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Department of the Treasury Internal Revenue Service

# Short Form 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) Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state renorting requirements.

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

OMB No 1545-1150

Open to Public Inspection

Α	For the 2011 calendar year, or tax year beginning , 2011	l, and ending				
В_	Check if applicable C	D Employer ident	imployer identification number			
	ess change GERMAN AMERICAN SOCIETY ARTS ASSOCIATION			73-1589995		
	change ENDOWMENT TRUST E T			elephone number		
$\vdash$	Initial return 1429 SOUTH TERRACE DRIVE		918-744	-6997		
H	Terminated TULSA, OK 74104-4625 Amended return					
	Application pending		F Group Exem Number	nption -		
G	Accounting Method: X Cash	H Check		ganization is not		
	Website: ► N/A	<del></del>	red to attach Scl 990-EZ, or 990-F	hedule B (Form		
		a)(1) 07   527		. <u></u>		
К	Check Lift the organization is not a section 509(a)(3) supporting organization normally <b>not</b> more than \$50,000. A Form 990-EZ or Form 990 return is not require instructions) Eut if the organization chooses to file a return, be sure to file a com-	ed though Form 990-N (				
L	Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 ins	re \$200,000 or more, or stead of Form 990-EZ	ıf total ► \$	116,446.		
	rt I Revenue, Expenses, and Changes in Net Assets or Fund Ba			Part I.)		
·	Check if the organization used Schedule O to respond to any question in th	•		, X		
	1 Contributions, gifts, grants, and similar amounts received		1			
	2 Program service revenue including government fees and contracts		2			
	3 Membership dues and assessments		3			
	4 Investment income		4	9,413.		
	5a Gross amount from sale of assets other than inventory	5a  107,0	)33.			
	<b>b</b> Less: cost or other basis and sales expenses	5b 109,2				
	· ·	See Schedule O	5c	-2,207.		
	6 Gaming and fundraising events					
Ŗ	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a				
Ā	<b>b</b> Gross income from fundraising events (not including \$	of contributions				
REVENUE	from fundraising events reported on line 1) (attach Schedule G if the sum	Or continuations				
Ē	of such gross income and contributions exceeds \$15,000)	6b				
	c Less direct expenses from gaming and fundraising events	6c				
!	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6 d			
	7a Gross sales of inventory, less returns and allowances	7a				
	<b>b</b> Less: cost of goods sold .	7b				
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c			
	8 Other revenue (describe in Schedule O)		8			
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	7,206.		
				8,523.		
	10 Grants and similar amounts paid (list in Schedule O)  11 Benefits paid to of for metabers		11			
E X	12 Salaries, other compensation, and employee benefits		12	·		
ê	13 Professional fees and other payments to independent contractors.		13	300.		
N	14 Occupancy, rent, utilities, and maintenance		14			
<b>⊘</b> ,E	15 Printing, publications, postage, and shipping		15			
2012		See Schedule O	16	90.		
<b>%</b>	17 Total expenses. Add lines 10 through 16		▶ 17	8,913.		
<b></b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	<u> </u>	18	-1,707.		
ASSE ASSE	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			187,910.		
a É			20			
S S	20 Other changes in net assets or fund balances (explain in Schedule O) 21 Net assets or fund balances at end of year Combine lines 18 through 20 A For Paperwork Reduction Act Notice, see the separate instructions.		▶ 21	186,203.		
BA	A For Paperwork Reduction Act Notice, see the separate instructions.			orm <b>990-EZ</b> (2011)		
	, , , , , , , , , , , , , , , , , , , ,			,		
<b>E</b> 35						
(C)						
	TEEA0803L 08/05/11					

Form 990-EZ (2011) GERMAN AMERICAN SOCIETY ARTS ASSOCIATION 73-1589995 Page 2								
Partill Balance Sheets. (see the instructions for Part II.)								
	Check if the organization used Schedule O to respond to any question in this Part II  (A) Beginning of year				or T	(D) F	1 26 1 2 2	
22	0.1		ŀ					d of year
	Cash, savings, and investments		ŀ		37,910			186,203.
23	Land and buildings		,			23		
24	Other assets (describe in Schedule O)			1.0	7 010	24		106 000
25	Total assets			10	37,910			186,203.
	Total liabilities (describe in Schedule O)		l 21\	10	0 37,910			$\frac{0.}{186,203.}$
	Net assets or fund balances (line 27 of c				7,910	<u>·   2/  </u>	Exper	
VI BOU	Check if the organization used Sci				X	(Real	ured for s	ection
What i						501(c	(3) and $(3)$	501(c)(4)
Desc	ribe the organization's program service a	ccomplishments for each of i	ts three largest pro-	gram service	s, as	organ	nizations a	and section its; optional
meas bene	s the organization's primary exempt purpose? See ribe the organization's program service actived by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the service each program title	ces provided, the nu	mber of per	sons		hers)	its, optional
28	GRANT FOR EDUCATIONAL PUR	POSES BENEFITTING	ALL PARTICIP	ANTS IN	<del></del>			
	EDUCATIONAL PROGRAMS OFFE							
	(Grants \$ ) If the	is amount includes foreign gr	rants, check here			28 a		8,523.
29	Zavante 7	io amount morados foroign g.	<u> </u>					<u> </u>
						1		
						1 1		
	(Grants \$ ) If the	is amount includes foreign gr	rants, check here		·	29 a		
30								
						]		
						1 1		
	(Grants \$ ) If thi	is amount includes foreign gr	ants, check here			30 a		
31	Other program services (describe in Sch		· · · · · · · · · · · · · · · · · · ·					
		is amount includes foreign gr	rants, check here		▶ □	31 a	_	
32	Total program service expenses (add lin	nes 28a through 31a).			-	32		8,523.
<u>Rar</u>	레V휇 List of Officers, Directors, 1				mpensated.	(see the	e instruction	s for Part IV.)
	Check if the organization used Sc	hedule O to respond to any o			<del></del>			
	(a) Name and address	(b) Title and average hours per week	(c) Reportable compensa (Form W-2/1099-MISC	) Loontribut	ealth benefi ions to emp	ts, plovee	(e) Estima other co	ated amount of ompensation
	(a) Name and address	devoted to position	(If not paid, enter -0-)	' J benet	it plans, ar	nd J		
505	T			deferred	1 compensa	ition		
	IS_GALLAGHER	Director				ا ہ		0
	9 S TERRACE DR	T		0.		0.		0.
	SA, OK 74104							
	GRIED GRIMM	Director		o.		0.		0.
	9 S TERRACE DR	1		١٠٠		0.1		0.
===	SA, OK 74104	Director						<del></del>
172	L CREEK 9 S TERRACE DR	Director		0.		0.		0.
荒	SA, OK 74104	<b>-</b>		٠٠]		١٠٠		0.
5TE	VEN PARROT	Director						
	9 S TERRACE DR	1	,	0.		0.		0.
	SA, OK 74104			-		١.,		٠.
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		TEE A08121 0	2/14/12					90-F7 (2011)

Form 990-EZ (2011) GERMAN AMERICAN SOCIETY ARTS ASSOCIATION

73-1589995

45a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?

b 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,'

X

Х

(2011)

45 a

45 h

Form **990-EZ** 

Form 990-EZ	(2011) GERMAN AMERICAN SO	CIETY ARTS_ASSO	CIATION	73-158	39995	Page 4
					Y	es No
46 Did the	organization engage, directly or indire ates for public office? If Yes, complete	ctly, in political campai	ign activities on behalf	of or in opposition to		
	Section 501(c)(3) organizations				146	X
	501(c)(3) organizations and sec	tion 4947(a)(1) no	nexempt charitable			ווע
	47-49b`ánd 52, and complete th	ne tables for lines !	50 and 51.			
	Check if the organization used Schedu	le O to respond to any	question in this Part VI			
						es No
47 Did the	organization engage in lobbying activite Schedule C, Part II	ties or have a section 5	501(h) election in effect	during the tax year? If	'Yes,' 47	
•	organization a school as described in se	ection 170(b)(1)(A)(ii)?	If 'Yes,' complete Sche	edule F	48	+-
	organization make any transfers to an				49a	<del></del>
b If 'Yes,	was the related organization a section	1 527 organization?	-		49 b	
50 Comple	ete this table for the organization's five	highest compensated	employees (other than	officers, directors, truste	es and key	
employ	ees) who each received more than \$10	0,000 of compensation	T	T	None '	
(a)	Name and address of each employee	(b) Title and average hours per week	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee	(e) Estimated at other compen	mount of isation
	paid more than \$100,000	devoted to position	1	benefit plans, and deferred compensation		
				deterred compensation	<del>-</del>	
			}			
· <u>-</u>						
<del></del>					<del></del>	
			Ì			
e Total ni	umber of other employees paid over \$1	00,000	· · · · · · · · · · · · · · · · · · ·	_		
51 Comple	te this table for the organization's five	highest compensated i	ndependent contractors	s who each received mo	re than \$100,0	100 of
	nsation from the organization. If there is and address of each independent contractor paid		(b) Type	of service	(c) Compens	ation
	ile and address of each independent contractor para	111010 (1111) \$100,000	(5) 1) pc		(0,00	
			<del> </del>	<del></del>	<del></del>	
		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		<del></del>
			ļ			
			<b>}</b>			
a Total -	umber of other independent contractors	e asch recourse over ¢	100.000		L	
	organization complete Schedule A? No	•		147(a)(1) nonexempt		
charitat	ole trusts must attach a completed Sch	edule A .			► Yes	No
Under penalties o true, correct, and	f perjury, I declare that I have examined this return, complete Declaration of preparer other than office	including accompanying scheig) is based on all information of	dules and statements, and to the following the state of t	ne best of my knowledge and be viedge	lief, it is	
		1	-	1 6/15/1	7	
Sign	Signeture of officer	<u></u>	·	Date		
Here	STEVEN W. PARROTT, TREASUR	ER				
	Type or print name and title					
Paid	Pnnt∕Type preparer's name	Preparer's eignature	1 L Da	Check [V		
Preparer	STACY PRATT	Day 11.	hat 6,	//5//2 self-emplo	pyed P0064	1525
Use Only	Firm's name ► STACY J. PRATT		4.4.5	Firm's ElN ▶	040.007.007	
May the IDS	Firm's address ► 4821 S SHERIDAN S discuss this return with the prepare	TE 227, TULSA, OK 74		Phone no	918-627-366 ▶ ☑ Yes □	No
way the Ins	discuss this return with the prepare	SHOWN ADOVET DEE!		<u>· · · · · · · · · · · · · · · · · · · </u>	Form 990-E	
					ronn augre	·— (50.0)

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

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.

Open to Public Inspection

Name of the organization GERMAN AMERICAN SOCIETY ARTS ASSOCIATION ENDOWMENT TRUST	Employer identification number 73–1589995
Form 990-EZ, Part III - Organization's Primary Exempt Purpose	
SUPPORT OF CHARITABLE ORGANIZATION	
	·

2011

## **Schedule O - Supplemental Information**

Page 2

Client GER001

GERMAN AMERICAN SOCIETY ARTS ASSOCIATION ENDOWMENT TRUST

73-1589995

6/14/12

02 20PM

Form 990-EZ, Part I, Line 5c **Net Gain (Loss) from Noninventory Sales** 

Publicly Traded Securities

Gross Sales Price: Cost or Other Basis: 107,033. 109,240.

Total Gain (Loss) Publicly Traded Securities \$

-2,207.

Total Net Gain (Loss) From Noninventory Sales \$ -2,207.

Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid In Excess of \$5,000

Class of Activity: Donee's Name:

Donee's Address:

EDUCATION

GAST ARTS ASSOCIATION 1429 S TERRACE DR

TULSA, OK 74104

Cash Amount Given:

8,523.

Form 990-EZ, Part I, Line 16 Other Expenses

FOREIGN TAXES PAID

90.