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Form **990-PF**

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

^{sτ} 2011

OMB No 1545-0052

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

<u>!</u>			dar year 2011 or tax year beginning , a	ana enaing		A Emplo	yer identification number	
	Nan	ie or ioc	indapou			A Emplo	yer identification number	
	WI	eGEI	NER FOUNDATION, INC.			73-	6095407	
-			I street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		one number (see instruction	s)
			BOX 18335			405	-239-7961	
-			, state, and ZIP code			C If exen	nption application is pending	check here
_	OI	KLA	HOMA CITY OK 73154-0	<u>335</u>		O II exell	iption application is pending	, cricox riere
(G C	heck a	all that apply 🔲 Initial return 🔃 Initial retu	rn of a former public of	charity	D 1 For	reign organizations, check hi	ere 🕨 📜
			Final return Amended	return		2. For	reign organizations meeting	the
			Address change Name cha	ange		859	% test, check here and attac	h computation
	н с	heck t	type of organization X Section 501(c)(3) exempt priva	te foundation		E If priva	ite foundation status was ter	minated under
Γ	_ s	Section	1 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation		section	n 507(b)(1)(A), check here	▶ :
Ī	i Fa	ır mar	ket value of all assets at J Accounting method	X Cash Acc	rual	F If the fo	oundation is in a 60-month to	ermination
	en	d of y	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check	here
	line	e 16)	▶ \$ 2,556,197 (Part I, column (d) mus	t be on cash basis)				
	Pa	ırt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	roctmont	(c) Adjusted net	(d) Disbursements for chantable
			amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(D) Net IIIV		income	purposes
	1	4			 			(cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)		-			
		2	Check ▶ X if the foundation is not required to attach Sch. If	76		76	RE(EIVED -
		3	Interest on savings and temporary cash investments			54,534	<u> </u>	S
		4	Dividends and interest from securities	54,534	;	34,334	BI AUG	2 0 2012 P
		5a	Gross rents		 		_ IO AUG	20 (0) (
	ne	b	Net rental income or (loss)	7.064	<u> </u>			<u> </u>
	Revenue	6a	Net gain or (loss) from sale of assets not on line 10	-7,964	ļ		- 1 oc 1	DEN, UT
	e e	b	Gross sales price for all assets on line 6a 77,696			o		
	∝	7	Capital gain net income (from Part IV, line 2)		 		0	
		8	Net short-term capital gain	ļ	 	+		
		9	Income modifications	-	-			
		10a	Gross sales less returns & allowances					
		b	Less Cost of goods sold		ļ			
		C	Gross profit or (loss) (attach schedule)	202 041	2.	00 570		
		11	Other income (attach schedule) STMT 1	392,941		92,572	0	
	- 0 -	12	Total. Add lines 1 through 11	439,587		47,182	0	7,200
	se	13	Compensation of officers, directors, trustees, etc	30,000 29,949		22,800 29,949		7,200
	en	14	Other employee salaries and wages	2,427	+	2,427		
	Expenses	15	Pension plans, employee benefits Legal fees (attach schedule) SEE STMT 2	7,140	1	5,355		1,785
	Ш	16a		3,500		2,625	-	875
	ative I	b	,	10,891		8,168		2,723
20		C	Other professional fees (attach schedule) STMT 4	10,891	1	0,100		2,723
S	ist	17	Interest Taxes (attach schedule) (see instructions) STMT 5	26,281	<u> </u>	24,181		
*	Ë	18	Taxes (attach schedule) (see instructions) STMT 5 Depreciation (attach schedule) and depletion STMT 6	20,281	 	,101		
SCANNED	μþ	19		7,860	 	7,860	· · · · · · · · · · · · · · · · · · ·	
Æ	ď	20	Occupancy Travel conferences and mostings	,,880	1	7,300	-	
Ö	pu	21	Travel, conferences, and meetings		1			
()	Operating and Administr	22	Printing and publications Other expenses (att sch.) STMT 7	2,316	:	2,316		
SEP	ij	23		2,316	<u>'</u>	2,310		
	at	24	Total operating and administrative expenses.	120,364	4	05,681	0	12,583
0	Je!	25	Add lines 13 through 23	191,000		00,001	<u> </u>	191,000
4	ō	25	Contributions, gifts, grants paid	311,364		05,681	0	
2012		26	Total expenses and disbursements. Add lines 24 and 25	311,364	<u> </u>	05,001	-	203,363
72		27	Subtract line 26 from line 12	120 223	,			
		a	Excess of revenue over expenses and disbursements	128,223		41,501		
		b	Net investment income (if negative, enter -0-)	,	 3	-1,50I	0	
		l c	Adjusted net income (if negative, enter -0-)	ī				I a

For Paperwork Reduction Act Notice, see instructions.

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P	art I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End of	year
<u>.</u>		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	e	(c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	162,676	164,	470	164,470
	3	Accounts receivable ▶]	
		Less allowance for doubtful accounts ▶	77			
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
-	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other			1	
-		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att schedule)				
		Less allowance for doubtful accounts ▶ 0			_	· · · · · · · · · · · · · · · · · · ·
ets	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges	105 016	120	200	146.046
٩	10a	Investments—U S and state government obligations (attach schedule) STMT 8	185,016	130,		146,046
	b	Investments—corporate stock (attach schedule) SEE STMT 9	1,026,603	1,172,		1,322,357
	C	Investments—corporate bonds (attach schedule) SEE STMT 10	205,780	205,	780	211,300
ı	11	Investments—land, buildings, and equipment basis ▶				
H	40	Less accumulated depreciation (attach sch) ▶				
	12	Investments—mortgage loans	357,747	202	747	711 020
	13	Investments—other (attach schedule) SEE STATEMENT 11	357,747	392,	/4/	711,820
-	14	Land, buildings, and equipment basis ► 35, 679	:			
	45	Less accumulated depreciation (attach sch) ► STMT 12 35, 679 Other assets (describe ► SEE STATEMENT 13)	204		204	204
	15 16	·	204		204	204
	10	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,938,103	2,066,	043	2,556,197
+	17	Accounts payable and accrued expenses	1,964		681	2,330,197
	18	Grants payable	1,304		001	
S	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ig	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ►)				
	23	Total liabilities (add lines 17 through 22)	1,964	Í.	681	
+		Foundations that follow SFAS 117, check here				
es		and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			1	
d Balances	25	Temporarily restricted				
믬	26	Permanently restricted				
5		Foundations that do not follow SFAS 117, check here				
빕		and complete lines 27 through 31.				
0	27	Capital stock, trust principal, or current funds				
Net Assets or Fun	28	Paid-in or capital surplus, or land, bldg, and equipment fund	1,821,059	1,821,	059	
AS	29	Retained earnings, accumulated income, endowment, or other funds	115,080	243,	303	
듷	30	Total net assets or fund balances (see instructions)	1,936,139	2,064,	362	
Ž	31	Total liabilities and net assets/fund balances (see				
\perp		instructions)	1,938,103	2,066,	043	
	art l					
1	Total	net assets or fund balances at beginning of year-Part II, column (a), line 30 ((must agree with			
	end-	of-year figure reported on prior year's return)			1	1,936,139
2	Ente	amount from Part I, line 27a			2	128,223
		r increases not included in line 2 (itemize) ▶			3	
		ines 1, 2, and 3			4	2,064,362
		eases not included in line 2 (itemize)			5	·
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, colum	nn (b), line 30		6	2,064,362

Part IV Capital Gains a	and Losses for Tax on Investm	ent Income				
	ibe the kind(s) of property sold (e.g., real estate, rehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acc	·	(d) Date sold (mo , day, yr)
1a SEE WORKSHEET						
b						
С		<u> </u>				
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale	((h) Gain ((e) plus (f)	
a						
b						
С						
d						
e						
Complete only for assets show	ng gain in column (h) and owned by the	foundation on 12/	31/69			h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any), but not le .osses (froi	ess than -0-) or m col (h))
a						
b						
С						
d						
e						
2 Capital gain net income or (net	if (loss), enter -0- in	Part I, line 7 _		2		-7,964
	oss) as defined in sections 1222(5) and 8, column (c) (see instructions) If (loss)	_				
Part I, line 8				3		
Part V Qualification U	Inder Section 4940(e) for Redu	iced Tax on N	et Investment Inc	ome		
If section 4940(d)(2) applies, leave	ection 4942 tax on the distributable amo	unt of any year in t				Yes X No
	ualify under section 4940(e) Do not com					
1 Enter the appropriate amount in	n each column for each year, see the ins	structions before n	naking any entries			
(a) Base period years Calendar year (or tax year beginning i	n) Adjusted qualifying distributions	Net value	(c) e of nonchantable-use assets			(d) button ratio vided by col (c))
2010	160,		2,503,49			0.064068
2009	165,		2,353,72			0.070450
2008	178,		2,898,32			0.061521
2007	157,		2,919,30	04		0.054005
2006	157,	041	2,913,40	01		0.053903
2 Total of line 1, column (d)				2		0.303947
•	e 5-year base period—divide the total on has been in existence if less than 5 year.	• • •	the	3		0.060789
4 Enter the net value of nonchar	table-use assets for 2011 from Part X, li	ine 5		4		2,916,945
5 Multiply line 4 by line 3				5		177,318
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6		3,415
7 Add lines 5 and 6				7		180,733
8 Enter qualifying distributions from If line 8 is equal to or greater the Part VI instructions	om Part XII, line 4 nan line 7, check the box in Part VI, line	1b, and complete	that part using a 1% ta	8 x rate Se	ee the	203,583

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Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

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

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 the tax year beginning in 2011?

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

foundation had excess business holdings in 2011)

4b X Form 990-PF (2011)

X

3b

4a

N/A

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Pa	art VII-B Statements Regarding Activities for Which Forn	<u>n 4720 May B</u>	<u>e Required (d</u>	continued)			
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	_ `	res X No		i 1	
	(2) Influence the outcome of any specific public election (see section 4955),	or to carry on,		-			
	directly or indirectly, any voter registration drive?		<u> </u>	∕es X No	i l		
	(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	∕es <u>X</u> No	i		
	(4) Provide a grant to an organization other than a charitable, etc., organization	on described in	_	_			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)		<u> </u>	$\overline{\mathbf{X}}$ No	i		
	(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational					
	purposes, or for the prevention of cruelty to children or animals?		\ \	∕es 🏋 No 🛚		. 1	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify u	inder the exceptio	ns described in		. 1	i 1	
	Regulations section 53 4945 or in a current notice regarding disaster assistar	nce (see instructio	ns)?	N/A	5b_		
	Organizations relying on a current notice regarding disaster assistance check			▶ 📋			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax	. :-				
	because it maintained expenditure responsibility for the grant?		N/A 🗌 \	∕es 💹 No			
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums					
	on a personal benefit contract?		···	res X No			
þ	Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit of	contract?		6b		X
	If "Yes" to 6b, file Form 8870			(
	At any time during the tax year, was the foundation a party to a prohibited tax		_	∕es X No			
	If Yes, did the foundation receive any proceeds or have any net income attrib			N/A	7b		L
Pa	art VIII Information About Officers, Directors, Trustees, I	Foundation M	anagers, Hig	hly Paid Em	ploye	∍es,	
	and Contractors						
<u>1 l</u>	ist all officers, directors, trustees, foundation managers and their compe	ensation (see ins	tructions).	·			
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Ex	pense ad	ccount
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		er allowa	
			- '	compensation	├		
SE	E STATEMENT 14						
					\vdash		
		-					
					\vdash		
		-					
			 		┿		
		-	:				
_					Ь		
2	Compensation of five highest-paid employees (other than those include "NONE."	a on line 1—see	instructions). If	none, enter			
	NONE.	1	T	Can Contributions to	Τ		
	(a) Name and address of each ampleyed and more than \$50,000	(b) Title, and average	(a) Componention	(d) Contributions to employee benefit	(e) Ex	pense a	ccount,
	(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	othe	er allowa	nces
NZ	ONE			Compensation	\vdash		
140	NA D	}					
•			 		+		
		1					
		 			+-		
		1					
		 	 		+		
		1					
		 			+-		
		1		1	1		
Foto	al number of other employees paid over \$50,000	L	<u> </u>	1	└	\neg	
ULE	Il number of other employees paid over \$50,000					0 0	0
				Fo	m 23	ツーアド	(2011)

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Part VIII	Information About Officers, Directors, Trustees, Fand Contractors (continued)	oundation Managers, Highly Pa	nid Employees,
3 Five hig	hest-paid independent contractors for professional services (see	e instructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number	of others receiving over \$50,000 for professional services	•	_ >
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct chantable activities during the tax year Include relevant statistical infor d other beneficianes served, conferences convened, research papers produced, etc	mation such as the number of	Expenses
1 N/A			
	· · · · · · · · · · · · · · · · · · ·		ļ
2			
3			-
•			
4			
Part IX-B	Summary of Program-Related Investments (see	instructions)	
	largest program-related investments made by the foundation during the tax year on lines 1 a		Amount
1 N/A			
			<u> </u>
2			
All other program	n-related investments. See instructions		1
3			
Total, Add line	es 1 inrouan 3	•	

Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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203,583

200,168

3,415

За

3b

4

b

4

5

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see instructions)

Pa	art XIII Undistributed Income	(see instruction	s)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part 2	xı. İ	Corpus	Years prior to 2010	2010	2011
	line 7	,				142,432
2	Undistributed income, if any, as of the en	nd of 2011				<u> </u>
	Enter amount for 2010 only					
	Total for prior years 20 , 20	20				
3	Excess distributions carryover, if any, to					
	From 2006	15,306				
h	From 2007	14,730				
~	From 2008	37,957				
d	From 2009	50,059		-		
_	From 2010	39,237				
	Total of lines 3a through e	- 35,25.	157,289			
4	Qualifying distributions for 2011 from Par	ri XII				
•	line 4 ▶ \$ 203,583	,				
а	Applied to 2010, but not more than line 2	'a				
	Applied to undistributed income of prior y					
	(Election required—see instructions)					
c	Treated as distributions out of corpus (El	ection				
_	required—see instructions)					
d	Applied to 2011 distributable amount		_			142,432
	Remaining amount distributed out of corp	ous	61,151			
5	Excess distributions carryover applied to		,			
_	(If an amount appears in column (d), the					
	amount must be shown in column (a)					
6	Enter the net total of each column as					
	indicated below:					
a	Corpus Add lines 3f, 4c, and 4e Subtrac	ct line 5	218,440	-		
	Prior years' undistributed income Subtra		•			
	line 4b from line 2b		-	1		
С	Enter the amount of prior years' undistrib	outed				,
	income for which a notice of deficiency h		-			
	been issued, or on which the section 494	12(a)				
	tax has been previously assessed				-	-
d	Subtract line 6c from line 6b Taxable					
	amount—see instructions					
е	Undistributed income for 2010 Subtract	line				
	4a from line 2a Taxable amount—see			,		
	instructions					-
f	Undistributed income for 2011 Subtract	lines			-	
	4d and 5 from line 1. This amount must be	oe e				
	distributed in 2012		- <u>-</u>			0
7	Amounts treated as distributions out of co	•	'			-
	to satisfy requirements imposed by section	on				
	170(b)(1)(F) or 4942(g)(3) (see instruction					
8	Excess distributions carryover from 2006				-	
	applied on line 5 or line 7 (see instruction	•	15,306		<u></u>	
9	Excess distributions carryover to 2013	2.			1	
	Subtract lines 7 and 8 from line 6a		203,134			
10	Analysis of line 9					
а	Excess from 2007	14,730		*	-	
b	Excess from 2008	37,957	-			
C	Excess from 2009	50,059				
d	Excess from 2010	39,237	-		-	-
<u>e</u>	Excess from 2011	61,151		<u>L:</u>	L	000 PE

factors NONE

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year SEE STATEMENT 15 191,000 191,000 Total ▶ 3a b Approved for future payment N/A Total ▶ 3b

Part XVI-A Enter gross am	 Analysis of Income-Producing A ounts unless otherwise indicated 		d business income	Excluded	by section 512, 513, or 514	
1 Program as	2000 2000	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program se				 	-	· · · · · · · · · · · · · · · · · · ·
ь ——				<u> </u>	-	· · · -
c				 		
d				+		
		-		+		
f				+		
	nd contracts from government agencies			+		
	p dues and assessments			+		
	savings and temporary cash investments	-		14	76	
	and interest from securities			14	54,534	
	ncome or (loss) from real estate		¥*1	+	34,334	
	nanced property			+		
	ot-financed property				-	
	ncome or (loss) from personal property			-		
7 Other inves				15	392,572	
	is) from sales of assets other than inventory			18	-7,964	
	or (loss) from special events		· ·····	+	.,,50-2	
	or (loss) from sales of inventory	-				7
11 Other rever	•			†		
	S ACTION SETTLEMENT			1	369	-
				 		
e				1		
12 Subtotal Ad	dd columns (b), (d), and (e)			0	439,587	0
	line 12, columns (b), (d), and (e)				13	439,587
13 Total. Add	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations)				13	439,587
13 Total. Add	t in line 13 instructions to verify calculations)	Accomplish	ment of Exemp	ot Purp		439,587
13 Total. Add (See worksheet	t in line 13 instructions to verify calculations)				oses	-
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See workshee Part XVI-B Line No.	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the
13 Total. Add (See worksheel Part XVI-B Line No. ▼	t in line 13 instructions to verify calculations) Relationship of Activities to the Explain below how each activity for which incompared to the control of the control o	me is reported in	n column (e) of Part	XVI-A co	oses	o the

Part X	VII	Information Reg Exempt Organiz		ransfers To a	nd Transac	tions and Relation	onships With Nonch	aritabl	е	
	_	anization directly or in	directly eng		-				Yes	No
	ection 5 anizatio	601(c) of the Code (oth	ier than sec	tion 501(c)(3) org	janizations) or ii	section 527, relating	to political			
_		rom the reporting foun	dation to a	noncharitable exe	empt organization	n of				
	Cash							1a(1)		X
(2)	Other a	ssets						1a(2)		X
		actions								7.7
		of assets to a nonchard		-	ation			1b(1)		<u> </u>
		ses of assets from a n of facilities, equipment		. •	ation			1b(2) 1b(3)		X
		rsement arrangement	•					1b(4)		X
(5)	Loans o	or loan guarantees						1b(5)		X
		nance of services or m	•	•				1b(6)		X
	-	facilities, equipment, n	•				the - the feet and - t	1c		X
					_		rays show the fair market ceived less than fair marke			
					-		assets, or services receive			
(a) Line		(b) Amount involved		e of noncharitable exem			of transfers, transactions, and share		ents	
N/A										
							 			
							······································			
•										
							 			
										
										
des	cribed i 'es," co	dation directly or indire in section 501(c) of the implete the following s	Code (oth	er than section 50	11(c)(3)) or in se			Y	es X	No No
N/A		a) Name of organization		(b) Type of c	organization		(c) Description of relationship			
								•		
					= - :					
	l Inder no	malties of perium. I declare	hat I have eva	mined this return uncli	idina accompanying	echedules and statements	s, and to the best of my knowledge	and belief	it is to	
	correct, a	and complete Declaration of				in of which preparer has an	y knowledge May the IRS	discuss this parer shown l	return	No No
	Ť	ype preparer's name		- -	1	<u> </u>	1	<u> </u>	I	
Paid Preparer		N WRIGHT			Preparer's signati	Dullia	ht \$	412	Check self-en	if nployed
Use Only		name ► COLE	& REE	D, P.C.	, <u> </u>	<u> </u>	PTIN P	0011	245	0
-			COUCH				Firm's EIN ▶ 7.	3-131	242	22
		OKLAI	HOMA C	ITY, OK	73102-2	251	Phone no 40	05-23 Form 99		

Form 990-PF	-	apital Gains and Losse		estment l	ncome	2011
	For calen	dar year 2011, or tax year beginning	1	, and ending		<u></u>
Name					Employer Ide	ntification Number
WEGENER FO	OUNDATI	ON. INC.			73-6095	407
		pe the kind(s) of property sold, e.g., real estate, arehouse, or common stock, 200 shs. MLC Co	1	b) How acquired	(C) Date acquired (mo , day, yr)	(d) Date sold
·	2-story brick wa	arehouse, or common stock, 200 shs MLC Co		P-Purchase D-Donation	(mo , day, yr)	(mo , day, yr)
1) ALL STAT				<u>P</u>	03/03/06	06/23/11
2) FORTUNE	BRANDS			<u>P</u>	06/22/10	10/24/11
3) MARRIOTT			M	P P	06/22/10	12/08/11
4) FEDERAL 5) FEDERAL		OAN MTG CORP 6.5% OAN BKS DEB 5.00%		P	09/12/00	09/15/11 05/13/11
5) FEDERAL 6) FED NATI		SSN 6.5%		P	12/23/97	02/25/11
		GAGE ASSN 6.0%		P	04/20/99	12/15/11
8) HERITAGE					· · · · · · · · · · · · · · · · · · ·	
9)						
10)						
11)						
12)				_		
13)					_	
<u>14)</u> 15)						
13)					<u> </u>	L
(e) Gross sales	price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense of	basis sale	(h) Gain (e) plus (f	or (loss)) minus (g)
	,062			,356	-	10,294
2) 5	, 311		3	3,339		1,972
3)	807			917		-110
4)	49			48	ļ	1
•	,000		50	,000		
6)	66 , 934	· · · · · · · · · · · · · · · · · · ·	-	66 3,934		
7) <u>3</u> 8)	, <u>934</u> 467			, 934		467
9)	307					
(10)				***************************************		
11)	·					
12)						
13)						
14)	<u> </u>					
(15)					<u>i</u>	
Complete only for	r assets show	ring gain in column (h) and owned by		/69		
(i) FMV as of 12		(j) Adjusted basis as of 12/31/69	(k) Excess of cover col (j), if		(I) Gains (Co col (k), but not le Losses (fror	ol (h) gain minus ss than -0-) Or n col (h))
(1)					_	10,294
2)						1,972
(3)						-110
4)						1
(5)					 	·
(6) (7)						
(7)						467
(8) (9)		<u> </u>				
(10)					 	
(11)					<u> </u>	
(12)						
(13)						
14)						
(15)		1	1			

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		Adjusted Net Income		Charitable Purpose \$ 1,785		Charitable Purpose \$ 875		Charitable Purpose \$\frac{2,723}{2,723}\$	41
	r Income	Net Investment	al Fees	Adjusted Net	Inting Fees	Adjusted Net	fessional Fees	Adjusted Net	
Federal Statements	Statement 1 - Form 990-PF, Part I, Line 11 - Other Income	Revenue per Books \$ 392,572 369 \$ 392,941	. Part I, Line 16a - Legal Fees	Net Investment \$ 5,355 \$ 5,355	- Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment \$ 2,625 \$ 2,625	orm 990-PF, Part I, Line 16c - Other Professional Fees	Net Investment \$ 8,168 \$ 8,168	
Federal 9	ment 1 - Form 990-PF		Statement 2 - Form 990-PF,	Total		Total	ᄖ	Total \$ 10,891	
73-6095407	Stater	Description OIL & GAS ROYALTIES CLASS ACTION SETTLEMENT TOTAL	State	Description LEGAL FEES TOTAL	Statement 3	Description INDIRECT ACCOUNTING FEES TOTAL	Statement 4	Description ADMINISTRATION FEES TOTAL	

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73-6095407		Federal Statements	atements			
	Statemen	Statement 5 - Form 990-PF, Part I, Line 18 - Taxes	F, Part I, Line 18	- Taxes		
Description		Total	Net Investment	Adjusted Net	pa:	Chantable Purpose
GROSS PRODUCTION TAX TAXES - FED EXCISE ESTIMATES TAXES - OTHER TOTAL		24,146 2,100 35 26,281	\$ 24,146	_w _w	'	
	Statement 6 -	- Form 990-PF, P	Part I, Line 19 - D	- Depreciation		
Description Cost	Prior Year		<u>.</u>	Current Year	Net Investment	Ad
Acquired basis D FURNITURE & FIXTURE 26,621 \$ 7/01/93 \$ 26,621 \$ TOTAL \$	26, 621 26, 621	S/L	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		ש ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה	
15	Statement 7 - F	Form 990-PF, Part I, Line 23 - Other Expenses	rt I, Line 23 - Otl	ner Expenses		
Description		Total	Net Investment	Adjusted Net	pa	Chantable Purpose
EXPENSES OFFICE EXPENSE POSTAGE AND DELIVERY MEALS TRAVEL INSURANCE TOTAL		746 70 160 984 356 2,316	\$ 746 70 160 984 356 \$ \$ 2,316	w w	O O	
		1				2-2

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73-6095407	Federal Statements	ments		
Statement 8 - Form 9	ר 990-PF, Part II, Line 10a - US and State Government Investments	JS and State Govern	ıment Investmen	श
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
6.50% FED HOME LN MTG 9/1/2015 4.95% FED FARM CR BKS 12/27/2016 4.625% FED HOME LN BK 8/15/2012 6.000% GNMA 4/15/2014 6.500% FED NATL MTG 2/1/2011 5.000% FED HOME LN BK 5/13/2011	\$ 105 74,232 51,101 9,481 66 50.031	\$ 74,381 50,044 5,547	COST COST COST COST COST	\$ 88,572 51,351 6,063
TOTAL	\$ 185,016	\$ 130,028		\$ 146,046
Statement 9 - Fc	Form 990-PF, Part II, Line 10b - Corporate Stock Investments	3b - Corporate Stock	k Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
ABBOTT LABS COM AETNA ATT CHANGE CODD	\$ 14,844	\$ 14,843	COST	\$ 17,206 20,293
ALLOIAIE CORF	18 347	18 347	COST	20 283

Description	Bec	Beginning of Year	_	End of Year	Basis of Valuation	Fa	Fair Market Value
ABBOTT LABS COM AETNA	σ	14,844	w	14,843	COST	က	17,206 20,293
ALLSTATE CORP AMERICAN EXPRESS CO.		7,35 8,34 5,34		8,34	COST		0,28
ANALOG DEVICES INC COM CATERPILLAR INC DEL COM		7,50 6,94		17,508 16,944	COST		20,860 25,459
COCA COLA CO COM		4,17		4,17	COST		8,75
CONOCO PHILLIPS		1,06		7,06	COST		2,59
DANAHER CORP		4,17		4,17	COST		8,22
DELL INC.		0,15		0,15	COST		8,82
DEVON ENERGY CORPORATION		9,67		9,67	COST		8,97
EMC CORP MASS		7,88		7,88	COST		0,01
EBAY INC.		5,79		5,79	COST		1,89
EXXON MOBIL CORP		0,27		0,27	COST		2,20
FISERV INC.		7,99		7,99	COST		1,85
FLEXTRONICS INTL LTD		6,78		6,78	COST		4,74
FORTUNE BRANDS INC.		4,66			COST		
FRANKLIN RES INC COM		0,69		0,69	COST		7,48
GENERAL ELECTRIC		1,75		1,75	COST		1,59
GILEAD SCEINCES INC.		4,96		4,96	COST		7,60
GOLDMAN SACHS GROUP		2,81		2,81	COST		0,94
HEINZ H J CO COM		4,35		4,35	COST		7,02
HOME DEPOT INC COM		4,75		4,75	COST		0,13
ILLINOIS TOOL WKS INC.		9,20		19,206	COST		19,805
INTEL CORP		6, 13		6, 13	COST		9,61

Statement 9 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

Fair Market Value	\$ 17,721 25,375 40,842 50,700 18,045 13,863 13,158 13,205 19,400 19,400 104,908 174,677 24,246	2,35 2,31 2,35 2,35
Basis of Valuation	00000000000000000000000000000000000000	COST
End of Year	17,546 17,978 39,898 39,898 10,049 10,049 17,196 17,411 17,411 17,411 12,975 16,983 102,975 11,260 17,617 102,731 158,802	2,81
Beginning of Year	\$ 17,978 13,719 10,049 16,112 6,202 14,505 17,411 17,975 17,706 8,110 26,414 8,505 12,975 16,983 21,260 17,617 21,383 102,731 158,802	13,946 16,231 \$ 1,026,603
Description	INTERCONTINENTAL EXCHANGE INC COM INTERNATIONAL BUSINESS MACHS COM ISHS US TSY INFL PRT ISHARES BARCLAYS 1-3 YR TREASURY IND JOHNSON & JOHNSON KRAFT FOODS MARRIOTT INTL INC NEW CL A MCDONALDS CORP MEDCO HEALTH SOULUTIONS INC. COM MICROSOFT CORP MORGAN STANLEY COM NEXTERA ENERGY INC PHILIP MORRIS INTL INC. PLUM CREEK TIMBER CO. PROCTER & GAMBLE ST JUDE MED INC. SCHLUMBERGER LTD COM STATE STR CORP US BANCORP DEL UNITED PARCEL SRV INC VANGUARD EUROPE PACIFIC ETF VANGUARD WORLD FDS TELCOMM ETF	WALMART STORES INC COM NABORS INDUSTRIES LTD SHS BEAM INC COM TOTAL

73-6095407	Federal Statements	ments		
Statement 10 - Form	າ 990-PF, Part II, Line 10c - Corporate Bond Investments	0c - Corporate Bond	Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
Y FIN CC/15/201	\$ 51,173 52,474 50,000	\$ 51,173 52,474 50,000	COST COST COST	\$ 55,387 51,514 51,032
	\$ 205,780	\$ 205,780	COST	\$ 211,300
Statement 11	- Form 990-PF, Part II,	Line 13 - Other Investments	tments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
, F	\$ 50,000		COST	\$ 48,719
AN SACHS IR SIRG INCM FUND SMALL CAP EQ	25,000	25,000	COST	24,318
MODITY BD INC	50,000	50,000	COST	50,134
VANGUARD FIXED INCOME VANGUARD SMALL CAP INDEX FUND MINERAL RIGHTS	30,000 106,278 26,469	20,000 106,278 26,469	COST	148,427 335,594
TOTAL	\$ 357,747	\$ 392,747		\$ 711,820
Statement 12 - Form	Statement 12 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment	4 - Land, Building, ar	d Equipment	
Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
FURNITURE AND FIXTURES LEASEHOLD IMPROVEMENTS	\$ 32,738	\$ 32,738	v.	w.
ACCUMULATED DEPRECIATION TOTAL	\$ 35,679	\$ 35,679	35,679 \$ 35,679	0
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Federal Statements

Statement 13 - Form 990-PF, Part II, Line 15 - Other Assets

Description	_	Beginning of Year	 End of Year	 Fair Market Value
ORGANIZATION COST	\$	204	\$ 204	\$ 204
TOTAL	\$	204	\$ 204	\$ 204

73-6095407	Federal Statements
` <u>Form 9</u>	90-PF, Part XV, Line 2b - Application Format and Required Contents
	Description
A LETTER STATIN	IG AMOUNT AND PURPOSE OF GRANT DESIRED
	Form 990-PF, Part XV, Line 2c - Submission Deadlines
	Description
OCTOBER 31	
<u>Fo</u>	orm 990-PF, Part XV, Line 2d - Award Restrictions or Limitations
	Description
NONE	

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Federal Statements

Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name		Address		I	
Address	Relationship	Status	Sn:	Purpose	Amount
HANGE	P.O.	BOX 18335			
OKLAHOMA CITY OK 73154 AMERICAN RED CROSS	NONE 601 NE	PUBLIC 6TH	CHARI	ASSISTANCE	1,000
		į	CHARI	ASSISTANCE	1,000
BETHEL FOUNDATION	P.O. BONF	BOX 18335	CHART	A S S T S T S A S A S A S A S A S A S A	000.5
CLUB	P.0.	BOX 18701			
			CHARI	ASSISTANCE	2,000
PANTRY	P.0.	BOX 18335	1 0 1	D N K HO HOOK	600
CALM WATERS CENTER	3525 NW	FUBLIC W 56TH	CHARL	ASSISIANCE	
	NONE	PUBLIC	CHARI	ASSISTANCE	2,000
CARING PROGRAM	1215 S	BOUI			
TULSA OK 73122			CHARI	ASSISTANCE	1,000
CENTRAL OK COMMUNITY	P.O. BONF	BOX 18335	CHART	ASSISTANCE	000.2
010/10	1432 W	BRIT			
OKLAHOMA CITY OK 73114		PUBLIC	CHARI	ASSISTANCE	3,000
CITY CARE	P.O.	BOX 18335			
OKLAHOMA CITY OK 73154			CHARI	ASSISTANCE	5,000
	P.0.	BOX 18335			c c
			CHARI	SOCIAL WELFARE	2,000
CENTERS	MN 0078	4 & 7.	£ 5.	1 () () () () () () () () () (000
OKLAHOMA CITY OK /3112	NONE.	PUBLIC N 11TAH	CHAKI	ASSISTANCE	3,000
DALE ROGERS IRRINING	4	OLAH STIGITE	T 0 7 7 7	IANOTEROHOR	000
	ь.о.	EUBLIC BOX 54877	CHARL	EDOCAL LONGE	
rursa ok			CHARI	ASSISTANCE	2,000
OK	427 NW	12TF	i		(((((((((((((((((((
	(CHARI	ASSISTANCE	10,000
)L @====================================	ъ. О.	BOX 18335	£ 5	10 N 6 E C + C C 6	ď
OKLAHOMA CITY OK /3154	NONE:	PUBLIC ROX 18335	CHARI	ASSISTANCE	7,000
MARVESI KAIN OKLAHOMA CITY OK 73154			CHARI	ASSISTANCE	8,000
	P.O.	BOX 18335			
OKLAHOMA CITY OK 73154		PUBLIC 1833E	CHARI	ASSISTANCE	1,000
HEAKIS FOR HEAKING OKLAHOMA CITY OK 73154	NONE P.O. BY	BUA 18333 PUBLIC	CHARI	ASSISTANCE	1,000

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n 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	Year (continued)
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Name		Address			
Address	Relationship	Status	Ь	Purpose	Amount
INFANT CRISIS SERVICE	1933 NW 3	39TH			
OKLAHO		PUBLIC CHARI	ASSISTANCE		1,000
KIPP REACH COLLEGE OKLAHOMA CITY OK 73154	P.O. BOX	BOX 18335 PUBLIC CHARI	ASSISTANCE		4.000
;	2915	N CLASSEN BLVD			
\circ		PUBLIC CHARI	SOCIAL WELFARE		2,000
	P.O.	BOX 18335			1
OKLAHOMA CITY OK 73154	NONE FOOS WESTERNI	PUBLIC CHARI	ASSISTANCE		10,000
\sim		PUBLIC CHARI	ASSISTANCE		3,000
MICAH FOUNDATION	P.O. BOX				
_		PUBLIC CHARI	ASSISTANCE		3,000
DEVELOPMI	P.O. BOX				
4	6	PUBLIC CHARI	ASSISTANCE		3,000
NEIGHBORHOOD SERVICES	P.O. BOX	18335 Diletto Cuabet	B C N K T O T O O K		000
ES CALL	P.O. BOX		ASSTSTANCE		
OKLAHOMA CITY OK 73154	;))	PUBLIC CHARI	ASSISTANCE		4,000
	1121 N PE				
OKLAHOMA CITY OK 73107	NONE	PUBLIC CHARI	ASSISTANCE		10,000
	P.O. BOX				•
OKLAHOMA CITY OK 73154		PUBLIC CHARI	ASSISTANCE		2,000
ы	2100 NE	52ND			
OKLAHOMA CITY OK 73111		_	EDUCATIONAL		2,000
	415 NW 5TH	STREET			
OKLAHOMA CITY OK 73102	!	PUBLIC CHARI	ASSISTANCE		2,000
	6 NE 63RD	STREET SUITE	15		
OKLAHOMA CITY OK 73105	0	PUBLIC CHARI	ASSISTANCE		2,000
PROCECT INANSFORMATION	NONE F.O. BUA	TOSSS PITET TENDT	はいまれているよ		000
ATD ATD	X C 4		ASSISIANCE		000 %
_	.0.	PUBLIC CHARI	ASSISTANCE		3,000
BANK	P.O. BOX	26306			•
OKLAHOMA CITY OK 73126		PUBLIC CHARI	ASSISTANCE		2,000
IY Grave Ov	P.O. BOX		E C C C C C C C C C C C C C C C C C C C		0
OKLAHUMA CIIY OK /3123	NONE	PUBLIC CHAKI	ASSISTANCE		000 %

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Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	a vi	
tatement 15 - Form 990-PF, Part XV, Line 3a -	Paid During the	
tatement 15 - Form 990-PF, Part XV, Line 3a -	Contributions	
tatement 15 - Form 990	3a - Grants and	ontinued)
tatement 15 - Form 990	V, Line	Vaar (c
tatement 15 - Form 990	, Part X	
تب	Form 990-PF	
	atement 15 -	

Name	Ado	Address	į		
Address	Relationship	Status		Purpose	Amount
SHALOM MINISTRIES OKLAHOMA CITY OK 73154	P.O. BOX 18335 NONE PUBL	3335 PUBLIC CHARI	ASSISTANCE		2,000
	P.O. BOX 18	35			
\circ		PUBLIC CHARI	ASSISTANCE		2,000
SHILOH SUMMER CAMP	P.O. BOX 18335	3335 PHRLTC CHART	ASSTSTANCE		000 6
	12201 N WES	WESTERN AVE			000
OKLAHOMA CITY OK 73114		PUBLIC CHARI	ASSISTANCE		3,000
SPECIAL OLYMPICS	3701 SE 151	ST			
OKLAHOMA CITY OK 73115		PUBLIC CHARI	ASSISTANCE		2,000
SUNBEAM FAMILY SERVICES	2662 SW 418				
OKLAHOMA CITY OK 73119		PUBLIC CHARI	ASSISTANCE		3,000
TARC	3800 N. CLA	CLASSEN BLVD #C30	0.0		
OKLAHOMA CITY OK 73118		PUBLIC CHARI ASSISTANCE	ASSISTANCE		2,000
TEEM	P.O. BOX 18				
OKLAHOMA CITY OK 73154		PUBLIC CHARI	ASSISTANCE		2,000
THE CHILDREN'S CENTER	6800 NORTHWE	NORTHWEST EXPRESSWAY	1Y		
BETHANY OK 73008	NONE	PUBLIC CHARI ASSISTANCE	ASSISTANCE		3,000
THE FIRST TEE	P.O. BOX 2381				
OKLAHOMA CITY OK 73101	NONE	PUBLIC CHARI	ASSISTANCE		2,000
THE LITTLE LIGHT HOUSE	P.O. BOX 18335	35			
OKLAHOMA CITY OK 73154		PUBLIC CHARI	ASSISTANCE		10,000
TULSA BOYS HOME	2727 S 137TH WEST	WEST AVE.			
SAND SPRINGS OK 74063	,	PUBLIC CHARI	ASSISTANCE		1,000
	P.O. BOX 18				1
OKLAHOMA CITY OK 73154		PUBLIC CHARI	ASSISTANCE		2,000
	P.O. BOX 18				
	;	PUBLIC CHARI	ASSISTANCE		1,000
PRE	P.O. BOX 18				
OKLAHOMA CITY OK 73154	,	PUBLIC CHARI	ASSISTANCE		10,000
YWCA	P.O. BOX 18				4
OKLAHOMA CITY OK 73154	NONE	PUBLIC CHARI	ASSISTANCE		2,000

		Amount	191,000
nents	Statement 15 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	Purpose	
Federal Statements	t XV, Line 3a - Grai <u>Year (continue</u>	Address Status	
<u>u</u>	5 - Form 990-PF, Par	Relationship	
	Statement 15	Name	
73-6095407			TOTAL

1 1 1 2

73-6095407	Federal S	Federal Statements	S		
Statement 14 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,	990-PF, Part VIII, Li	ine 1 - List of	Officers, Directors	, Trustees,	
	-1	<u>ן</u>			
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
MARK WEGENER 115 S. MELROSE STILLWATER OK 74074	TRUSTEE	1.00	2,000	0	0
LEE HOLMES 3409 HICKORY STICK ROAD OKLAHOMA CITY OK 73120	PRESIDENT	1.00	2,000	0	0
E.C. WEGENER PO BOX 177 MINCO OK 73059	TRUSTEE	1.00	2,000	0	0
RODNEY WEGENER 743 CR 1150 MINCO OK 73059	TRUSTEE	1.00	2,000	0	0
ROSEMARY FIELDS 10095 S. SHERIDAN #1026 TULSA OK 74133-6254	TRUSTEE	1.00	5,000	0	0
JEFF WEGENER 3213 BROOKHOLLOW ROAD OKLAHOMA CITY OK 73120	VP/TREASURER	1.00	2,000	0	0
					14

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efile

Form 8868

Application for Extension of Time To File an Exempt Organization Return

(Rev January 20	12)		.6. 0.9				01115 110 15-17-17-17		
Department of the Internal Revenue		▶ File :	a separate	application for each return.					
		utomatic 3-Month Extension, comp	olete only F	Part I and check this box			▶ X		
			-	, complete only Part II (on page 2 of	this form)	, =		
	-			tic 3-month extension on a previously					
				•					
Electronic fi	ling (e-file). Y	ou can electronically file Form 8868 i	f you need a	a 3-month automatic extension of time	to file (6	months	for		
a corporation	required to file	e Form 990-T), or an additional (not a	automatic) 3	-month extension of time. You can ele	ectronica	lly file Fo	orm		
•				or Part II with the exception of Form 88	-				
				hich must be sent to the IRS in paper	-				
				irs gov/efile and click on e-file for Cha		lonprofit	<u>s</u>		
Part I				ubmit original (no copies need					
	required to fil	e Form 990-1 and requesting an auto	omatic 6-mo	onth extension-check this box and con	plete		. □		
Part I only	arationa (mali	dina 1120 C Flora) northern DE	MAICS and A						
to file income	•	ding 1120-C filers), partnerships, RE	iviics, and t	rusts must use Form 7004 to request	an exten	Sion of t	ime		
to the income	tax returns			Enter filers	dontificin	a numb	per, see instructions		
Type or	Name of ex	empt organization or other filer, see i	nstructions	Litter mer s			fication number (EIN) or		
print	Name or ex	empt organization or other mer, see v	i i sti datori s		Cilipio	yer identi	ilication number (Env) of		
File by the	WEGENE	ER FOUNDATION, INC.	•		X 73	-609	5407		
due date for		eet, and room or suite no If a P O b		ructions			number (SSN)		
filing your return. See	eturn See P.O. BOX 18335								
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions								
	OKLAHO	OMA CITY OK	73154	-0335					
Enter the Ref	turn code for tl	ne return that this application is for (fi	le a separat	e application for each return)			04		
				· · · · · · · · · · · · · · · · · · ·					
Applicatio	n		Return	Application			Return		
Is For Form 990			Code 01	Is For Form 990-T (corporation)			<u>Code</u> 07		
Form 990-8		• •	02	Form 1041-A			08		
Form 990-I			01	Form 4720			09		
Form 990-I			04	Form 5227			10		
		or 408(a) trust)	05	Form 6069			11		
	T (trust other ti		06	Form 8870			12		
		COLE & REED, P.C.		-					
		531 COUCH DRIVE, ST	200						
 The books 	are in the care of	of ▶OKLAHOMA CITY				0	K 73102		
•		5-239-7961	FAX No	•			. 🗀		
		not have an office or place of busine					▶ ⊔		
		turn, enter the organization's four dig		· · · · · · · · · · · · · · · · · · ·	this is				
	group, check	this box If it is for part o INs of all members the extension is for	_	check this box	cn				
		c 3-month (6 months for a corporation		o file Form 990-T) extension of time					
				organization named above. The exten	sion is				
	organization's								
	calendar year								
_	-								
▶ 🗌	tax year begii	nning , and ending		_					
2 If the ta	ax year entered	d in line 1 is for less than 12 months,	check reaso	on Initial return Final return					
	Change in acco	unting period							
		or Form 990-BL, 990-PF, 990-T, 4720), or 6069, e	enter the tentative tax, less any		-			
		See instructions			3a	\$	0		
		or Form 990-PF, 990-T, 4720, or 6069	_				_		
		nts made Include any prior year over			3b	\$	3		
C Haland	e due Suntra	ct line 3h from line 3a. Include vour r	aumont with	n this torm it required by using					

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 For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

EFTPS (Electronic Federal Tax Payment System) See instructions