part IV Supplemental Information. Complete this part to	is part to pro	ide the informat	ion required in	Part I, line 2, and any	provide the information required in Part I, line 2, and any other additional information

4. ORGANIZATIONS MUST BE CERTIFIED BY THE IRS AS CORPORATIONS ORGANIZED

ORGANIZATIONS MUST 5. AND OPERATED EXCLUSIVELY FOR CHARITABLE PURPOSES. 6. ORGANIZATIONS MUST DEMONSTRATE A BUDGETARY NEED FOR THE ALLOCATION.

DEMOSTRATE FINANCIAL ACCOUNTABILITY.

V 11-6.1

1:18:25 PM

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Open To Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Part I

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number 73-0589829

	9				
HNTTED	WAY	OF	CENTRAL.	OKT.AHOMA.	TNC

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V-line 40b

			(c) C	песнед?
1	(a) Name of disqualified person	(b) Description of transaction	Yes	No
(1)				
(2)	•		L	_
(3)			<u> </u>	<u> </u>
(4)			_	<u>L</u> .
(5)				L
(6)				<u>L</u>
2	Enter the amount of tax imposed on the organization ma	nagers or disqualified persons during the year		
	under section 4958			
3	Enter the amount of tax, if any, on line 2, above, reimbur	sed by the organization		

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

	(a) Name of interested person and purpose		n to or from anization?	(c) Original principal amount	(d) Balance due	(e) In (default?	(f) Ap by bo comm	ard or	(g) W agreer	
		To	From			Yes	No	Yes	No	Yes	No
(1)											
(2)							_				
(3)											<u> </u>
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
Total				▶\$	<u> </u>						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
7)		
(8)	-	
(9)		
0)	<u> </u>	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2011

Schedule L (Form 990 or 990-EZ) 2011

Page 2

Partiv	Business Transactions involving interested Persons.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organi: reven	
		ĺ		Yes	No
(1) SEE SCHEDULE O		-			
(2)	-				
(3)					
(4)					
(5)					
(6)	·				
(7)					
(8)					
(9)				1	
(10)					

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

	OMB No	1545-0047	,
	20	11	
168		ro Publi	C
	≣ Insp	ection	===

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number

73-0589829

Par	Types of Property				<u> </u>			
		(a) Check if applicable	(b) Number of contributions or items contributed	C(c) — Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash conti		_	
1	Art - Works of art						-	
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	7.	78,887.	FAIR MARK	ET V	JALU	E
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation	,						
	contribution - Other	 						
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy			_				
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							····
25	Other ►()							
26	Other ►()							
27	Other ►()				<u> </u>			
28	Other ►()							
29	Number of Forms 8283 received							
	which the organization completed	Form 8283,	Part IV, Donee Acknowledge	gement	29			
							Yes	No_
30 a	During the year, did the organiza		· ·			:	j	
	it must hold for at least three year				-			
	used for exempt purposes for the e		g periód?			30a		<u> </u>
b	If "Yes," describe the arrangement							
31	Does the organization have a contributions?					31	х	
32 a	Does the organization hire or us	e third part	ies or related organization	ns to solicit, process, or	sell noncash			
	contributions?	-	-	·		32a		Х
b	If "Yes," describe in Part II	· · · · · ·						
33	If the organization did not report a	n amount in	column (c) for a type of pro	operty for which column (a	ı) ıs checked,		}	
	describe in Part II.		., ,, ,,		•			
							بـــــــــــــــــــــــــــــــــــــ	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2011)

Schedule M (Form 990) (2011)

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number 73-0589829

PART VI, SECTION A, QUESTION 2 THE BOARD OF DIRECTORS OF THE ORGANIZATION IS EXTREMELY ROBUST AND ENCOMPASSES INFLUENTIAL BUSINESS MEN AND WOMEN IN THE COMMUNITY. IT IS POSSIBLE THAT MEMBERS MAY HAVE BUSINESS/FAMILY RELATIONSHIPS. HOWEVER, THESE POTENTIAL RELATIONSHIPS DO NOT CREATE ANY ISSUES OR

PART VI, SECTION B, QUESTION 11B THE FORM 990 WAS REVIEWED BY THE EXECUTIVE COMMITTEE AND THE CHAIRMAN OF THE AUDIT COMMITTEE PRIOR TO FILING THE RETURN.

CONFLICTS IMPACTING THE OPERATION OF THE ORGANIZATION.

PART VI, SECTION B, QUESTION 12C THE ORGANIZATION REQUIRES AN ANNUAL ACKNOWLEDGEMENT THAT THERE ARE NO VIOLATIONS OF THE CONFLICT OF INTEREST POLICY.

PART VI, SECTION B, QUESTION 15A & 15B THE COMPENSATION OF THE CEO IS REVIEWED ANNUALLY BY THE HUMAN RESOURCES/PERSONNEL COMMITTEE.

SCHEDULE L, PART IV

THE BOARD OF DIRECTORS ARE BUSINESS MEN AND WOMEN AMONG THE COMMUNITY. THE ORGANIZATION MAY HAVE SOME BUSINESS RELATIONS WITH MEMBERS OF THE BOARD BUT ALL TRANSACTIONS ARE DONE AT ARMS LENGTH.

Employer identification number

73-0589829

PART VI, SECTION C, QUESTION 19 THE ORGANIZATION ALLOWS THE PUBLIC TO VIEW ITS GOVERNING DOCUMENTS, . CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS BY REQUESTING THEM AT THE ORGANIZATION'S MAIN OFFICE.

PART XI, LINE 5 ASC 715 ADJUSTMENT - \$262,083

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

THE UNITED WAY OF CENTRAL OKLAHOMA IS A CHARITABLE ORGANIZATION WITH A VISION TO BUILD A STRONGER, HEALTHIER, AND MORE COMPASSIONATE COMMUNITY. WE ACCOMPLISH THIS BY CONVENING AND FUNDING QUALIFIED HEALTH, YOUTH, AND HUMAN SERVICE CHARITIES WHO SERVE THE LOCAL NEEDS OF COMMUNITIES WITHIN SEVEN CENTRAL OKLAHOMA COUNTIES. SINCE 1924, UNITED WAY OF CENTRAL OKLAHOMA HAS PARTNERED WITH NON-PROFIT AGENCIES TO PROVIDE EXPERTISE, SUPPORT AND SOLUTIONS TO THE NEEDS OF ITS LOCAL CITIZENS. WE FUND PROGRAMS OF PARTNER AGENCIES WITH DONATIONS COLLECTED FROM THE PUBLIC IN AN ANNUAL CAMPAIGN HELD IN THE FALL. AS A PART OF THE CAMPAIGN INITIATIVE, UNITED WAY OF CENTRAL OKLAHOMA ALSO MANAGES FEDERAL, STATE AND MUNICIPAL EMPLOYEE CAMPAIGNS. THE DONATED FUNDS ARE DISTRIBUTED THE FOLLOWING YEAR TO PARTNER AGENCIES THROUGH AN ALLOCATION PROCESS CALLED COMMUNITY INVESTMENT. TO SUPPORT OUR COMMITMENT TO ACCOUNTABILITY AND TRANSPARENCY, ALLOCATION DECISIONS ARE MADE BY MORE THAN 200 COMMUNITY VOLUNTEERS FROM OUR DONOR BASE AND DONOR DETERMINED DESIGNATIONS,

Name of the organization
UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number 73-0589829

ATTACHMENT 1 (CONT'D)

WHICH ARE APPROVED BY UNITED WAY'S BOARD OF DIRECTORS.

UNITED WAY OF CENTRAL OKLAHOMA PLAYS AN INTEGRAL ROLE IN MANY
COMMUNITY INITIATIVES AND PROVIDES PROGRAMS SUCH AS THE VOLUNTEER
CENTER, WHICH IS A VOLUNTEER CLEARINGHOUSE TO SUPPORT TUTORING
PROGRAMS, READERS, AND OTHER SOCIAL SERVICES; THE CENTRAL OKLAHOMA
TURNING POINT TO ADDRESS LOCAL PUBLIC HEALTH ISSUES; AND THE
PUBLISHED RESEARCH INFORMATION WE PROVIDE CIVIC LEADERS AND
CITIZENS TO RAISE AWARENESS OF CURRENT COMMUNITY NEEDS.

FORM 990, PART VIII - INVESTMENT INC	COME		ATTACHMENT 2	
DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST INCOME	33,75	5.		33,755.
TOTALS	33,75	5.		33,755.

FORM 990, PART IX - PAYMENTS TO AFFIL	IATES	ATTACHM	ENT 3	<u> </u>	
DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES	
NATIONAL UNITED WAY DUES	184,491.	42,331.	60,176.	81,984.	
TOTALS	184,491.	42,331.	60,176.	81,984.	

Name of the organization

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number

73-0589829

ATTACHMENT 4

FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE

LENDER: LINE OF CREDIT

ORIGINAL AMOUNT:

3,600,000.

INTEREST RATE:

3.250000-

DATE OF NOTE:

VAR

ENDING BALANCE DUE

MATURITY DATE:

06/29/2012

REPAYMENT TERMS:

INTEREST PAYABLE MONTHLY PRINCIPAL DUE AT MATURITY

SECURITY PROVIDED:

BUILDINGS/IMPROVEMENTS

PURPOSE OF LOAN:

DESCRIPTION AND FMV

OPERATIONS CASH

OF CONSIDERATION:

BEGINNING BALANCE DUE

3,500,000.

1,555,487.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE

3,500,000.

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE

1,555,487.

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Name of estate or trust

UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number

73-0589829

Part I Short-Term Capital Gains and L			ai Of Less	1	(f) Gain or (loss) fo
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b	asis the entire year
la					
	•	-			
			·		
b Enter the short-term gain or (loss), if any	from Schedule D	-1 line 1h			1b
b Like the short-term gain or (1033), it any	, nom schedule b	- i, iii e ib		· · · · · · · ·	
Short-term capital gain or (loss) from Fo	rms 4684, 6252,	6781, and 882	4		2
Net short-term gain or (loss) from partne	h C				
Net short-term gain or (loss) from partne Short-term capital loss carryover Ente					3
Carryover Worksheet		-		· ·	4 (
Net short-term gain or (loss). Combine	e lines 1a throu	gh 4 in colum	n (f) Enter here ar	nd on line 13,	
column (3) on the back	nesas - Assats	Held More Ti	han One Year		5
(a) Description of property	(b) Date acquired			(e) Cost or other b	asis (f) Gain or (loss) fo
(Example 100 shares 7% preferred of "Z" Co)	`(mo , day, yr)	(mo , day, yr)	(d) Sales pnce	(see instruction	
a					
			· · · · · · · · · · · · · · · · · · ·		
			<u> </u>		
		l			
b Enter the long-term gain or (loss), if any.	from Schedule D	-1, line 6b			6b
Long-term capital gain or (loss) from Fo	rms 2439, 4684,	6252, 6781, ar	nd 8824		7
Net long-term gain or (loss) from partner	rships, S corporat	ions, and other	estates or trusts		8
Capital gain distributions					9
Gain from Form 4797, Part I			-		10 312,25
Long-term capital loss carryover. Enter	the amount, if	any, from lin			322,20
Carryover Worksheet					11 (
Net long-term gain or (loss). Combine	lines 6a through	n 11 ın columi	n (f) Enter here and	d on line 14a,	
column (3) on the back					12 312,25

Sched	dule D (Form 1041) 2011						Page 2
	t III Summary of Parts I and II		(1) Benefi	ciaries'	(2) Est	tate's	
	Caution: Read the instructions before completing this	part	` (see ın		or tru		(3) Total
13	Net short-term gain or (loss)	13					
14	Net long-term gain or (loss):						
а	Total for year	14a					312,250.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b					
	28% rate gain	14c					
15	Total net gain or (loss). Combine lines 13 and 14a · · · · · · · ▶	15					312,250.
Note gains	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, co	(or Fori omplete	m 990-T, Pan e Part IV and t	l I, Iıne 4a he Capital) If lines 1 Loss Carryo	4a and 15 over Works	, column (2), are net heet, as necessary
Par	t IV Capital Loss Limitation					,	
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, li	ne 4c, if a trus	t), the sm	aller of		
Note	The loss on line 15, column (3) or b \$3,000. If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pagover Worksheet in the instructions to figure your capital loss carryover	ė i, im			e 34), is a	16 (loss, comp) lete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rate	es					
	1041 filers. Complete this part only if both lines 14a and 15 in colu) are gains.	or an am	ount is en	tered in F	Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is moi ion: Skip this part and complete the Schedule D Tax Worksheet in the	re thar	zero				
	ther line 14b, col (2) or line 14c, col. (2) is more than zero, or						
• B	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
	n 990-T trusts. Complete this part only if both lines 14a and 15 ar						
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	and co	mplete the \$	Schedule	D Tax Wo	orksheet	in the instructions
	her line 14b, col (2) or line 14c, col (2) is more than zero					,	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17				
18	Enter the smaller of line 14a or 15 in column (2)						
	but not less than zero						
19	Enter the estate's or trust's qualified dividends	`					
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T)		_				
20	Add lines 18 and 19		_				
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g; otherwise, enter -0-						
22	Subtract line 21 from line 20. If zero or less, enter -0-		22				
23	Subtract line 22 from line 17. If zero or less, enter -0		23				
	5-4						
24	Enter the smaller of the amount on line 17 or \$2,300		24		·		
25	Is the amount on line 23 equal to or more than the amount on line 24					i	
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box		0.5				
26	No. Enter the amount from line 23					{	
26 27	Subtract line 25 from line 24		26			-	
27			27				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ne 22	27	· · · · · ·			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
	Cubinet has 20 feet had 27						
29	Subtract line 28 from line 27					.	
30	Multiply line 29 by 15% (.15)					30	
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rat						
	(see the Schedule G instructions in the instructions for Form 1041)					31	
2 2	Add lines 20 and 24						
32	Add lines 30 and 31					32	
33	Figure the tax on the amount on line 17. Use the 2011 Tax Rat					, ,	
2 4	(see the Schedule Ginstructions in the instructions for Form 1041).					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33	пеге а	iiiu on Form	1041, 8	cneaule	1	

Schedule D (Form 1041) 2011

JSA 1F1220 2 000 Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side UNITED WAY OF CENTRAL OKLAHOMA, INC.

Employer identification number 73-0589829

Cart Long-Term Capital Gains and (a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d
MATURITIES OF INVESTMENTS	VARIOUS	VARIOUS	100,300.	100,300.	
	-		100,300.	100,000.	
	-				
				-	
					-
	1				
				1	
	<u> </u>			<u> </u>	

2011 Officers of the Board

Chairman of the Board: STUSSI. DOUG

Executive Vice President and CFO Love's Travel Stops & Country Stores, Inc.

Assistant Secretary/Treasurer: WHARTON, SHANE

Vice President of Accounting Love's Travel Stops & Country Stores, Inc.

Secretary/Treasurer: HARLOW, DAVID

President BancFirst

2011 Committee Chairs

Administration Committee:

MCGUIRE, MATT

Senior Vice President, Director of Investments Heritage Trust Company

Campaign Chairman: BURGER, MARTHA

Senior Vice President – Human & Corporate Resources

Ethics Committee Chairman: YOUNG, GEORGE E.

Pastor

Holy Temple Baptist Church

Legal Counsel/Strategic Planning Committee

Chair::

MCKINNEY, KENNETH N.

Attorney

Tomlinson & O'Connell

Personnel Chair: BELT Ph. D, JOY REED

President
Joy Reed Belt & Associates/Joy Reed Belt Search
Consultants

Special Events Chair: BINKOWSKI. BEV

Director, Public Affairs

Blue Cross and Blue Shield of Oklahoma

Audit Committee Chairman:

WOOD, MARK

Managing Partner/Oklahoma Tax Market Leader Ernst & Young LLP

Community Investment Chair:

David Schroeder

Labor Chairman: SNEED, PERRY

Marketing Chair: HENDRICK, MARY

The Journal Record Publishing Company

Research & Community Initiative Chair:

JOSEPH, MIACHAEL E.

Attorney McAfee & Taft

Two Leadership Square, 10th Floor

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President

Adlife HomeCare

BOZALIS MD, JOHN

Physician/Owner

Oklahoma Allergy & Asthma Clinic

ANDREWS MD, DEWAYNE

Vice President for Health Affairs & Executive Dean,

College of Medicine

University of Oklahoma Health Sciences Center

BURGER, MARTHA

Senior Vice President-Human Corporate

Resources

Chesapeake Energy Corporation

ARMITAGE MD, JOHN

STATEMENT 1

CLEMENTS, ROBERT

President & CEO

· Oklahoma Blood Institute

BELT Ph. D. JOY REED

President

Joy Reed Belt & Associates/Joy Reed Belt Search Consultants

BINKOWSKI, BEV

Director, Public Affairs

Blue Cross and Blue Shield of Oklahoma

CURRY, JIM

President

Oklahoma State AFL-CIO

DAVIES Ph.D. MARK

Dean

Petree College of Arts and Sciences

Oklahoma City University

DELANEY, PETE

Chairman, President & CEO

OGE Energy Corp

DENNIS, PAT

Vice President of Operations

OPUBCO

DOBSON, TODD

Senior Executive Vice President, Chief Financial

Officer

Mid First Bank

FARRELL, HILLARY

Chief Operating Officer

Ackerman McQueen

FLOWERS, LARRY

Bctgm Local 366 G

FUNKE, MARK W. President

Bank of Oklahoma, N. A -OKC

GONTERMAN, BRYAN

President-Oklahoma Division

AT&T

GOSDIN, JULIE A.

District Manager

United States Postal Service

JOSEPH, MIACHAEL E.

Attorney

McAfee & Taft

Two Leadership Square, 10th Floor

KREIDLER, STEVE

Executive Vice President

University of Central Oklahoma

STATEMENT 1

Executive Vice President

Clements Foods

COATS, MIKE

Commercial Banking Officer

IBC Bank

DYE, RONALD G.

CWA President

CWA Local 6016

EDMONDS, TODD

AIA, Principal

HSE Architects

EDWARDS, CARL

Partner

Price Edwards and Company

EISSENSTAT, ERIC

Sr. Vice President and Chief Legal Officer

Continental Resources, Inc.

ELDER, JAMES

Attorney/Partner

Mock Schwabe Waldo Elder Reeve & Bryant

HARLOW, DAVID

President

BancFirst

HENDRICK, MARY

Circulation/Production Manager

The Journal Record Publishing Company

HUDSON, CLIFF

Chairman/CEO

Sonic, America's Drive-In

JACKSON, DAVID

President, Oklahoma City

JP Morgan Chase Bank NA

LUONG, BAT.

Executive Vice President

Super Cao Nguyen

MARCUM, ALAN

Executive VP-Administrator

Devon Energy Corporation

MARTIN, EDMUND

Chairman of the Board

Ackerman McQueen

MASON, STEVE

President

Cardinal Engineering

MCGUIRE, MATT

·LIPPERT JR., D. E. "RICK"

President

Lippert Brothers, Inc.

LITCHFIELD, LINDA COMMUNITY VOLUTNEER

MCKINNEY, KENNETH N.

Attorney

Tomlinson & O'Connell

MELON, MARY

(President & Publisher

The Journal Record

MILBOURN, WES

Executive Vice President & Station Manager

KFOR-TV Channel 4 and KAUT Channel 43

NICHOLS, J. Larry

Chairman & CEO

Devon Energy Corporation

NICHOLS, POLLY

Community Volunteer

PAUCHNIK, BETH

General Counsel & Chief Administrative Officer

INTEGRIS Health

PECK, KRISTIN

Vice President, Government and Public Affairs

Cox Communications

PHILLIPS, GREGORY A.

President

Oklahoma Natural Gas

ROONEY, PAT

Chairman & CEO

First National Bank of Oklahoma

SAMARRIPAS, NICK

Senior Credit Analyst and Loan Officer

Citizens Bank of Edmond

STUSSI, DOUG

Executive Vice President and CFO

Love's Travel Stops & Country Stores, Inc.

WHARTON, SHANE

Vice President of Accounting

Love's Travel Stops & Country Stores, Inc.

SYMCOX, LEE

President and Chief Executive Officer

First Fidelity Bank

STATEMENT 1

Senior Vice President, Director of Investments Heritage Trust Company

-NILES, DEE

Partner

KPMG LLP

O'CONNOR, TIM

President

Central Oklahoma AFL-CIO Labor Council

O'CONNOR, CATHY (President)

The Alliance for Economic Development of

Oklahoma City, Inc.

O'NEAL Ph.D., MIKE E.

President

Oklahoma Chrisitan University

OTTAWAY, CYNDA C.

Shareholder

Crowe Dunlevy

SCHROEDER, DAVID

Community Volunteer

SECHRIST Ph.D., PAUL

President

Oklahoma City Community College

SHINN, TONY

OKC Market President/Senior Credit Products

Officer

Bank of America/U.S. Trust

SMALLEY, DIANA

Mercy Health Center

SNEED, PERRY

SPRINGE.. KARL

Superintendent

Oklahoma City Public Schools

Thompson, David L.

Publisher

The Oklahoman Publishing Co.

TOWERY, T SCOTT

SAIC

WALLACE, JEAN

General Partner

Buttery Company LLP

WILKERSON, CHAD

Vice President and Branch Executive

Federal Reserve Bank of Kansas City--OKC

Branch

YOUNG, GEORGE E.

Pastor

Holy Temple Baptist Church

WOOD, MARK
Managing Partner/Oklahoma Tax Market Leader
Ernst & Young LLP

United Way of Central Oklahoma Partner Agency Payments	-
` A Chance to Change	83,525.02
American Heart Association	199,775.50
American Lung Association	80,585.52
American Red Cross-Heart of Oklahoma	57,426.46
American Red Cross-Canadian County	_ -
American Red Cross of Central OK	1,607,233.02
Areawide Aging Agency	38,488.00
Arthritis Foundation	117,499.96
Bethesda	25,500.00
Big Brothers Big Sisters	162,000.00
Boys Scouts of America-Last Frontier Council	491,297.54
Boys & Girls Club of OK County	150,000.02
Calm Waters Center for Children & Families, Inc	63,000.00
Camp Fire Boys & Girls-Heart of OK Council	244,317.04
CASA of Oklahoma County	
Catholic Charities of the Arch Diocese	319,069.00
Celebrations! Educational Services, Inc.	141,750.00
Central OK Integrated Network Systems (COINS)	27,895.00
Citizens Caring for Children	98,702.52
Coffee Creek Riding Center for the Handicapped	97,193.96
Community Literacy Centers Consumer Credit Counseling	79,508.96
Daily Living Center	30,976.46 229,500.02
Dale Rogers Training Center	145,329.50
Dentist for the Disabled	83,469.04
Easter Seals of Oklahoma	12,057.02
Employment and Restoration Center (EARC)	76,400.02
Girl Scouts Red Lands Council	286,887.52
Health Alliance for the Uninsured	,
Heartline	151,105.04
Homeless Alliance	53,124.96
Hospice of Oklahoma County	170,000.04
John W. Keys Speech & Hearing Center	23,283.00
Latino Community Development Agency	147,726.50
Legal Aid Services of OK	132,838.50
Lennie Marie Tolliver Alternative Care Center	-
Mental Health Association of OK County	125,724.00
Metropolitan Better Living Center	81,000.00
Moore Youth and Family Services	80,993.98
Neighborhood Services Organization	258,137.52
North Care Center	246,499.94
OK Foundation for the Disabled	154,500.00
Oklahoma Goodwill Industries	48,803.98
Oklahoma Halfway House	- 6,295.98
Oklahoma Medical Research	135,000.04
Oklahoma United Methodist Circle of Care	25,254.00

Oklahoma Safe Kids Coalition	24,833 02	
` Parents Assistance Center	181,441.02	
Positive Tomorrows	172,725.02	
Possibilities, Inc	28,783.04	
Retired Senior Volunteer Program of OK County	132,050.02	
- Salvation-Army-Oklahoma County	- 940,824.44	
Special Care	345,006 48	
Sunbeam Family Services	775,185.46	
The Education & Employment-Ministry	26,250 00	
Tinker AFB Youth Council	20,031.50	
Upward Transitions	337,400 06	
Urban League of Greater OKC	354,975.99	
Variety Health Center	475,735.46	
YMCA of Greater Oklahoma City	202,500.00	
Youth Cornerstone	28,000.06	
Youth and Family Services	36,424.02	
Youth Services for Oklahoma County, Inc.	34,683.00	
YWCA	663,953.02	
	· · · · · · · · · · · · · · · · · · ·	
	Subtotal	11,570,476.19
State Charitable Campaign Agency Payments		
United Way of Central Oklahoma	218,918.98	
Community Health Charities	68,318.33	
Global Impact	17,499.23	
Regional Food Bank of Oklahoma	91,311.49	
Armed Forces Veterans Home Federation	11,584.90	
Allied Arts Foundation	11,184.77	
Lake Area United Way	826.21	
United Way of Ada	62.23	
United Way of Bartlesville	-	
United Way of Enid & NW OK, Inc.	635.23	
United Way of Lawton Ft Sill	899.22	
United Way of Norman	29,026.89	
United Way of Pottawatomie County	7,897.52	
United Way of South Central Oklahoma	324.70	
United Way of Stephens County	841.04	
United Way of Stillwater	185.60	
Tulsa Area United Way	2,451.30	
	Subtotal	461,967.64
Heart of the City Campaign Agency Payments		
United Way of Central Oklahoma	240,207.88	
Community Health Charities	79,392.65	
Regional Food Bank of Oklahoma	44,014.76	
-	,	

404,292.80

	Subtotal
Combined Federal Campaign Agency Payments	
Ada Area Youth Shelter Total	
Afghan Health & Development Svcs Total	144.03
African Children's Educ Iniative Total	371.40
African Children's Educational Initiative Total	458.06
Aging and Disabilities Charities of America Total	2,373.10
Aid for Africa Total	5,490.39
Aid to Africa Federation Total	3,294.87
AIDS Global Action, Inc. Total	996.79
Allied Arts Foundation Total	2,954.18
American Academy of Otolarygology-Head&Neck Surgery Fdn Total	336.63
American Red Cross Federation Total	33,913.27
American Sudden Infant Death Syndrome Institute Total	532.39
Americans United for Sep Church & State Total	142.29
America's Charities Total	42,046.82
Animal Charities of America Total	74,513.75
Answers in Genesis Ministries Total	615.33
Archdiocese For The Military Services USA Total	4,592.37
Asian Relief Total	575.22
Best Friends of Pets Total	10,455.46
Best Friends of Shelter Pets Total	4,329.40
Big Brothers Big Sisters of Oklahoma (Pottawatomie County) Total	694.81
Bless The Children Inc Total	188.36
Booker T Washington Community Center, Inc. Total	906.42
Bread and Water For Africa Total	775.68
Breast Cancer Relief Foundation Total	1,212.80
Breast Cancer Research & Assistance Fund Total	2,234.79
Burchette-Conners-Ellington-Hereford-Lynch College Education Total	171.48
CancerCure of America Total	60,860.06
CARE Association Adult Day Care Total	2,470.24
CASA of Oklahoma County Total	4,726.20
Catholic Chanties USA Total	8,329.63
Catholic Near East Welfare Assn Total	858.64
Central OK Habitat For Humanity Total	17,357.03
Central Oklahoma Humane Society Total	15,930.49
Child Aid USA Total	2,305.79
ChildAid International Total	3,923.55
Children First - America's Charities Total	19,088.95
Children First- America's Charities Federation Total	4,803.47
Children of Fallen Patriots Foundation Total	498.17
Childrens Charities of America Total	45,873.71
Children's Medical Chanties of America Total	42,968.72
Christian Charities USA Total	50,965.83

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	Christian Service Charities Total	117,613.75
•	Christian Services of Oklahoma Total	1,301.50
	Cimmarron Council Boy Scouts of America Total	373.14
	City Rescue Mission Total	23,372.18
	Community Development Support Assn Total	300.03
	Community Health Centers Total	1,453.62
	Community Health Charities Total	211,968.83
	Community Health Charities Ntl Total	206,634.83
	Conservation and Presevation Charities of America Total	25,483.45
	Cookson Hills Christian School, Inc Total	1,622.05
	Cross International Catholic Outreach Total	1,810.52
	Cure Alzheimer's Fund Total	145.72
	Cutaneous Lymphoma Foundation Total	480.89
	DARE America Total	492.81
	Diabetes Research Assistance Fund Total	3,157.57
	Disabled Children's Relief Fund Total	531.35
	Do Unto Others Amer Emergency Relief Total	15,017.30
	Drug Enforcement Administration Survivors Benefit Fund, Inc. Total	577.06
	Ducks Unlimited Inc Total	3,190.96
	Earth Share Total	20,231.10
	Educate America Total	12,934.14
	Educational Media Foundation Total	5,977.25
	Elks National Foundation Total	767.54 542.88
	Engineers Without Borders Total	
	FASTHound Greyhound Adoption, Inc. Total	6,815.79 1,097.20
	First Book Total Fish America Foundation Total	474.39
	Folds of Honor Foundation Total	7,752.55
	Food For The Poor Total	1,172.44
	Free To Live, Inc. Total	53,512.85
	Freedom from Religion Foundation Total	265.75
	Friends of Vance Families Total	6,211.85
	Fundacion Manos Juntos Total	3,225.77
	Genesis Project Inc Total	24,541.04
	Global Impact Total	42,081.78
	Guiding Eyes for the Blind Total	1,712.84
	Gun Owners Fdn Total	3,311.83
	Hands Together Total	133.72
	Harrah Senior Center Total	2,691.88
	Health and Medical Research Chanties of America Total	94,328.29
	Health First - America's Charities Total	33,807.09
	Heart and Stroke Research Fund Total	567.22
	Heart of America Foundation Total	350.34
	Heartland Lab Rescue Total	7,700.55
	Hearts for Hearing Foundation Total	3,839.03
	Helping Children Worldwide, Inc. Total	480.89
	Hentage Foundation Total	4,499.88

Hispanic United Fund Total	3,943.33
Homeless Children Total	519.08
Honor Flight, Inc. Total	820.08
Hope Center of Edmond Total	8,567.51
HOPE Community Service Inc Total	1,372.13
Hope for Haiti Total	- 1,047.16
Hope in Oklahoma Total	2,233.06
HUGS Project Total	25,701.91
Human and Civil Rights Org of Amer Total	9,069.18
Human Care Charities of America Total	17,262.26
Human Care Charities of America Federation Total	5,209.12
Human Development & Children Fdn Total	139.27
Human Service Charities of Amer Total	17,444.51
Hungry Children Project Total	326.32
Infant Crisis Services Total	33,133.37
Infant Parent Intervention Center Total	5,711.20
INTEGRIS Baptist Med Cntr of OK Foundation Total	209.35
Islamic Relief USA Total	561.06
Israel Fund Inc. Total	823.37
Jesus House, Inc Total	49,800.11
Jewish Aid Worldwide: America, Israel, and Beyond, Inc. Total	2,204.02
Jewish Charities of America Total	2,279.44
Jews for Jesus Total	179.17
Latin America Fund Inc. Total	131.06 1,508.65
Latter-Day Saint Charities Total	385.34
Latter-Day Saints Charities Total	384.04
Leading the Way Total	2,485.20
Life Adult Day Center Total Living Improvement for Elderly Center Total	655.82
Local Independent Charities of America Total	72,815.88
Lupus Research Institute, Inc. Total	3,415.55
Lutheran Braille Workers Inc. Total	561.06
Make A Wish Foundation Total	22,895.68
Maryknoll Fathers and Brothers Total	291.45
Medical Aid & Research Fund Total	158.81
Medical Research Charities Total	33,294.81
Melanoma Research Foundation Total	122.57
Mental Health Org of America Total	822.31
Mental Health, Addiction and Retardation Orgs. Of America Total	2,873.60
Merry Heart Guidance Center Total	1,752.46
Mid-Del Youth and Family Center Total	9,715.14
Military Vets and Patriotic Public Org of Amer Total	108,498.47
Ministries of Jesus Total	775.16
Mother to Mother Ministry of Oklahoma County Total	206.17
National Crime Prevention Council Total	577.06
National Public Radio, Inc. Total	4,424.10
Natl Amer Red Cross Total	8,134.34

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Natl Ataxia Fdp Inc Total	1,085.65
Natl Black United Fedn of Charities Inc Total	8,229.59
Natl Breast Cancer Fdn Total	723 45
Natl Fallen Firefighters Fdn Total	1,307.16
Natl Scoliosis Fdn Total	129.47
Natl Wild Turkey Fedn Inc Total	2,090 30
Neurofibromatosis, Inc Total	675.91
NeuroResorces Outreach Services Total	1,368.71
NRA Civil Rights Defense Fund Total	7,137.48
NRA Foundation, Inc. Total	6,047 12
OK Institute For Child Advocacy Total	190.32
OK Save A Dog Society Total	14,208.08
Oklahoma Blood Institute Total	2,183.43
Oklahoma Brain Tumor Foundation Total	2,096.11
Oklahoma Children's Cancer Association Total	15,514.14
Oklahoma City Community Foundation Total	737.81
Oklahoma Jail and Prison Ministries Total	7,151.25
Oklahoma Thoroughbred Retirement Program Total	2,841.22
One Church, One Child of OK Total	6,401.86
Operation Warmheart Total	3,149.53
Operation Warmheart Total	5,442.70 384.69
Paulist National Catholic Evangelization Association Total	377.33
Payne County Youth Services Total Peace and Reconciliation Charities Total	801.60
Planned Parenthood of Central OK Total	7,011.47
Postal Employees Relief Fund Total	711.12
Postal Workers Human Relations Total	3,440.83
Project C.U.R.E. Total	350.82
Reaching Our City Total	692.22
Real Rescue Total	5,652.38
Reason Foundation Total	146.58
Rebuilding Together, Inc. Total	6,391.84
Regional Food Bank of Oklahoma Total	123,131.60
RockySpot Rescue Total	11,186.90
Ronald McDonald House Charities OK Total	18,306.15
Scleroderma Foundation, Inc. Total	1,375.18
Second Chance Animal Sanctuary Total	37,784.95
Shawnee Family YMCA Total	1,326.81
Sky Cross Total	384.69
Smile Train Total	1,774.17
Smithsonian Institution Total	406.88
Sooner Golden Retriever Rescue Total	8,775.93
Specialized Alternatives for Families Total	133.16
Sports Charities USA Total	5,876.80
STARBASE Oklahoma, Inc. Total	373.62
Stillwater Domestic Violence Service Total	558.58
Stillwater Group Homes Total	256.52

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Stillwater Mobile Meals Total	768.31
Suited for Suceess, Inc. Total	2,011.92
The Arts Federation Total	1,937.00
The Childrens Center Total	23,086.34
The Christmas Connection Total	795.55
The Launching Pad Child Development Cntr Total	11,954.73-
The Oklahoma Caring Foundation, Inc. Total	3,708.71
The Right Path Riding Academy Total	889.28
The Salvation Army (Ada) Total	328.74
The Saville Center Total	139.27
The Unforgotten Total	539.42
Therapetics Service Dogs of Oklahoma Total	963.52
Tinker Family Readiness Fund Total	27,706.46
United Negro College Fund Total	12,189.61
United Service Orgs Inc Total	15,647.60
United Way Intl Total	931.15
United Way of Ada Total	2,651.44
United Way of Central Oklahoma Total	403,968.86
United Way of Enid & NW OK, Inc. Total	662.90
United Way of Norman Total	101,854.04
United Way of Pottawatomie County Total	2,975.79
United Way of Stillwater Total	2,397.51
USA Hockey Total	767.54
Veterans Research & Education Foundation Total	11,308.25
Victory Junction Gang Camp Inc. Total	1,439.60
Vietnam Asst For The Handicapped Total	1,509.33
Vietnam Children's Fund Total	3,157.08
Vietnam Veterans Memorial Fund Inc Total	814.96
Village by Village Total	646.11
Wild Animals Worldwide Total	8,038.71
Wildcare Foundation Total	15,530.27
Women Children and Family Service Charities Total	19,639.89
Wounded Warriors in Action Foundation, Inc. Total	400.77
Wounded Warnors Project Total	1,099.86 668.22
Wounded Warriors, Inc. Total	1,998.74
Youth and Family Resource Center, Inc. (Shawnee) Total	372.89
YWCA of Enid Total	120.45
Acoustic neuroma Assn The American Association for the Advancement of Science	272.41
American Legion Endowment Fund	433.64
Amer Radio Relay League	392.87
Big Brothers Big Sisters International	18.53
Blacks in Government	216.82
Bless the Children	122.77
Boat People S O S Inc	115.82
CDC Foundation	0.93
Chromosome 18 Registry and Researcg Soc	24.09
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	Couple to Couple League	72.27
•	Elks National Veterans Service Commission	301 14
	Embry-Riddle Aeronautical University	20 38
	ESA Foundation	240.91
	Fred Hutchinson Cancer Research Center	213.11
	Histiocytosis Assn of Amer	48.18
	The Jimmy Fund	111.19
	Natl League of Families of Amer Prisoners	60.23
	National Niemann-Pick Disease Foundation	277.97
	National Scoliosis Foundation	391.94
	Natl Wildlife Refuge Assn	242.76
	Navy Supply Corp Fdn Inc	169.56
	Polish Amer Assn	92.66
	Postal Employees Relief Fund	176.98
	Roger L. Von Amelunxen Fdn	120.45
	Salesian Missions, Inc.	167.71
	Science and Engineering Alliance	92.66
	Sunshine Foundation	103.78
	Support Our Agining Religious Inc	481.82
	The Tailhook Educational Foundation, Inc.	120.45
	US Navel Sea Cadet Corp	111.19
	Help the Afghan Children	240.91
	International Children's Care, Inc	120.45
	Womens Learning Partnership	22.24
	Sons of the Confederate Veterans, Inc	134.35
	Clear Water Initiative Corporation	27.80
	HHT Foundation International, Inc.	134.35
	Dominican Republic Education and Mentoring Project	83.39
	National History Day	48.18
	National Railway Historical Society, Inc.	120.45
	National Assc for the Improvement of Minorities in the IRS	94.51
	Orthodox Christian Mission Center	37.06
	Push America	111.19
	Love Without Boundaries Foundation	41.70
	AIDS Research & Assistance	374.34
	Dolphin Scholarship Fnd	319.67
	Fight Safety Foundation	240.91
	Parkinson's Action Network Fnd	333.57
	Vision of Children	120.45
	Area Youth Shelter (ADA)	320.59
	Denny Price Family YMCA	409.55
	American Inst for Cancer Research	22.24
	Lutherans for Life	481.82
	National Volunteer Fire Council	120.45
	Platelet Disorder Support Association	120.45
	Thomas Jefferson Foundation Inc.	111.19
	USA Hockey Foundation	36.14

Girl Scouts of Eastern Oklahoma	218.67
Stillwater Group Homes	233.50
Lyme Disease Association, Inc	120.45
Tau Beta Pı Association, Inc	92.66
Thurgood Marshall College Fund	23.16
Afghan Health and Development Services	- 315.03
BAPS Charities	106.65
Human Development and Children Foundation	264.07
WaterAid America	92.75
Thayne A Hedges Reg Speech & Hearing Ctr	46.33
B'nai B'rith International	222.38
Freedom from Religion Foundation	472.55
Gateway for Cancer Research	120.45
Grameen Foundation USA	157.52
Lift Up Africa	22.24
·	240.91
Nepalese Youth Opportunity Foundation	120.45
Physicians for Peace Foundation	
Project Peanut Butter	129.72
Water First International	361.36
4 Paws for Ability, Inc.	366.00
Armed Forces Aid Campaign	88.95
Association for Marine Exploration	120.45
Association for Unmanned Vehicle Systems Foundation	120.45
Catholic Youth Foundation USA	111.19
Center for Immigration Studies	1.85
Center for Plant Conservation, Inc.	120.45
Children's Neuroblastoma Cancer Foundation	185.31
Chimp Haven, Inc.	29.65
Joni & Friends	132.50
National Autism Association	22.24
Reason Foundation	48.18
Wounded Warriors Family Support, Inc.	296.50
Big Brothers Big Sisters of Oklahoma (Stillwater)	107.48
Hands Together	24.09
Medical Aid and Research Fund	92.66
BlueRibbon Coalition	140.84
Clarke School for the Deaf	22.24
Federal Law Enforcement Officers Fdn	361.36
Fdn of Assoc Former Agents/US Secret Service	96.36
International Children's Fund	366.00
Marine Graduation Foundation	44.48
Natl Society of Sons of the Amer Revolution	109.34
SAE International	409.55
USA Diving	4.63
Help Hosptialized Veterans	60.23
In Need of Diagnosis, Inc.	9.27
LAM Foundation	240.91

Lutheran Immigration and Refugee Service	213.11
` Men's Health Network	48.18
Mount Vernon Ldies Association of the Union	240.91
National Coalition for Men, Inc.	240.91
National MPS Society, Inc.	194.58
- National Police Defense Foundation	- 55.59
National Recreation and Park Association	265.00
National Speleological Society, Inc.	111.19
The Neuropathy Association, Inc.	120.45
Obesity Action Coalition, Inc	92.66
Polly Klaas Foundation	48.18
Project Linus	231 64
Sanford - Burnham Medical Research Institute	277.97
Shared Hope International	370.63
Stop Child Trafficing Now	474.41
United States Judo Inc	329.86
United States Marines Youth Foundation	138.99
USA Football, Inc.	11.12
VH1 Save the Music Foundation	11.12
Wildland Firefighter Foundation	46.33
Community Development Support Association	64.88
Healthcare Charities	463.29
Human Life International	60.23
Designations by donors to misc. organizations	1,003,028.51

Subtotal	3,932,898.37
Total	16,369,635

Form 996	8 (Rev 1-2012)				Page 2			
	'are filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part II	and check this hox				
	nly complete Part II if you have already been grai							
				on a previously filed roins book.				
	are filing for an Automatic 3-Month Extension, c Additional (Not Automatic) 3-Month Ex	tencion o	f Time Only file the orio	inal (no conies needed)				
Part II	Additional (Not Automatic) 3-month Ex	(CONSTON O						
	Name of exempt organization or other filer, see in	structions	EI	Enter filer's identifying number, see instructions Employer identification number (EIN) or				
					,			
Type o	UNITED WAY OF CENTRAL OKLAHO		X 73-0589829					
print	Number, street, and room or suite no. If a P O bo		Social security number (SSN)					
File by tho	1444 NIN COMU CERRETE			Joseph Sassan, married (1997)				
due date f filing your	City, town or post office, state, and ZIP code For							
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	e Return code for the return that this application		Application	ich return) . ,	Roturn			
Applica	tion	Return Code	Is For		Code			
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Form 9		01	C 4 (1) (1) (1) (1) (1)					
Form 98		02	Form 1041-A	08				
Form 99		01	Form 4720 Form 5227	10				
Form 99		04	Form 6069	11				
	90-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12				
Form 9	90-T (trust other than above) Do not complete Part II if you were not already							
STOPT	pooks are in the care of ► AMY MONTOYA	granted at	automatic 3-month exter	ision on a previously mod Form	1 0000.			
			FAX No ▶	•				
	organization does not have an office or place of	 ·	-,,	his hov				
	s is for a Group Return, enter the organization's fo							
	whole group, check this box							
			art or the group, check this	box, and acce	acii e			
	the names and EINs of all members the extension equest an additional 3-month extension of time u			11/15 , 20 12 .				
				nd ending	20			
	or calendar year <u>2011</u> , or other tax year beginn the tax year entered in line 5 is for less than 12 m							
Γ	Change in accounting period							
7 St	ate in detail why you need the extension ADDIT	LIONAL 1	TIME IS NEEDED TO	GATHER INFORMATION				
RE	EQUIRED TO FILE A COMPLETE AND AC	CURATE	TAX RETURN					
		00 T 470) COCO the term	Active Act Tool Cont.				
	this application is for Form 990-BL, 990-PF, 99	90-1, 4/20), or 6069, enter the ten	l I.				
	onrefundable credits, See instructions.	4720	COCO cotos con cotos	8a \$				
	this application is for Form 990-PF, 990-T,		· · · · · · · · · · · · · · · · · · ·	I3÷3 ′ I				
estimated tax payments made. Include any prior year overpayment allowed as a credit and any								
	amount paid previously with Form 8868.							
(E	lectronic Federal Tax Payment System). See Instru		ot he completed for !					
	Signature and Verific		•					
	naities of perjury, I declare that I have examined this form, correct, and complete, and that I am authorized to prepare this for		companying schedules and states	ments, and to the bost of my knowled	ge and belief,			
Ol	_		Title ▶	Date ►				
Signature			THIC P		(Rev 1-2012)			
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Form **8868**

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

If you are filing for an Autiomatic 3-Month Extension, complete only Part II and check this box You are filing for an Autiomatic Not Automatic 3-Month Extension, complete only Part II (on page 2 of the form) Do not complete Part II unloss you have already been granted an automatic 3-month extension of time to file (6 months for a corporation required to file form 980-f) or an additional (not automatic) 3-month extension of time to file (6 months for a corporation required to file form 980-f) or an additional (not automatic) 3-month extension of time to file (8 months for a corporation required to file form 980-f) or an additional (not automatic) 3-month extension of time to file (a months for a corporation required to file form 980-f) and requesting an automatic 6-month extension of time 0 for form 980-f and requesting an automatic 6-month extension or the file for or or detals as not the electronic filing onto Benefit Contexts, which must be sent to the IRS in preference of the proposition of time to file in prome the provided of the proposition of time. Only submit original (no copies needed) Part I only At other corporations (including 1120-C files), partnershps, REMICs, and trusts must use Form 7004 to request an extension of time or file in amore the returns. Value of the more detals or the proposition or other files, see instructions Social security number (EIN) or print	Internal Revenue Service	► File a	pplication for each return.			
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part I Unines you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (*effile) *\text{Voir can electronically file Form 8868 if you need a 3-month extension of time to file (\$\text{Smintly}\$) and acceptance of time to file (\$\text{Smintly}\$) and acceptance of time to file (\$\text{Smintly}\$) and acceptance of time to file (\$\text{Smintly}\$) and a 3-month extension of time to file any of the forms listed in Part I or Part II with the exception of form 8870, Information \$\text{Romintly}\$ for measurement 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 visit goverfile and click on e-file for Chantes & Nonprofilis* Part I and you with the exception of the form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only a summer and the electronic filing of this form, visit www visit goverfile and click on e-file for Chantes & Nonprofilis* Type or Print Filing your filing of the form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only a summer and the electronic filing of the form 990-T (bright of the part of the extension of time to file income for the filing your filing	If you are filing for an	Automatic 3-Month Extension, o	omplete o	only Part I and check th	ns box	▶ X
Electronic filling (e/file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a chropration required to file Form 990 file forms sisted in Part 1 or Part I with the exception of Form 870 information for the forms and the state of Part 1 or Part I with the exception of Form 870 information for the forms and the state of Part 1 or Part I with the exception of Form 870 information for the forms of the exception of Form 870 information for the form 980 information of Firm 980 information for the form 980 information of Firm 980 information for the form 980 information information for the form 980 information information for the form 980 information for the file forms 980 information information for the file forms 980 information for the file forms 980 information for the file forms 980 information for file for file forms 980 information for file file file forms 980 information for file file file file file file file file						
a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8866 to requirest an extension of time to file any of the Form sixed in Part I with the exception of Format Isensity for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format Isensity for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format Isensity for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format Isensity for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format Isensity for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format Isensity for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in Paper Interest Int	-					•
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 finals must use Form 7004 to request an extension of time Coffile income fax returns Type or print Type or UNITED WAY OF CENTRAL OKLAHOMA, INC. If Aya Oscillation Social security number (SSN) UNITED WAY OF CENTRAL OKLAHOMA, INC. Return Code OKLAHOMA CITY, OK 73106 Enter the Return code for the return that this application is for (file a separate application for each return) OF Earm 990-T (corporation) OF Form 990	a corporation required t 8868 to request an ext Return for Transfers A instructions) For more d	o file Form 990-T), or an addition ension of time to file any of the ssociated With Certain Persona etails on the electronic filing of th	nal (not aut forms liste Il Benefit (nis form, vis	tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus sit www.irs.gov/efile.an	nsion of time. You can with the exception of F t be sent to the IRS ad click on e-file for Cha	electronically file Form orm 8870, Information in paper format (see
Part I only .			•			
Name of exempt organization or other filer, see instructions	Part I only All other corporations (i	ncluding 1120-C filers), partnersh				n extension of time
Type or print Fig. by the disc date for the whole of a factor of the whole of the organization of sore in the organization of the organizati			atructions			
DITTED WAY OF CENTRAL OKLAHOMA, INC. X 73-0589829	Type or	empt organization of other mer, see in	SHUCHOIIS		Employer identification number (EIN) or	
Number, street, and room or sulten of 1a PO box, see instructions Social security number (SSN)	print	WAY OF CENTRAL OKLAHO	OMA, INC.		X 73-0589829	
titing year retains See instructions City, town or post office, state, and ZIP code For a foreign address, see instructions OKLAHOMA CITY, OK 73106 Enter the Return code for the return that this application is for (file a separate application for each return)	File by the Number, str				1	
Enter the Return code for the return that this application is for (file a separate application for each return)	due date for					
OKLAHOMA CITY, OK 73106	return See City, town o	r post office, state, and ZIP code For	a foreign ad	dress, see instructions	·· · · · · · · · · · · · · · · · · · ·	
Application Return Sept. Return Return Return Return Return Return Sept. Return	OKLAHON	A CITY, OK 73106				
Is For Code Is For Code Is For Code Is For Code Form 990 Form 8870 Form 8870 Form 990	Enter the Return code for	or the return that this application	is for (file a	separate application for	or each return)	0 1
Is For Code Is For Code Is For Code Is For Code Form 990 Form 8870 Form 8870 Form 990	Application		Return	Application		Return
Form 990			Code			1
Form 990-BL O2	Form 990		01	Form 990-T (corporate	tion)	
Form 990-EZ Form 990-PF Od Form 5227 10 Form 6069 111 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶ AMY MONTOYA Telephone No ▶ 405 523-3518 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) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for the organization alternation of the extension is for the organization anothin (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 12, to file the exempt organization return for the organization named above The extension is for the organization's return for ★ Calendar year 20.11 or ★ Calendar year 2	Form 990-BL		02			
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Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above) O6 Form 8870 112 The books are in the care of ► AMY MONTOYA Telephone No ► 405 523-3518 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) If this is for the whole group, check this box If it is for part of the group, check this box If the united alist 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, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for □ X calendar year 20 11 or □ X tax year beginning 20 , and ending 20 , and ending 20 . If the tax year entered in line 1 is for less than 12 months, check reason	Form 990-PF		04	Form 5227		
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The books are in the care of ▶ AMY MONTOYA Telephone No ▶ 405 523-3518 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box	Form 990-T (trust other	than above)	06	Form 8870		
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