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SCANNED JUN @ 7 2012

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)

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.

Open to Public Inspection

Α	For the 2	011 calend	dar year, or tax year beginning , 2011, and endin	ig		•	
	Check if app		C	D	Employer Iden	tification Number	
	Addres	s change	Oklahoma City Geological Foundation		73-1439	474	
	\vdash	change	P.O. Box 7565	E	Telephone num		
	Initial r	•	Edmond, OK 73083		(405) 2	236-8086	
	Termin			<u> </u>	(100) 2	.50 0000	
				ء ا	Gross receipts	\$ 663,2	201
	\vdash	ed return	F Name and address of principal officer		oup return for af		
	Applica	ition pending		H(b) Are all affil		filiates? Yes	X No
_	-		Same As C Above		ach a list (see in	structions) L res	
<u> </u>	Tax-exem		X 501(c)(3)		,	_	
<u>J</u>	Website		·		mption number		
K		organization	Corporation Trust Association Other► L Year of Forma	tion	M State of	legal domicile	
Pâ		Summar					
	1 Brid	efly descri	be the organization's mission or most significant activities. Advancem	<u>ent_of_S</u>	<u>cience</u> l	<u>Education _ </u>	
ç							
Activities & Governance	<u> </u>						
Ver	2						
ô			ox ► if the organization discontinued its operations or disposed of moi oting members of the governing body (Part VI, line 1a)	re than 25% (orius neu ass 3	ets I	7
વ્ય			dependent voting members of the governing body (Part VI, line 1b)		4		
ţį			r of individuals employed in calendar year 2011 (Part V, line 2a)		5		 ŏ
Ę			of volunteers (estimate if necessary)		6		 0
Ac			ed business revenue from Part VIII, column (C), line 12		7a	-2,8	874.
			business taxable income from Form 990-T, line 34		7b		0.
			(m) 1700 (c)	Prio	r Year	Current Yea	ır
_	8 Cor	ntributions	and grants (Part VIII, line 1h) RECEIVED	1	144,817.	135,7	781.
Revenue	9 Pro	gram serv	vice revenue (Part VIII, line 2g)				
Š			ncome (Part VIII, column (A), hos 3, 4, and Zd), 2012		20,730.	113,0	
æ	11 Oth	er revenu	e (Part VIII, column (A), lines 5,6d, 80,9c, 10c, and 16)		<i>-</i> 7,162.		861.
	12 Tot	al revenue	e – add lines 8 through 11 (must equal Part VIII, column (A) (ine 12)	1	L58,385.	290,	<u>702.</u>
	13 Gra	ants and s	imilar amounts paid (Part IX, column(A) Ine 13). 17		46,500.	50,9	<u>950.</u>
			to or for members (Part IX, c olumn (A), fine 4) 				
_	15 Sal	laries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)				
ses	16a Pro	fessional	fundraising fees (Part IX, column (A), line 11e)				
Expenses			sing expenses (Part IX, column (D), line 25) ►				
찚	1		ses (Part IX, column (A), lines 11a-11d, 11f-24e)		35,842.	25 1	368.
	1	-	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		82,342.		318.
	1	-	s expenses. Subtract line 18 from line 12		76,043.	214,3	
	13 1/6	veriue less	s expenses. Subtract fine to nont line 12	Bounning o	f Current Year	End of Year	
2 5	20 Tot	al accete	(Part X, line 16)		135,541.	1,298,	
90	1		es (Part X, line 26)	/ -	0.	1,250,	0.
Net Assets or Fund Balances			r fund balances. Subtract line 21 from line 20	1 1	L35,541.	1,298,9	
			re Block		133,341.	1,230,	<u> </u>
_							
con	ier penalties iplete Decla	of perjury, I or ration of prep	declare that I have examined this return, including accompanying schedules and statements, and parer (other than officer) is based on all information of which preparer has any knowledge	to the best of my	knowledge and	belief, it is true, correct	t, and
		2	romas C. Cronin	5	11 20	212	
Sig	nn		ire of officer	Date			
He	re	Tho	mas C. Cronin	Chairm	an		
			r print name and title	011411			
		Print/Type (preparer's name Preparer's signature Date	Ch	eck If	PTIN	
Pa	id	Richa	rd V. Dennis Richard V Dennis 5/07		f employed	P00840905	
	eparer	Firm's name	UNAMEDE ATTOCA C DESPITO CD3 C				
	e Only	Firm's addr	ACCO INTEREST FORMERS BILLS COM 1000	F	m's FIN ► 73	3-1194609	
		, mm s audi	OKLAHOMA CITY, OK 73112-4290		one no (40		
NA~	v the IDC	discuss th	nis return with the preparer shown above? (see instructions)	Ph	<u> </u>	X Yes	No
				EA0113L 08/18/	711	Form 990	
DΑ	A FUFFA	PCI WOLK I	ionacaon not nouce, see ale separate insulacións.	_rvii3L U0/10/	1.1	1 01111 330	(CUII)

Forn	990 (2011) Oklahoma City Geological Foundation	73-143	F	Page 2		
Pai	t III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III				_	X
1	Briefly describe the organization's mission:					
	Advancement of Science Education					
			- -			
	Did the organization undertake any significant program services during the year which were not listed on the	ne prior		-	_	
_	Form 990 or 990-EZ?			'es	X	No
	If 'Yes,' describe these new services on Schedule O.		<u></u>		تت	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	-ec?		res -	$ \bar{X} $	No
,	If 'Yes,' describe these changes on Schedule O.	.03.	ш '	. 0.5	۳	
4	Describe the organization's program service accomplishments for each of its three largest program service	s as mea	sured h	W 84	nense	. c
-	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amou	int of gran	ts and	alloca	ations	to
	others, the total expenses, and revenue, if any, for each program service reported					
4 a	a (Code) (Expenses \$50,950. including grants of \$50,950.) (Re	venue \$)
	See Schedule 0					
41	(Code) (Expenses \$ 7,280. including grants of \$) (Re	venue \$)
	Administrative Reception - Awards Banquet					
						
4	(Code) (Expenses \$ 3,204. including grants of \$) (Re	venue \$)
	Administrative Reception - Donor Reception					
			-			
					_ _ _	
_	10th Con Cahadula O					
4	d Other program services. (Describe in Schedule O.) See Schedule O.					
	(Expenses \$ 1,087. including grants of \$) (Revenue \$				<u>) </u>	
	e Total program service expenses ► 62,521.			E ~~~	. 000	(2011)
BAA	TEEA0102L 07/05/11			COLL	・コゴリ	(2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or $4947(a)(1)$ (other than a private foundation)? If 'Yes,' complete Schedule A.	1_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		<u>X</u>
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_		<u>x</u>
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 'Yes,' complete Schedule D, Part I	6_		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>X</u>
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 IV	9		<u>x</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a		<u>X</u>
1	b 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		<u> </u>
•	c 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	11 c		<u>x</u>
	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	11 d		<u>X</u>
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 <i>f</i>		X
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		<u>X</u>
	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		<u>X</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		
ļ	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 foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		<u>x</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		<u>x</u>
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		<u>x</u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>x</u>
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) Oklahoma City Geological Foundation

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 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	Х	
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? <i>If 'Yes,' complete Schedule J</i>	23		<u> </u>
24 8	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, and 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		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
C	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Х
ŀ	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		Х
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		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŧ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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 IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	30 31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŧ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
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Form 990 (2011) Oklahoma City Geological Foundation

Part V Statements Regarding Other IRS Filings and Tax Compliance

-414	Chook of Cabadula O cantorna a response to any question in this Bort V			Г
	Check if Schedule O contains a response to any question in this Part V		Yes	No.
_	5 t #		165	110
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0		. 1	ı
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		. 1	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2a	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 0			ı
t	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	.	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	. [Х
	of 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь	$\neg \neg$	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
	of Yes, enter the name of the foreign country.			
•	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			ı
۲.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	. 1	X
	, , , ,	5ь		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
•	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	<u> 50</u>		
6 <i>a</i>	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		Х
ŧ	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
á	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
ŧ	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7с		X
	If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
ſ	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
Ģ	gif the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
i	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
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 organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
٠,	a Did the organization make any taxable distributions under section 4966?	9a		ĺ
	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		
	Section 501(c)(7) organizations. Enter:			$\overline{}$
	a Initiation fees and capital contributions included on Part VIII, line 12			
	o Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders 11a			1
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	ļ
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
;	a is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	
	Note. See the instructions for additional information the organization must report on Schedule O.			
1	h Enter the amount of reserves the organization is required to maintain by the states in			
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			<u></u>
14	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14b		

73-1439474 Form 990 (2011) Oklahoma City Geological Foundation Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a 1a Enter the number of voting members of the governing body at the end of the tax year If there are 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. **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents 4 since the prior Form 990 was filed? 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х 7 a members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7ь stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. 8a a The governing body? 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11 a 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c Schedule O how this is done 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 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 decision? 15a a The organization's CEO, Executive Director, or top management official X 15b b Other officers of key employees of the organization 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 arrangement with a X 16a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16t organization's exempt status with respect to such arrangements? **Section C. Disclosure** 17 List the states with which a copy of this Form 990 is required to be filed > _ OK Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website 19 Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to See Schedule 0 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.

Form 990 (2011)	Oklahoma	Citv	Geological	Foundation

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Section A. 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.

X Check this box if neither the organization	nor any i	related	lorg	anız	zatio	n con	nper	sated any current offi	cer, director, or truste	ee.
				((`)					
(A) Name and title	(B) Average hours per week		Position (do not check more to unless person is bo and a director/		ore the	an one n an offi ustee)	box, cer	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estrmated amount of other compensation
	(describe hours for related organiza tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	(W 2/1099 MISC)	from the organization and related organizations
(1) Lance Ruffel										
Treasurer	0							0.	0.	<u> </u>
(2) Lawrence H. Davis Director	0							0.	0.	0.
(3) Thomas C. Cronin Chairman	0							0.	0.	0.
(4) Joel A. Alberts	 							0.	0.	<u>.</u>
Secretary	0							0.	0.	0.
_(5) J. Mark Lester	_								_	
Director	0							0.	0.	0.
	0							0.	0.	0.
7) Jason Hamilton Prg Endw Chairm	0							0.	0.	0.
_(8)	-									
_(9)										
(10)										
(11)										
(12)										
_(13)		:							., ., .,	
(14)										
			L		Щ.			L		

(A) Name and title	(B) Average hours per	box, unless person is be officer and a director/true					h an t ee)	(D) Reportable compensation from the organization (W 2/1099 MISC)	(E) Reportable compensation from related organizations (W 2/1099 MISC)	amor	(F) stimated unt of oth opensation	her
	week (describ e hours for related organi zations: in Sch O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 271099 MISC)	(W 271099 MISC)	org ar	rom the panization of related anization	d
(15)												
(16)												
(17)												
(18)											·	
(19)												
(20)												
(21)												
(22)												
(23)												
(24)											_	
(25)												
1 b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	L					•	*	0. 0.	0. 0.			$\frac{0.}{0.}$
2 Total number of individuals (including but not limited from the organization • 0	to tho	se li	sted	abo	ve)	who	rec	eived more than \$	100,000 of reportat	ole com	pensat	ion
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust	ee, I	key (emp	loye	e, o	r hig	ghest compensate	d employee	3	Yes	No X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the such individual	oortable an \$15	cor 50,00	npei 00?	nsat If 'Ya	ion : es' d	and e	othe olete	r compensation fr Schedule J for	om	4		x
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' of Section B. Independent Contractors	ompens complet	atio e Sc	n fro	m a lule .	ny (<i>J for</i>	inrel suc	ated h pe	d organization or it erson	ndıvıdual	5		X
Complete this table for your five highest compensation from the organization. Report compensation.	ed indensation	pend for	dent	con	trac ndar	tors yea	that r en	received more the	an \$100,000 of ithe organization's	tax yea	r.	
(A) Name and business addres	s							Description) of services		(C) ensatio	on
												
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶	_	lımı	ted (io th	ose	liste	a at	oove) who receive	a more than			<u></u>

T G	t this 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
9,0	1a Federated campaigns 1a				
FAN	b Membership dues 1b				
80	c Fundraising events 1c				
Ş,₹					
埢뙭	d Related organizations 1 d				
Ş,≅	e Government grants (contributions)				
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 135,781.				
ξě	g Noncash contributions included in lns 1a-1f \$				
8 ₹	h Total. Add lines 1a-1f	135,781.			
필	Business Code				
Ä	2a				
Æ	b				
5 E	c				
<u>~</u>	d		· · · · · · · · · · · · · · · · · · ·		
<u> </u>					
Z	e				
õ	f All other program service revenue				
-	y Total. Add liftes 2a-2i				
	3 Investment income (including dividends, interest and other similar amounts)	27 220			27 220
1	other similar amounts)	<u>27,239.</u>			27,239.
	4 Income from investment of tax-exempt bond proceeds				_
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross rents				
	b Less. rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				ĺ
	(i) Securities (ii) Other				
	7a Gross amount from sales of assets other than inventory 454, 339. 4, 064.				
	assets other trial inventory 434, 339. 4,004.				
	b Less: cost or other basis				
	and sales expenses 372,582.				
	c Gain or (loss) . 81,757. 4,064.				
	d Net gain or (loss)	85,821.	81,757.	4,064.	<u> </u>
NUE	8a Gross income from fundraising events (not including \$				
٦	of contributions reported on line 1c).				
OTHER REVEN	See Part IV, line 18 . a				
풀	b Less. direct expenses b				
ا ه	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19		·		
	b Less. direct expenses b				
	c Net income or (loss) from gaming activities				[
ł					
	10a Gross sales of inventory, less returns and allowances				
	b Less. cost of goods sold . b				
	-				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
		40 750			40 750
	11a CONVENTION ACTIVITIES	48,750.	 	1 71 ^	48,750.
	b ENTERPRISE PRODUCTS	-1,579.		-1,710.	131.
	c ONEOK PARTNERS, L.P.	-5,310.		-5,228.	-82.
	d All other revenue .				
	e Total. Add lines 11a-11d .	41,861.	the formal fixed in the		
	12 Total revenue. See instructions	290,702.	81,757.	-2,874.	76,038.

Page 10

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 (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX												
Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	28,100.	28,100.									
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	22,850.	22,850.									
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16											
	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.							
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.	0.	0.	0.							
7	Other salaries and wages .											
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)											
9	Other employee benefits.											
10	Payroll taxes .											
11	Fees for services (non-employees):											
	a Management											
	b Legal											
	c Accounting	2,075.		2,075.								
	-	2,013.		2,0,0.								
	Lobbying .				·							
	e Professional fundraising services See Part IV, line 17											
	Investment management fees	8,526.		8,526.								
	Other			2,676.								
	Advertising and promotion	2,676.		2,676.								
13	Office expenses	207.		207.								
14	Information technology		<u>-</u> -									
15	Royalties .											
16	Occupancy .											
17	Travel											
18	Payments of travel or entertainment expenses for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization											
23	Insurance.											
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.)											
	Awards Banquet	7,280.	7,280.									
	b Donor Reception	3,204.	3,204.									
	Legends Dinner	1,087.	1,087.									
	Postage and Shipping	248.	,	248.								
	e All other expenses	65.		65.								
	Total functional expenses. Add lines 1 through 24e.	76,318.	62,521.	13,797.	0.							
26		,520.		-5,	`							
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)											

Part X **Balance Sheet** (A) Beginning of year End of year 1 Cash - non-interest-bearing 99.547 2 41,038. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net . 2,500 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L 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 6 organizations (see instructions) 7 Notes and loans receivable, net 8 inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10 a 10 b 10 c b Less, accumulated depreciation 1,033,494 1,257,477. 11 Investments - publicly traded securities . 11 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 1,135,541 16 1,298,515 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue. 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 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. 25 0. 26 0. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 27 27 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here lines 30 through 34. 1,135,541 30 1,298,515. Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund . 32 Retained earnings, endowment, accumulated income, or other funds 32 33 1,135,541. 33 1,298,515. Total net assets or fund balances 1,135,541. 1,298,515. 34 Total liabilities and net assets/fund balances

BAA

Form 990 (2011)

Form 990 (2011) Oklahoma City Geological Foundation	4394/4	Pag	ge IZ				
Part XI Reconciliation of Net Assets			_				
Check if Schedule O contains a response to any question in this Part XI			X				
	1						
1 Total revenue (must equal Part VIII, column (A), line 12)		<u> 290,7</u>					
2 Total expenses (must equal Part IX, column (A), line 25)	2	<u>76,3</u> 214,3					
3 Revenue less expenses. Subtract line 2 from line 1							
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		<u> 135,5</u>					
5 Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	5	-51,4	<u>10.</u>				
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6 1,	298,5	<u> 15.</u>				
Part XII Financial Statements and Reporting			_				
Check if Schedule O contains a response to any question in this Part XII							
	F	Yes	No				
1 Accounting method used to prepare the Form 990. X Cash Accrual Other	 [
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2:	+	<u>X</u>				
b Were the organization's financial statements audited by an independent accountant?	21	b	X				
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	c					
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued separate basis, consolidated basis, or both.	on a						
Separate basis 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 in the Sir Audit Act and OMB Circular A-133?	ngle 3	a	<u>X</u>				
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ed audit	ь					
BAA	For	m 990 (2011)				

TEEA0112L 07/06/11

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Oklahoma City Geological Foundation

Employer (dentification number

73-1439474

Parl	E	Reason for Publ	ic Charity Status	(All organizations	must	comple	ete this	part.) See	instruc	tions			
he c	rga	nization is not a privati	e foundation because	it is. (For lines 1 through	gh 11, cl	neck onl	y one bo	ox.)						
1		A church, convention	of churches or assoc	iation of churches desc	rıbed ın	section	1 70(b)(1)(A)(i).						
2	П	A school described in	section 170(b)(1)(A)(ii). (Allach Schedule E	.)									
3				organization described										
4		A medical research of	rganization operated	in conjunction with a ho	spital de	scribed	ın secti	on 170(t	ь)(1)(А)(iii) Ente	r the hosp	tal's		
5		name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
6 7	X	A federal, state, or loo An organization that r in section 170(b)(1)(A	normally receives a si	ubstantial part of its sup	ed in se port froi	ction 17 n a gove	0(b)(1)(/ ernment	A)(v). al unit c	or from t	he genei	ra ⊮ public d	escrib	ed	
8	П)(b)(1)(A)(vi). (Complete	Part II.)								
9		An organization that r	normally receives. (1) to its exempt function and unrelated business	more than 33-1/3% of s ns — subject to certain taxable income (less s	its suppo	ort from	(2) no n	nore tha	ın 33-1/3	3% of its	support fro	om arc)SS	
10		An organization organ	nized and operated ex	clusively to test for put	olic safet	y. See s	section 9	509(a)(4)).					
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the describes the type of supporting organization and complete lines 11e through 11h.											box th	at	
		a Type I	b Type II	c Type III		-	_		_	d∐	Type III -		r	
е		By checking this box, other than foundation section 509(a)(2).	I certify that the orga managers and other	inization is not controlle than one or more publi	ed directi cly supp	y or indi orted or	ganızatı	y one or ons des	more d	isqualifie isection	ed persons i 509(a)(1)	or		
f		check this box		mination from the IRS t							ganization,			
g		Since August 17, 200	6, has the organization	on accepted any gift or	contribu	tion fror	n any of	the foll	owing p	ersons?				
		(i) A person who d	irectly or indirectly co rning body of the sup	introls, either alone or t	ogether	with per	sons de	scribed	ın (ıı) ar	nd (III)	11 g (i)	Yes	No	
			er of a person describ							•	11 g (ii)			
		• • • • • • • • • • • • • • • • • • • •	•	lescribed in (i) or (ii) ab	ove?						11 g (iii)			
h		• •	• •	supported organization										
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	(iv) (organiz column (your go	s the ation in) listed in overning ment?	(v) Did yo the organ column your su	zation in	in organization in column (i)		(vir) Amour	nt of sup	port	
					Yes	No	Yes	No	Yes	No				
(A)														
(B)					<u> </u>						<u> </u>			
(C)											,			
(D)														
(E)						<u> </u>								
.						I								

Schedule A (Form 990 or 990-EZ) 2011 Oklahoma City Geological Foundation 73-1439474 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 under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support									
Caleı begir	ndar year (or fiscal year nning 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.')	217,640.	206,748.	154,897.	144,817.	135,781.	859,883.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
4	Total. Add lines 1 through 3	217,640.	206,748.	154,897.	144,817.	135,781.	859,883.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						35,552.			
6	Public support. Subtract line 5 from line 4		· · · · · · · · · · · · · · · · · · ·			-	824,331.			
Sec	tion B. Total Support	<u> </u>								
Cale	ndar year (or fiscal year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
7	Amounts from line 4 .	217,640.	206,748.	154,897.	144,817.	135,781.	859,883.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	53,213.	50,427.	13,892.	20,730.	113,060.	251,322.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		:				0.			
11	Total support. Add lines 7 through 10	. ,					1,111,205.			
12	Gross receipts from related activ	ities, etc (see inst	ructions)			. 12	0.			
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	. ▶□			
	tion C. Computation of Pu						74 10 %			
	Public support percentage for 20			e 11, column (f))		14 15	74.18 % 73.52 %			
	Public support percentage from					\				
16a 33-1/3% support test — 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . ■ X										
ŧ	b 33-1/3% support test — 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17 a	17 a 10%-facts-and-circumstances test — 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	' test, check this l tion qualifies as a	box and stop here a publicly supporte	e. Explain in Part I ed organization	V how the ►			
_	Private foundation. If the organi	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,						
BAA					5	CHEQUIE A (FORM)	990 or 990-EZ) 2011			

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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.)

Sect	tion A. Public Support						
	dar year (or fiscal yr 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 organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support		 	r·	T		
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	s for the organiza	ition's first, secon	d, third, fourth, or	r fifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	ıblic Support	Percentage				
15	Public support percentage for 20	11 (line 8, column	n (f) divided by line	e 13, column (f)).		15	%
16	Public support percentage from 2	2010 Schedule A,	Part III, line 15			16	<u> </u>
Sec	tion D. Computation of Inv	vestment Inco	me Percentag	je –			
17	Investment income percentage for	or 2011 (line 10c,	column (f) divided	by line 13, colur	nn (f))	17	
18	Investment income percentage fi	rom 2010 Schedul	le A, Part III, line	17		18	%
	33-1/3% support tests - 2011. If is not more than 33-1/3%, check	this box and stop	here. The organi	zation qualifies a	s a publicly suppo	rted organization	. ▶∐
t	33-1/3% support tests - 2010. If line 18 is not more than 33-1/3%	the organization of the check this box a	did not check a bo and stop here. The	ox on line 14 or lii e organization qua	ne 19a, and line 16 alifies as a publicly	is more than 33-1/ supported organize	/3%, and ation ► □
20	Private foundation. If the organiz	zation did not che	ck a box on line 1	4, 19a, or 19b, cl	neck this box and	see instructions	▶ □

Schedule A	(t,orm 990 or 9	90-EZ) 2011	OKLANC	ma City	Georog:	ical Fou	ndation		·14394/4	Page 4
Part IV	Supplemen Part II, line (See instruc	tal Inform a 17a or 17t	ation. Con o; and Par	nplete this t III, line 1	s part to p 12. Also c	orovide the complete t	e explanat his part fo	ions require r any additio	d by Part II, lir onal informatio	ne 10; on.
	 -									
										- -
_ 										
										~
										~
										~

SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047

2011

Open to Public Inspection

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990. Department of the Treasury Internal Revenue Service

Name of the Organization Oklahoma City Geological Foundation	oundation					73-1439474	4
Part General Information on Grants and Assistance	rants and Assist	ance					
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 	s to substantiate the a grants or assistance procedures for monito	smount of the grants? ring the use of gran	of the grants or assistance, the grantees' eligibility for the grants or assistance, and use of grant funds in the United States.	itees' eligibility for the gi	rants or assistance, a	·	X Yes No
	nce to Governme for any recipient f additional space	ents and Organ that received n Is needed	ind Organizations in the United States. Complete if the organization answered 'Yes' to received more than \$5,000. Check this box if no one recipient received more than \$5,000. Seded	ted States. Comple Check this box if no	ete if the organiza o one recipient re	ation answered ''	res' to n \$5,000. ▶ ☐
1 (a) Name and address of organization or government	(b) 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) <u>OPUBCO</u>			17,500.	0.			NEWSPAPERS IN EDUCATION: OKLA ROCKS
(a)							
(3)							
(b)							
(5)							
<u> </u>							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table) and government org	anizations listed in t	the line 1 table				

Schedule I (Form 990) (2011)

TEEA3901L 06/01/11

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 73-1439474 Oklahoma City Geological Foundation Schedule I (Form 990) (2011)

Part III

Page 2

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non cash assistance 17,000 5,850 (c) Amount of cash grant (b) Number of recipients TEACHING MATERIALS AND EQUIP EDUCATIONAL SCHOLARSHIP (a) Type of grant or assistance Part IV ~ က 2 9

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Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Internal Revenue Service		Attach to Form 350 of 350-LE.	anapousum
Name of the organization Oklahoma City	Geological Foundation	1	Employer identification number 73-1439474
_	rt III, Line 4a - Program Ser		
	· ·	•	rda C Endormenta
Donation_to	ONIA CITY GEOLOGICAL	Society for Scholarships, Away	cas & Endowments.
2011 <u>Kate</u> <i>E</i>	ward	7,500	
<u>2011 Takker</u>	Award	7,500	
Beth Cronir	Elementary School En	dowment 4,100	
Davis Schol	arship	2,000	
Foundations	Excellence	4,350	
Thomas_Cror	n <u>in</u>	1,000	
Robert_Klab	ozuba	1,000	
Philip_Boyl	.e	2,000	
The John Ga	ntchell	1,000	
Other Non-L	irected	20,500	
Form 990, Pa	rt III, Line 4d - Other Progra	am Services Description	
Administrat	ive Reception - Legen	ds Dinner	
Form 990, Pa	rt VI, Line 11b - Form 990 R	Review Process	
Reviewed ar	nd signed by president		
		ization Documents Publicly Available	

2011

Schedule O - Supplemental Information

Page 2

Oklahoma City Geological Foundation

73-1439474

Form 990, Part XI, Line 5 Other Changes in Net Assets or Fund Balances

Net Unrealized Gains/Losses

Total $\frac{\$}{\$}$ $\frac{-51,410}{-51,410}$.