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## Form **990-PF**

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements 2011, and ending For calendar year 2011, or tax year beginning Employer identification number Name of foundation 73-1190206 LESLIE POWELL FOUNDATION, INC. Room/suite R Number and street (or P O box number if mail is not delivered to street address) Telephone number (see the instructions) 620 SW D AVENUE (580) 357-9526 State ZIP code City or town С If exemption application is pending, check here 73501 LAWTON OK Initial Return of a former public charity G Check all that apply: Initial return D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method. X Cash Fair market value of all assets at end of year (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 1,156,284 (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see instructions).) 66,700. Contributions, gifts, grants, etc, received (att sch) Ck ► If the foundn is **not** req to att Sch B Interest on savings and temporary 14 14 14 cash investments 12,780 780. 12,780. Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10
b Gross sales price for all assets on line 6a Capital gain net income (from Part tv, tine 2) 0. Ē Net short-term dapital gain Income modifications G I VON 10 a Gross sales less returns and allowances c Gross profit/(loss) (att-sch) 11 Other income (attach schedule) 79,494. Total. Add lines 1 through 11 12,794. 12,794. 28,509. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 2,025. 15 Pension plans, employee benefits 16a Legal fees (attach schedule) **b** Accounting fees (attach sch) 90 90. c Other prof fees (attach sch) Interest 2,774. 439. 2,335. 18 Taxes (attach schedule)(see instrs) See Line, 18 Stmt Depreciation (attach 19 sch) and depletion L-19 Stmt 17,152. 20 Occupancy 16,366. 16,366. 21 Travel, conferences, and meetings 2,252. 22 Printing and publications 2,252. 23 Other expenses (attach schedule) See Line 23 Stmt 18,112. 18,112. Total operating and administrative expenses. Add lines 13 through 23 87,280 439 39**,**155. Contributions, gifts, grants paid 17,525 17,525. Total expenses and disbursements. Add lines 24 and 25 104,805 439 56,680. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -25,31112,355 **b** Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter -0-) 12,794.

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0301 12/02/11

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Dard	1	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	<del></del>
Pari	. 11	Dalance Sheets	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	16,435.	8,661.	8,661.
	2	Savings and tempora	ary cash investments	20,036.	19,357.	19,357.
	3	Accounts receivable	<b>&gt;</b>			
		Less: allowance for o	doubtful accounts			
	4	Pledges receivable	▶ <sup></sup>			
		Less allowance for o	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (attac	ers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec			· · · · · · · · · · · · · · · · · · ·	
A		Less: allowance for o				
S	8	Inventories for sale of				
A S S E T S	9	Prepaid expenses ar	nd deferred charges		-	
Š		, ,	and state government			
	b	Investments — corporate :	· .	405,009.	405,009.	438,943.
		: Investments — corporate	· · · · · · · · · · · · · · · · · · ·			
		Investments - land,				
		equipment: basis Less: accumulated deprec	►750,947.			
		(attach schedule)	► <u>255,362.</u>	512,194.	495,585.	672,823.
	12	Investments - morto	gage loans			
	13	Investments - other	(attach schedule)	17,721.	17,722.	16,500.
	14	Land, buildings, and	equipment: basis			
		Less accumulated deprec (attach schedule)	eatron			
		Other assets (descri				
	16	see the instructions.	completed by all filers — Also, see page 1, item l)	971,395.	946,334.	1,156,284.
Ļ	17	Accounts payable ar	nd accrued expenses	459.	709.	
Ä	18	Grants payable		·		
B	19	Deferred revenue				1
-	20	Loans from officers, direct	tors, trustees, & other disqualified persons			
Ī	21	Mortgages and other notes	s payable (attach schedule)			
Ţ	22	Other liabilities (des	cribe► )[		·	
E S	23	Total liabilities (add	lines 17 through 22)	459.	709.	
		Foundations that fol	llow SFAS 117, check here 24 through 26 and lines 30 and 31.	1001	, , , , , , , , , , , , , , , , , , , ,	
N F	24	Unrestricted				
E U	25	Temporarily restricte	od.			·
ı N	26	Permanently restrict				ļ.
A B S A E L T A		•	not follow SFAS 117, check here		***	
ĔĹ	27	Capital stock, trust n	principal, or current funds	441,021.	432,318.	r r
SN	28		or land, building, and equipment fund	529,915.	513,307.	
o E	29		ulated income, endowment, or other funds			
RS	30	• .	und balances (see instructions)	970,936.	945,625.	!
	31	Total liabilities and	net assets/fund balances			
Des	  -	(see instructions)	gos in Not Assets on Friend Balance	971,395.	946,334.	
			ges in Net Assets or Fund Balance			
1	end-	of-year figure reported	alances at beginning of year – Part II, colun d on prior year's return)	nn (a), line 30 (must agr	ee with	970,936.
2		r amount from Part I,			2	<u>-25,31</u> 1.
3		increases not included in li	ne 2 (Itemize)		3	
4		lines 1, 2, and 3			4	945,625.
		ases not included in line 2 (	- <b></b>	<b></b>	5	
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)	<ul> <li>Part II, column (b), line</li> </ul>	e 30 <b>6</b>	945,625.

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Multiply line 4 by line 3

Enter 1% of net investment income (1% of Part I, line 27b)

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	ıstructio	ns)					
1 a	Exempt operating foundations described in section 4940(d)(2), check here							
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)							
b Domestic foundations that meet the section 4940(e) requirements in Part V,								
	check here ► and enter 1% of Part I, line 27b				1			
c	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	-						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	_						
_	foundations only. Others enter -0-)	2			0.			
3	Add lines 1 and 2	3		2	247.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<del></del>		247.			
ь	Credits/Payments:							
	2011 estimated tax pmts and 2010 overpayment credited to 2011  Exempt foreign organizations — tax withheld at source  6a  6b				į			
		ļ			į			
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6c  6d	•	•		}			
7		7						
, 8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8			0.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			247.			
10	<del>·</del>	10			0.			
11		11			<u> </u>			
	t VII-A   Statements Regarding Activities	•••						
				Yes	No			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		Х			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		х			
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials public or distributed by the foundation in connection with the activities.	shed						
c	: Did the foundation file Form 1120-POL for this year?		1 c		X			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:							
	(1) On the foundation  \$ (2) On foundation managers  \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on							
	foundation managers							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х			
	If 'Yes,' attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles							
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		3		X			
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х			
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u> </u>			
_	If 'Yes,' attach the statement required by General Instruction T.				Ì			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:							
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that confidence in the state of the state	flict	ļ <u>.</u>					
7	with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		6	X				
	Enter the states to which the foundation reports or with which it is registered (see instructions)		7	_X	<u> </u>			
Va		<del></del>						
h	of the answer is 'Ves' to line 7, has the foundation furnished a conv of Form 000 DE to the Attorney Convert		"	-				
	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>		8b	X				
9		042/1/51	<del></del>					
•	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete F	Part XIV	9	X				
10	10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names							
	and addresses.		10		Χ			
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_	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person by advisory privileges? If 'Yes,' attach statement (see instructions)	had 12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	1? 13	Х	
	Website address N/A			
14	The books are in care of ► LORNA_FUNKHOUSER_CPA_PC Telephone no. ► _(		-696	<sup>9</sup> – –
	Located at > 706 SW A AVENUE LAWTON OK ZIP + 4 > 73501			·
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	. 1		. П
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over bank, securities, or other financial account in a foreign country?	r a 16	Yes	No_ X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		!
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	_ K No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No		
		No	}	
		_		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes	<b>≪</b> No		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )	<b>∛</b> No		
t	of any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	ļ		
	Regulations section 53 4941 (d)-3 or in a current notice regarding disaster assistance (see instructions)?	_ <u>  1</u> k	<u> </u>	ļ.,
	Organizations relying on a current notice regarding disaster assistance check here	_		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d	-, l		
	and 6e, Part XIII) for tax year(s) beginning before 2011?	∐ No		
	If 'Yes,' list the years ► 20 , 20 , 20			1
Ŀ	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		<del> </del>	1
	all years listed, answer 'No' and attach statement – see instructions )	21	<u> </u>	
C	lf the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20 , 20 , 20 , 20			
3:	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?	<☐ No		1
t	of If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to			
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to		1	<del> </del>
	determine if the foundation had excess business holdings in 2011.)	31	<u> </u>	
4 <i>a</i>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	42		х
ŀ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
-	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of	ļ	<del> </del>	<del> </del>
BAA	the tax year beginning in 2011?	4t		X
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Part VII-B   Statements Regarding Activit		n 4720 May Be Req	uired (continued)	<del></del>	
5a During the year did the foundation pay or incu	-		п., п		İ
(1) Carry on propaganda, or otherwise attemp	ot to influence legislation	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	No				
(3) Provide a grant to an individual for travel,	No				
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described actions)	Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to c a current notice regard	qualify under the excepti ling disaster assistance	ons	5b	
Organizations relying on a current notice regard	rding disaster assistanc	e check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	emption from the	Yes	No	
If 'Yes,' attach the statement required by Regu	ılatıons sectıon 53.4945	5-5(d).			
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or indi	rectly, to pay premiums	Yes X	No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	tly, on a personal benef	t contract?	6ь	X
If 'Yes' to 6b, file Form 8870.		h.k.d			
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				No 7b	
Part VIII Information About Officers, D					<u> </u>
and Contractors	,				
1 List all officers, directors, trustees, foundatio	n managers and their c	ompensation (see instr	uctions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	
SEE ATTACHED SCHEDULE					
	- (-4) 4) 1				
2 Compensation of five highest-paid employee (a) Name and address of each employee	(b) Title, and average	(c) Compensation			
paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	owances
N/A			compensation		
0					<del></del>
	1				
0					
<del></del>					
0					
0					
Total number of other employees paid over \$50,000	<u>L</u>	<u> </u>			None
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None

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Total. Add lines 1 through 3

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Part X   Minimum Investment Return (All domestic foundations must complete this see instructions.)	s part. Foreign fo	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposition	es:	
a Average monthly fair market value of securities	1a	442,066.
<b>b</b> Average of monthly cash balances	1 b	19,697.
c Fair market value of all other assets (see instructions)	1 c	0.
d Total (add lines 1a, b, and c)	1 d	461,763.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	461,763.
		1017,000
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	6,926.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<del> </del>	454,837.
	6	22,742.
6 Minimum investment return. Enter 5% of line 5  Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priv		
and certain foreign organizations check here \times \times and do not complete this		iriuations
1 Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2011 from Part VI, line 5		
<b>b</b> Income tax for 2011. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.		
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	56,680.
<b>b</b> Program-related investments – total from Part IX-B	1 b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purpos	ses 2	
3 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, li	ne 4 4	56,680.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)		0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	56,680.
, , , ,	<del></del>	
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	ng whether the founda	ation

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### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only				i
<b>b</b> Total for prior years: 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
<b>b</b> From 2007				
<b>c</b> From 2008				
<b>d</b> From 2009		•		
e From 2010				
f Total of lines 3a through e				
4 Qualifying distributions for 2011 from Part				
XII, line 4: ► \$56,680.				
a Applied to 2010, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior yea (Election required – see instructions)	rs			
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2011 distributable amount				
e Remaining amount distributed out of corpus	56,680.			
5 Excess distributions carryover applied to 2011	·			
(If an amount appears in column (d), the	,			
same amount must be shown in column (a)	7			
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	56,680.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed				
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount see instructions		0.	-	
e Undistributed income for 2010 Subtract line 4a from line 2a. Taxable amount — see instructions			0.	'
and an animality of the matterial			<u> </u>	
f Undistributed income for 2011. Subtract line 4d and 5 from line 1. This amount must be	s			
distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)				
8 Excess distributions carryover from 2006 no	t			
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	56,680.			
10 Analysis of line 9:	30,000.			
	).	[		
	) .			
	0.			
	) <u>.</u>			
e Excess from 2011 56, 680	<del></del>			
e Excess from 2011 50, 660	· · · ·	<u> </u>	<u> </u>	

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1a If the foundation has received a ruling or d is effective for 2011, enter the date of the	etermination letter t			and the ruling	NA
<b>b</b> Check box to indicate whether the foundati	•	atıng foundation de	scribed in section	X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	<b>(a)</b> 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for each year listed	12,794.	12,523.	12,524.	15,255.	53,096.
<b>b</b> 85% of line 2a	10,875.	10,645.	10,645.	12,967.	45,132.
c Qualifying distributions from Part XII, line 4 for each year listed	56,680.	54,230.	51,008.	106,557.	268,475.
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	56,680.	54,230.	51,008.	106,557.	268,475.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets	1,156,284.	1,171,535.	1,129,916.	1,001,065.	4,458,800.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	1,156,284.	1,171,535.	1,129,916.	1,001,065.	4,458,800.
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this le year – see ins	part only if the output	organization ha	d \$5,000 or mo	re in
Information Regarding Foundation Manage     a List any managers of the foundation who had close of any tax year (but only if they have N/A)	nave contributed mo	re than 2% of the to han \$5,000) (See s	otal contributions re section 507(d)(2).)	ceived by the found	dation before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the N/A	own 10% or more of foundation has a 10	the stock of a corp. % or greater interes	oration (or an equa st	lly large portion of t	the ownership of
2 Information Regarding Contribution, Grar Check here  ☐ if the foundation only n requests for funds. If the foundation makes complete items 2a, b, c, and d.	nakes contributions	to preselected char	itable organizations	and does not acce	pt unsolicited er conditions,
a The name, address, and telephone number NANCY ANDERSON	r of the person to w	hom applications sl	hould be addressed		<del></del>
620 SW D AVENUE	OV 73501	/50	0) 257 0506		
LAWTON	OK 73501		0) 357-9526		
<b>b</b> The form in which applications should be s APPPLICATION FOUND ON ORGA			-		
c Any submission deadlines. SEPTEMBER 30TH OF EACH YEA	.R				
d Any restrictions or limitations on awards, s					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or busines	ss)	substantial contributor	recipient			
a Paid during the year						
CAMERON UNIV FOUNDATION		NONE				
2800 W GORE BLVD	72501		PAID	GRANT/SCHOLORSHIPS	5,183.	
LAWTON OK LAWTON FT SILL ART COUNCIL	73501	NONE	PAID	GRANI/SCHOLORSHIPS	5,165.	
5TH AND B AVENUE		NONE				
	73501		PAID	ART WORKSHOPS	2,500.	
BLUE MOON PRODUCTIONS	75501	NON	LAID	Mill Workshord	2,300.	
PO BOX 6392						
	73502		PAID	THEATRE/ART	100.	
LAWTON PHILHARMONIC	,0002	NONE		,		
6425 NW CACHE RD						
	73505		PAID	CONCERTS	1,000.	
MUSEUM OF THE GREAT PLAINS		NONE			·	
601 NW FERRIS						
	73507		PAID	ART MUSEUM	4,617.	
OKLAHOMA ART INSTITUTE		NONE				
43393 Scissortail Road			:			
LONE WOLF OK	73655		PAID	GRANTS/SCHOLORSHIPS	4,000.	
OETA		NONE				
P.O. Box 14190						
OKC OK	73113		PAID	ART PROGRAMMING	125.	
Total			<u> </u>	► 3a	17,525.	
<b>b</b> Approved for future payment						
Total			•	► 3b		
RAA					F 000 PF (0011)	

nter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a			1.3325		
b			<del>                                     </del>		
c	<del>                                     </del>		1		<del></del>
d			<del>                                     </del>		
е			<del>-   -     -     -     -       -        </del>		
f			1		
g Fees and contracts from government agencies					
2 Membership dues and assessments		<del></del>	<del>                                     </del>		
3 Interest on savings and temporary cash investments			14	14.	
4 Dividends and interest from securities		-	14	12,780.	
5 Net rental income or (loss) from real estate.			<del>  </del>		
a Debt-financed property					
<b>b</b> Not debt-financed property				-	
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory		•			
9 Net income or (loss) from special events					-
IO Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
С					<u> </u>
d					
е					
Subtotal. Add columns (b), (d), and (e)	LL			12,794.	
13 Total. Add line 12, columns (b), (d), and (e)				13	12,794
See worksheet in line 13 instructions to verify calculate	ions)				
Part XVI-B Relationship of Activities to the	e Accomplish	nment of Exemp	ot Purpose	s	
Line No. Explain below how each activity for which accomplishment of the foundation's exemp	income is reporte	ed in column (e) of	Part XVI-A co	ontributed importantly	y to the

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
NA	

# Form 990-PF (2011) LESLIE POWELL FOUNDATION, INC. 73-1190206 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de rel (1) (2) (2) (3) (4) (5) (6) c Sh	scribed scribed atting the ansiers of the ansiers o	d in section 501 (coopolitical organics from the reportion assets in sactions: sof assets to a report of a section assets of assets for a section as or loan guarant ormance of services of facilities, equipassets of any of the soften assets of the section of the	ng foundation to a noncharitable exer from a noncharita quipment, or other igements	mpt organization  mpt organization  ble exempt orger  assets  p or fundraisin  ts, other assets  complete the force  by the reportion	e exempt organical exempt organical exempt organical exempt organical exempt organical exempt organical exempt of the exempt of	oyees  le. Column the founda	(b) should alw	vays show th	market v	1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1b (6) 1c  rket valuvalue in		X X X X X X X X
		(b) Amount involved		of noncharitable ex		T -	Description of tra			harino arra	UU6men.	
_(a) Line	110.	(D) Amount involved	(C) Name (	n nununamanie ex	empt organization	(0)	Description of tra	maiera, transact	ions, and s	nainy aira	ngemen	<u></u>
	$\dashv$	<del></del>										
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	+-	<u>-</u>	<u> </u>					-				
de	scribe	undation directly d in section 501 ( complete the follo	or indirectly affilia c) of the Code (ot owing schedule	ated with, or re her than section	lated to, one or on 501(c)(3)) or	more tax-	exempt organiz 527?	zations		Ye	s X	No
	(a)	Name of organiz	zation	<b>(b)</b> Ty	pe of organizat	ion	(	c) Description	n of rela	tionship		
					· · · · · · · · · · · · · · · · · · ·	<del></del>	<u> </u>	<del>.</del>				
Sign	Under pr correct,	enalties of perjury, I de and complete Declara	eclare that I have examation of preparer (other	ined this return, inc than taxpayer) is ba	luding accompanyin ased on all informati	g schedules ar	d statements, and eparer has any know	to the best of my wledge	/ knowledge	and belief,		
Here	Signa	Mouse y	Oddea	4	//-/4-		XECUTIVE tte	DIRECTO	R	this retui preparer (see i <u>nsi</u>	rn with to	he below
		Print/Type preparer's	name	Preparer	s sonature		Date	Check	ıf	PTIN		
Paid		LORNA D. F	UNKHOUSER	XX	Pen &CL		11/13/12	l l		80074	916	
Prepar	rer	Firm's name	Lorna D. F	unkhouser	, CPA, P.	c.		Firm's EIN ►		77877		
Use O		Firm's address	706 SW A A	Avenue								
		l	Lawton			OK 73	501	Phone no	(580)	357-	<u>69</u> 69	<u> </u>
BAA									_	Form 99	0-PF	(2011)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization		Employer identification number
LESLIE POWELL FOUNDATION, I	73-1190206	
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust trea 501(c)(3) taxable private foundation	ated as a private foundation
Check if your organization is covered by the <b>Note</b> . Only a section 501(c)(7), (8), or (10)	e General Rule or a Special Rule organization can check boxes for both the General	Rule and a Special Rule See instructions
General Rule		
	D-EZ, or 990-PF that received, during the year, \$5,0	000 or more (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), and rece	ng Form 990 or 990-EZ that met the 33-1/3% suppo erved from any one contributor, during the year, a c Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comple	contribution of the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) orgatotal contributions of more than \$1,000 the prevention of cruelty to children or a	anization filing Form 990 or 990-EZ that received frouse exclusively for religious, charitable, scientifianimals. Complete Parts I, II, and III.	om any one contributor, during the year, ic, literary, or educational purposes, or
contributions for use exclusively for relic if this box is checked, enter here the tot	anization filing Form 990 or 990-EZ that received fr gious, charitable, etc, purposes, but these contribut tal contributions that were received during the year irts unless the <b>General Rule</b> applies to this organiza	tions did not total to more than \$1,000 for an <i>exclusively</i> religious, charitable, etc.
religious, charitable, etc. contributions of	of \$5,000 or more during the year	<b>►</b> \$
990-PF) but it <b>must</b> answer 'No' on Part IV,	d by the General Rule and/or the Special Rules doe, line 2, of its Form 990, or check the box on line Het the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act Notice 990EZ, or 990-PF.	e, see the Instructions for Form 990,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)

Schedule Name of org	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
-	POWELL FOUNDATION, INC.	' '	.90 <u>2</u> 06
	Contributors (see instructions) Use duplicate copies of Part I if additional sp	pace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LESLIE POWELL TRUST  620 SW D	\$66,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <b>-</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

#### Form **4562**

Department of the Treasury Internal Revenue Service (99

#### **Depreciation and Amortization** (Including Information on Listed Property)

 OMB No 1545 0172

2011

Attachment Sequence No 179

Identifying number Name(s) shown on return 73-1190206 LESLIE POWELL FOUNDATION, Business or activity to which this form relates Form 990-PF page 1 Part Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (C) Elected cost 6 (b) Cost (business use only) Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Partil Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 17,152 16 Other depreciation (including ACRS) 16 Par MACRS Depreciation (Do not include listed property ) (See instructions ) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2011 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Assets Placed in Service During 2011 Tax Year Using the General Depreciation System Section B (a)
Classification of property (c) Basis for depreciation (d) (e) Convention (b) Month and (g) Depreciation year placed (business/investment use Recovery period see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27.5 yrs MM S/L property 27.5 yrs MM S/L MM S/L i Nonresidential real 39 yrs property MM S/L Section C — Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs S/L

the appropriate lines of your return Partnerships and S corporations - see instructions

For assets shown above and placed in service during the current year, enter

Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on

c 40-year

Part Summary (See instructions.)

21 Listed property Enter amount from line 28

40 yrs

MM

S/L

21

LESLIE POWELL FOUNDATION, INC 73-1190206 Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles.) No 24b If 'Yes,' is the evidence written? 24a Do you have evidence to support the business/investment use claimed? Yes Yes No (c) Business/ investment (h) (i) (a) (b) (d) (e) **(f)** (g) Type of property (list vehicles first) Date placed in service Basis for depreciation (business/investment Recovery Method/ Convention Depreciation deduction Elected section 179 cost Cost or other basis ness/inves use only) use percentage Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (d) (c) (e) **(f)** 30 Total business/investment miles driven Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 during the year (do not include commuting miles) 31 Total commuting miles driven during the year Total other personal (noncommuting) miles driven Total miles driven during the year Add lines 30 through 32 Yes Yes No Yes No No Yes No Yes No Yes No Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) Yes Nο 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions ) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles. Part VI: Amortization (a) (b) (c) (d) **(f)** (e) Description of costs Date amortization Amortizable Code Amortization Amortization begins amount section period or percentage 42 Amortization of costs that begins during your 2011 tax year (see instructions) Amortization of costs that began before your 2011 tax year 43 Total. Add amounts in column (f). See the instructions for where to report

#### Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes PAYROLL TAX INVESTMENT FOREIGN TAX WH	Rev/Exp Book 2,335. 439.	Net Inv Inc 439.	Adj Net Inc	Charity Disb
Total	2,774.	439.		2,335.

#### Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	_Adj Net Inc	Charity Disb
BOOKS/REFERENCE MATERIAL	10.			10.
GALLERY SUPPLIES	1,008.			1,008.
MISCELLANEOUS OPERATING	1,395.			1,395.
POSTAGE AND MAILING	4,178.			4,178.
INSURANCE	8,910.			8,910.
DUES	210.			210.
CONTRACT SERVICES	2,293.			2,293.
BANK SERVICE FEES	108.			108.
	· <del></del> ,			·

18,112. 18,112.

#### Form 990-PF, Line 19 **Allocated Depreciation**

Total

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Lıfe	Current Depr	Net Invest Income	Adjusted Net Income
BUILDING	11/01/00	585808	148319	SL	40.00	14645		
BUILDING 620 SW D AVE	01/01/01	34414	8566	SL	40.00	860		
FURNITURE AND FIXTURES	12/31/97	21906	21906	SL	5.00	0		
FURNITURE AND FIXTURES	12/31/95	1494	1494	SL	5.00	0		
FURNITURE AND FIXTURES	11/01/00	40793	40793	SL	10.00	0		
FURNITURE AND FIXTURES	01/31/01	1632	1550	SL	10.00	14		
2 CHAIR CARRIERS	03/07/03	650	488	SL	10.00	65		
FOOD PROCESSOR	10/04/06	<u>87</u>	78	SL	5.00	9		
200 WINE GLASSES	10/20/06	146	132	SL	5.00	14		
AWNING	10/04/07	1801	804	SL	7.00	257		
LAND 620 SW D	01/07/99	30000	0	<u>NA</u>	0.00	0		
CEMETERY LOT	12/31/95	800	0	NA	0.00	0		
COMPUTER EQUIPMENT	02/12/98	3889	3889	SL	5.00	0		
COMPUTER	09/26/00	802	802	SL	5.00	0		
DELL COMPUTER	03/26/04	960	960	SL	5.00	0		
PRINTER	03/30/05	380	380	SL	5.00	0		
SOFTWARE	08/24/05	137	137	SL	3.00	0		
FAX MACHINE	09/06/05	218	218	SL	5.00	0		
SOFTWARE	10/07/05	300	300	SL	3.00	0		
DIGITAL PROJECTOR	09/18/06	920	828	SL	5.00	92		
HP PRINTER	08/10/07	173	117	SL	5.00	35		
ART RACK FOR GALLERY	09/05/08	345	115	SL	7.00	49		
SLIDE COPUER	06/01/08	150	55	SL	7.00	21		
CAMERA	04/02/08	237	93	SL	7.00	34		
OFFICE CAMERA	10/02/09	2053	1454	SL	3.00	599		
FRAMING	03/20/02	3847	3271	SL	10.00	385		
DELL COMPUTER	05/31/05	1461	1461	SL	5.00	0		

Form 990-PF, Line 19
Allocated Depreciation

Continued

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
COMPUTER	04/19/11	544		SL	5.00	73		

Total

#### **Supporting Statement of:**

Form 990-PF, p2/Line 13(a)

Description	Amount
DONATED ASSETS	17,721.
Total	17,721.

LESLIE POWELL FOUNDATION, INC.

73-1190206

Federal Statements

Name and Address	Title	Average Hours	Average Title Hours Compensation Bene	Benefits	Expenses
DAVID CARTER 813 NW 41ST ST LAWTON OK 73505	CHAIRPERSON	00.00	0	0	0
JANE GODLOVE 726 NE 46TH ST LAWTON OK 73505	TREASURER	00.00	0	0	`O
JOHN KENNEDY II PO BOX 8 LAWTON OK 73502	BOARD MEMBER	00.0	0	0	0
JUDY GARRETT 1130 BROOKSIDE DR NORMAN OK 73072	SECRETARY	00.0	0	0	0
PAUL FISHER 308 NW RIDGEVIEW WAY LAWTON OK 73505	BOARD MEMBER	00.0	0	0	0
NANCY ANDERSON 113 SE TATTERSHALL LAWTON OK 73501	EXEC DIRECTO	40.00	0	0	0
FLOYD KENNEDY 3018 NW EUCLID AVE. LAWTON OK 73505	TRUSTEE	00.0	0	0	0
ROBERT ROSS 513 C AVE LAWTON OK 73501	TRUSTEE	00.00	0	0	0
ALAN JOLLY 3018 SE WILLOW LANE LAWTON OK 73501	TRUSTEE	00.00	0	0	0

(Rev January 2012)

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

► X

	re filing for an <b>Additional (Not Automatic) 3-Mon</b> I <b>plete Part II unless</b> you have already been grant					5 <b>8</b>	
	iling (e-file). You can electronically file Form 886		,				
corporation request an e Associated	rou can electronically lie Form 300 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which reling of this form, visit www.irs.gov/efile and click	ot automatic) n Part I or Par nust be sent t	3-month extension of time You can elect II with the exception of Form 8870, Infoother IRS in paper format (see instruction)	tronica ormatio	ally file on Reti	e Form 8868 to urn for Transfers	
Part I A	Automatic 3-Month Extension of Time.	Only subm	nit original (no copies needed).				
A corporation	on required to file Form 990-T and requesting an	automatic 6-i	month extension - check this box and co	omplet	e Part	l only	
All other coi	rporations (including 1120-C filers), partnerships returns	, REMICS, ar	·				
			Enter filer's ident			er, see instructions	
Tuna ar	Name of exempt organization or other filer, see instructions			Empl	oyer ide	entification number (EIN) or	
Type or print							
File by the	LESLIE POWELL FOUNDATION, IN Number, street, and room or suite number If a PO box, ser					L190206 security number (SSN)	
due date for		e manuchons			Social S	ecunty number (3311)	
filing your return See instructions	620 SW D AVENUE  City, town or post office, state, and ZIP code For a foreign a	address see instri	ictions	ـــلــــــــــــــــــــــــــــــــــ		<del></del>	
	LAWTON			OK 7350			
Application Is For	eturn code for the return that this application is f	Return Code	Application for each return)  Application Is For			Return Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990-B	L	02	Form 1041-A			08	
Form 990-E	Z	01	Form 4720			09	
Form 990-P	F	04	Form 5227			10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T	(trust other than above)	06	Form 8870			12	
Telepho If the ore If this is check the external line requestions.	the sare in the care of LORNA FUNKHOUSE one No (580) 357–6969  ganization does not have an office or place of but for a Group Return, enter the organization's four his box If it is for part of the group, ension is for est an automatic 3-month (6 months for a corporate an automatic 3-month (6 months for a corporate and 15 , 20 12 , to file the exempt of extension is for the organization's return for	FAX Not usiness in the reduced this book this book training requires	United States, check this box Exemption Number (GEN)  and attach a list with the na				
<b>▶</b> 🔽	Calendar year 20 11 or						

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 0. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 3b|\$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

Initial return

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

Change in accounting period

tax year beginning \_\_\_\_\_, 20 \_\_\_\_, and ending

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

Final return

Form 8868	Rev 1-2012) LESLIE POWELL FOUND	ATION,	INC.	73-1190206	Page 2
	are filing for an Additional (Not Automatic) 3-Monti				► 🗓
	complete Part II if you have already been granted			y filed Form 8868.	
	are filing for an Automatic 3-Month Extension, com Additional (Not Automatic) 3-Month Exte			'no conjec needed)	
il outil	Additional (Not Automatic) 5-Month Exte	ension of		identifying number, see	
	Name of exempt organization or other filer, see instructions.		Enter mer s	Employer identification number	
				' -	• •
Type or print	LESLIE POWELL FOUNDATION, INC.			X 73-1190206	
File by the extended	Number, street, and room or surte number. If a P O. box, see inst	tructions.		Social security number (SSN)	
due date for filing the	620 SW D AVENUE			lП	
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address	ss, see instructi	ons.		
	LAWTON	OK 73	3501		
Enter the R	Return code for the return that this application is for	(file a sepa	rate application for each return)		04
Application		Datum	Application		Return
Is For	1	Return Code	Is For		Code
Form 990		01			a see the
Form 990-E	BL	02	Form 1041-A		08
Form 990-E	Z	01	Form 4720		09
Form 990-F	PF	04	Form 5227		10
Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069					11
Form 990-T (trust other than above) 06 Form 8870					
Telepho If the or If this is whole group	oks are in care of LORNA FUNKHOUSER Clone No. (580) 357–6969  rganization does not have an office or place of busing for a Group Return, enter the organization's four does, check this box	FAX No. Pness in the ligit Group E	United States, check this box Exemption Number (GEN)	. If this	is for the
5 For ca 6 If the f	est an additional 3-month extension of time until alendar year 2011, or other tax year beginning tax year entered in line 5 is for less than 12 months hange in accounting period in detail why you need the extension AWAITI ACCURATELY PREPARE THE TAX RETURNACY OF THE RETURN AND RETURN	o s, check rea ING ADDI	, 20, and endingson: Initial return  TIONAL INFORMATION FR S INFORMATION IS VITA	OM THIRD PARTY L TO THE	·
8a If this	application is for Form 990-BL, 990-PF, 990-T, 472	0, or 6069,	enter the tentative tax, less any		
<b>b</b> If this	fundable credits. See instructions application is for Form 990-PF, 990-T, 4720, or 60tents made. Include any prior year overpayment allo	59, enter an	y refundable credits and estimated	tax XXX	0.
with Fo	orm 8868  ce due. Subtract line 8b from line 8a. Include your i	payment wit	th this form, if required, by using	8ь \$	0.
EFTPS	S (Electronic Federal Tax Payment System). See in	structions .		8c \$	0.
Under penalties correct, and con	of perjury, I declare that I have examined this form, including accomplete, and trigy I appractinonized to premare this town.		t be completed for Part II or dules and statements, and to the best of my kn	owledge and belief, it is true,	
Signature -	Assem 9 Title >	M		Date -8-14	-12
BAA .		FIFZ0502	07/29/11	Form 8868 (	