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Department of the Treasury

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rep

OMB No 1545-0052 2011

Internal Revenue Service 140te. The loan dation the	y be able to ase a copy of the			
For calendar year 2011 or tax year beginning	07/	01 , 2011 , and endin	g	06/30 ,20 12
Name of foundation			A Employeridentific	
THE OLIVER DEWEY MAYOR FOUNDAT	TION 477006019		75-	1864630
Number and street (or P O box number if mail is not del	vered to street address)	Room/suit	e B Telephone numbe	r (see instructions)
P.O. BOX 1620			(91	8) 619-1527
City or town, state, and ZIP code			C If exemption applicat pending, check here	ion is
TULSA, OK 74101-1620			pending, eneck nere	
G Check all that apply: Initial return	Initial return of	of a former public charit	Y D 1 Foreign organizati	ons, check here
Final return	Amended retu		2 Foreign organizati 85% test, check he	ons meeting the
Address change H Check type of organization: X Section 50			computation •	▶ □
<u> </u>	Other taxable pri		E If private foundation	
Section 4947(a)(1) nonexempt charitable trust Fair market value of all assets at end J Acc	counting method: X Ca			(1)(A), check here .
C	Other (specify)	ISH Accidal	·	n a 60-month termination
	· I, column (d) must be on		- Under Section 507(b)	(1),O), check here .
Part I Analysis of Revenue and Expenses (T)		- Jasio.,		(d) Disbursements
total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check attach Sch B	L i			
3 Interest on savings and temporary cash investments	1			
4 Dividends and interest from securities	147 000	147,082.		STMT 1
5a Gross rents			-	
b Net rental income or (loss)	7.			
Co. Not (lase) from colo of constanct on line 10				
b Gross sales price for all 2, 146, 376				
b Gross sales price for all 2, 146, 376 7 Capital gain net income (from Part IV, line 2)		150,123.	·	
8 Net short-term capital gain				
9 Income modifications	•			
10 a Gross sales less returns and allowances · · · ·				
b Less Cost of goods sold .			_	
c Gross profit or (loss) (attach schedule)		6 000		OFF. 47
11 Other income (attach schedule)	001 1001	-6,078.	•	STMT 2
12 Total. Add lines 1 through 11	100 200	291,127.		44 000
13 Compensation of officers, directors, trustees, etc	•	132,270. NONE	NONE	44,090
14 Other employee salaries and wages	•	NONE	NONE NONE	
15 Pension plans, employee benefits 16a Legal fees (attach schedule) STMT 3	100.	100.	NONE	
15 Pension plans, employee benefits		NONE	NONE	
	•	140111	NOIVE	0,000
c Other professional fees (aπach schedule)				
17 Interest	5,295.	2,373.		2,922
18 Taxes (attach schedule) (see instructions)		2,3,3,	<u>.</u>	2,522
19 Depreciation (attach schedule) and depletion				
21 Travel, conferences, and meetings . 2012.		NONE	NONE	
22 Printing and publications O	القائد	NONE	NONE	
23 Other expenses (attach schedule) STMT 6	220,641.	32,644.		
24 Total operating and administrative expense				
Travel, conferences, and meetings of the expenses (attach schedule). Total operating and administrative expense Add lines 13 through 23. Contributions, gifts, grants paid.	410,914.	167,387.	NONE	53,112
25 Contributions, gifts, grants paid	450 105			652,185
ac Add lines 24 and 2	3 062 000	167,387.	NONE	
27 Subtract line 26 from line 12:				
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements . b Net investment income (if negative, enter -0 c Adjusted net income (if negative, enter -0-).	-771,972.			
b Net investment income (if negative, enter -0		123,740.		
c Adjusted net income (if negative, enter -0-).				

Form **990-PF** (2011)

Form 990-PF			Attached schedules and amounts in the	Beginning of year	-1004030 End	of year
Pa	art II	Balance Sheets	description column should be for end-of-year amounts only (See instructions)		(b) Book Value	(c) Fair Market Value
Ţ	1	Cash - non-interest-beari	ng	180,985.	202,904	
1	2	Savings and temporary	cash investments			
ļ						
i			otful accounts			
١	4					
		Less allowance for doub	otful accounts >			
	5	Grants receivable				
-	6	Receivables due from	officers, directors, trustees, and other			
-		disqualified persons (atta	ach schedule) (see instructions)			
	7		eceivable (attach schedule)	_	_	
			otful accounts >NONE			
	8		se			
Assets	9		eferred charges			
Ass	10 a	Investments - U S and state	government obligations (attack schedule)			
-			stock (attach schedule) . STMT .8	1,759,720.	1,795,172	
l	С	Investments - corporate	bonds (attach schedule). STMT .9 .	4,909,402.	4,476,881	. 4,879,148
	11	Investments - land, building and equipment basis	s, ▶ 2,615,285.			
		Less accumulated deprecia (attach schedule)		2,615,285.	2,615,285	. 7,570,000
	12		loans	21,188.	NON	
	13	Investments - other (atta	ch schedule) STMT 10 [353,750.	368,750	· · · · · · · · · · · · · · · · · · ·
	14	Land, buildings, and equipment basis	► 53,484. 39,469.	İ		STMT 11
		Less accumulated deprecia (attach schedule)	tion ► 39,469.	16,533.	14,015	. 14,015
	15	Other assets (describe	▶)		· · · · · · · · · · · · · · · · · · ·	
	16	Total assets (to be	completed by all filers - see the			
		instructions Also, see p	age 1, item l)	9,856,863.	9,473,007	. 14,915,904
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable				
န	19	Deferred revenue				
Liabilities	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
ab.	21	Mortgages and other no	tes payable (attach schedule)			
≔	22	Other liabilities (describ-	e ▶)		·-···	
	23	Total liabilities (add line	es 17 through 22)			1
		Foundations that fol	low SFAS 117, check here ▶ X			
		and complete lines 2	24 through 26 and lines 30 and 31.			
es	24	Unrestricted		9,856,863.	9,473,007	<u>.</u>
anc	25					
Sali	26					
or Fund Balances			not follow SFAS 117,			
Ē			plete lines 27 through 31. ▶ 🔃			1
ō	27	Capital stock, trust princ	cipal, or current funds			_
		Paid-in or capital surplus, o	r land, bidg , and equipment fund			
Net Assets	29	Retained earnings, accumu	lated income, endowment, or other funds			_
4	30		d balances (see instructions)	9,856,863.	9,473,007	<u>.</u>
ž	31	Total liabilities and	net assets/fund balances (see			
_			<u> </u>	9,856,863.	9,473,007	
			anges in Net Assets or Fund			
1			palances at beginning of year - Part			
			I on prior year's return)		l l	9,856,863.
2	Ente	r amount from Part I,	line 27a		2	-771,972.
3	Othe	er increases not includ	3	388,116.		
4		lines 1, 2, and 3			4	9,473,007.
5		reases not included in			5	
6	Tota	I net assets or fund ba	lances at end of year (line 4 minus li	ne <u>5) - Part II, column (b)</u>	, line 30 6	9,473,007.

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment Income	T 16.1		
	• •	describe the kind(s) of property sold (ick warehouse, or common stock, 200	9.	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	PUBLICLY TRADED	SECURITIES				
_ <u>b</u>		<u> </u>		<u> </u>		
_ <u>c</u>						
<u>_d</u>						
<u>e</u>		(f) Depreciation allowed	(g) Cost or other basis	<u> </u>	l	<u> </u>
	(e) Gross sales price	(h) Gain or (loss) (e) plus (f) minus (g)				
<u>_a</u>	2,071,235.		1,996,253.			74,982.
_ <u>b</u>				-		
_ <u>c</u>				-		
<u>_d</u>						
_ <u>e</u>				· · · · · · · · · · · · · · · · · · ·		
	Complete only for assets s	howing gain in column (h) and owned (j) Adjusted basis	(k) Excess of col. (i)		Gains (Col (h) ga	
	(i) FMV as of 12/31/69	COI	(k), but not less to Losses (from co			
		as of 12/31/69	over col (j), if any			74,982.
_ <u>a</u>				 		74,302.
_ <u>b</u>						
_ <u>c</u>						
_ <u>d</u>						
_ <u>e</u>		(If	gain, also enter in Part I, line 7			
2	Capital gain net income or	(net capital loss)	(loss), enter -0- in Part I, line 7	2		150,123.
3	Net short-term capital gain	or (loss) as defined in sections 12	,			130,123.
			tructions). If (loss), enter -0- in	[[
	_		1	3		
			uced Tax on Net Investment I	ncome		
Wa		the section 4942 tax on the distril	outable amount of any year in the b	ase perio	d ⁷	Yes X No
_		not qualify under section 4940(e).				
_1		ount in each column for each year;	see the instructions before making	any entr	ies. (d)	
_ <u>c</u>	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2010	871,306.	10,555,136.		-,	0.082548
	2009	1,016,324.	10,910,278.			0.093153
	2008	1,147,221.		<u> </u>		0.060619
	2007	1,564,765.		\		0.061017
_	2006	1,491,330.	25,846,185.	<u> </u>		0.057700
_	Total of time 1 column /d)			2		0 255027
2	Average distribution ratio	for the 5-year base period - divide	the total on line 2 by E. or by the	-		0.355037
3	_			3		0 071007
	number of years the found	ation has been in existence in less	s than 5 years	-		0.071007
4	Enter the net value of non	charitable-use assets for 2011 fro	m Part X, line 5	4	14	4,639,304.
5	Multiply line 4 by line 3			5		L,039,493.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6	····	1,237.
7	Add lines 5 and 6			7		1,040,730.
8	Enter qualifying distributed If line 8 is equal to or graph Part VI instructions.	ons from Part XII, line 4 eater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% tax	705,297. x rate See the

• By state legislation that effectively amends the governing instrument so that no mandatory directions that

conflict with the state law remain in the governing instrument?

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

Form 990-PF (2011)

Χ

8b

10

Х

Χ

Χ

10

Enter the states to which the foundation reports or with which it is registered (see instructions)

By language in the governing instrument, or

orm	990-PF (20	75-1864630		!	Page 5
Par	VII-A	Statements Regarding Activities (continued)			
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning	of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the	foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
		ad advisory privileges? If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the f	oundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
		address ► N/A			
14		s are in care of ▶ BANK OF TEXAS, N.A. Telephone no ▶ _(918)619-1			
		\triangleright PO BOX 1620, TULSA, OK ZIP + 4 \triangleright 74101-	1620		
15		947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	· 🗀
		the amount of tax-exempt interest received or accrued during the year			
16		time during calendar year 2011, did the foundation have an interest in or a signature or other authority	1	Yes	No
		nk, securities, or other financial account in a foreign country?	16	1	X
		instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of			
<u> </u>		n country	Ь		
rar		Statements Regarding Activities for Which Form 4720 May Be Required		Yes	81.
_		m 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	No
la	_	ge in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	-	g- m			
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	•	ish goods, services, or facilities to (or accept them from) a disqualified person?			
		compensation to, or pay or reimburse the expenses of, a disqualified person?			
		sfer any income or assets to a disqualified person (or make any of either available for			
		penefit or use of a disqualified person)?			
		e to pay money or property to a government official? (Exception. Check "No" if the			
		dation agreed to make a grant to or to employ the official for a period after			
		enation of government service, if terminating within 90 days)			
h		nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	-	3.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16		Х
		tions relying on a current notice regarding disaster assistance check here			
c	- 3	foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
-		corrected before the first day of the tax year beginning in 2011?	1c		Х
2	Taxes o	n failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating	foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
а		id of tax year 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part	XIII) for tax year(s) beginning before 2011?			
	If "Yes,"	ist the years			
t	Are the	re any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating	to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1		
	all years	listed, answer "No" and attach statement - see instructions)	2b		ļ
c	If the pro	visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶			-	ļ ,
3 a	Did the f	oundation hold more than a 2% direct or indirect interest in any business enterprise	1)
		ne during the year?			
ŧ		did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	dısqualıf	ed persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of]
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
		on had excess business holdings in 2011)	3b		ļ.,.
4 -	Did the f	oundation invest during the year any amount in a manner that would reopardize its charitable nurposes?	4a	1	ΙX

b 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? -

► NONE

Total number of other employees paid over \$50,000

Page	7

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	/ees,
3 Five h	ghest-paid independent contractors for professional services (see instructions). If none, enter "NONE	. "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
Total numb	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
List the foun	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE		
10000		
2		
3		
3		
4		<u> </u>
7		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1NONE		
-12252-		
2		
All other pro	gram-related investments. See instructions	
3NONE		
<u>-47747</u>		
Total Add I	nes 1 through 3	
· · · · · · · · · · · · · · · · · · ·	moo i unough o i i i i i i i i i i i i i i i i i i	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee instructions.)	ign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	. 1a	7,145,456.
ь	Average of monthly cash balances		141,513.
С	= 1	1c	7,575,269.
d	Total (add lines 1a, b, and c)		14,862,238.
е	man and the state of the state		
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d		14,862,238.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	222,934.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,639,304.
6	Minimum investment return. Enter 5% of line 5	. 6	731,965.
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this		
1	Minimum investment return from Part X, line 6	. 1	731,965.
2a	Tax on investment income for 2011 from Part VI, line 5	5.	
b			
c		2c	2,475.
3	Distributable amount before adjustments. Subtract line 2c from line 1		729,490.
4	Recoveries of amounts treated as qualifying distributions	. 4	NONE
5	Add lines 3 and 4		729,490.
6	Deduction from distributable amount (see instructions)	. 6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	. 7	729,490.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
a	• • • • • • • • • • • • • • • • • • • •		705,297.
b		. 1b	
2	purposes	. 2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a		. 3a	NONE
b	b Cash distribution test (attach the required schedule)	. 3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		705,297.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	i 1	1-
	Enter 1% of Part I, line 27b (see instructions)		N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		705,297.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when a qualifies for the section 4940(e) reduction of tax in those years.	alculating w	hether the foundation

	1990-PF (2011)	·····			Tage 5
Pai	t XIII Undistributed Income (see instru	ctions)		.	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011 729,490.
	line 7				125,450.
2	Undistributed income, if any, as of the end of 2011			NONE	
а	Enter amount for 2010 only		NONE	NONE	
b	Total for prior years 20_09_, 20, 20		NONE		
3	Excess distributions carryover, if any, to 2011:				
а	From 2006				
b	From 2007				
C	From 2008				
d	From 2009				
	From 2010	1 207 040			1
f	Total of lines 3a through e	1,397,040.			<u></u>
4	Qualifying distributions for 2011 from Part XII,				
	line 4 [.] ▶ \$			NONE	
а	Applied to 2010, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
_	Treated as distributions out of corpus (Election				
C	required - see instructions)	NONE			
d	Applied to 2011 distributable amount				705,297.
	Remaining amount distributed out of corpus	NONE			
	Excess distributions carryover applied to 2011	24,193.			24,193.
_	(If an amount appears in column (d), the same				•
_	amount must be shown in column (a)) Enter the net total of each column as				
0	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,372,847.			
b	Prior years' undistributed income Subtract		27027		
	line 4b from line 2b		NONE	· · · · · · · · · · · · · · · · · · ·	
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has		170177		
	been previously assessed		NONE		· · · · · · · · · · · · · · · · · · ·
d	Subtract line 6c from line 6b. Taxable		11011		
	amount - see instructions		NONE		
е	Undistributed income for 2010 Subtract line 4a from line 2a. Taxable amount - see			MONT	
	instructions			NONE	
f	Undistributed income for 2011. Subtract lines				
	4d and 5 from line 1 This amount must be			1	
	distributed in 2012				ī
7	Amounts treated as distributions out of corpus				1
	to satisfy requirements imposed by section	NONTE			
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
8	Excess distributions carryover from 2006 not	202 124			
	applied on line 5 or line 7 (see instructions)	203,124.			<u> </u>
9	Excess distributions carryover to 2012.	1 160 722			
	Subtract lines 7 and 8 from line 6a	1,169,723.			
10	Analysis of line 9:				
a	Excess from 2007 149,069.				
b	Excess from 2008 200, 963	-			
C	Excess from 2009 472,418.	1			
d		1			
e	Excess from 2011	<u> </u>			Form 990 PE (2011)
					Form 990-PF (2011)

a The name, address, and telephone humber of the person to whom applications should be addressed.

SEE STATEMENT 15

b The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

JSA
1E1490 1000

AOJ036 9078 11/13/2012 13:10:22 477006019 20 -

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Durin	g the Year or Appro	oved for F	uture Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	contribution					
a Paid during the year								
1								
SEE STATEMENT 24								
		,						
	}	ł						
				}				
		1						
		1						
Total			▶ 3a	652,185.				
b Approved for future payment				, , , , , , , , , , , , , , , , , , , ,				
_ , ,pp, 0.000.00. ,c.t.c. pc,	1	}						
]						
Total			▶ 3b					
10:01								

Enter gross amounts unless otherwise indicated.		ated business income	 -	y section 512, 513, or 514	(e) Related or exempt
-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
1 Program service revenue	COOR	Amount	Exclusion code	Amount	(See instructions)
a			+	 	
a b			-	 	
c			-		
d	<u> </u>				
e					
f					
g Fees and contracts from government agencies	<u> </u>		+		
2 Membership dues and assessments	ļ		-		
3 Interest on savings and temporary cash investments			1.4	145 000	
4 Dividends and interest from securities	——	· · · · · · · · · · · · · · · · · · ·	14	147,082.	
5 Net rental income or (loss) from real estate.		· · · · · · · · · · · · · · · · · · ·	- -	<u> </u>	
a Debt-financed property			1.0	107 007	
b Not debt-financed property			16	-187,997.	
6 Net rental income or (loss) from personal property .		<u> </u>			
7 Other investment income	1		10	150 100	
8 Gain or (loss) from sales of assets other than inventor		-	18	150,123.	
9 Net income or (loss) from special events	1		+		
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue: a	<u> </u>		14	0 220	
BOKF PRIV EQUITY			14	-9,320.	
c MUTUAL FUND REBATE			14	3,242.	
d					
e	-			103,130.	
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)					103,130.
Line No. Explain below how each activi accomplishment of the foundation					
				_	
		· · · · · · · · · · · · · · · · · · ·			
				<u> </u>	
					
					<u> </u>
					
		NOT APPLICAB	PR.		
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			·		
JSA					Form 990-PF (2011)
JSA 1E1492 1 000					rom 330-PF (2011)

Part XV	11	Information R Exempt Organ		nsfers	To and	Transact	ions a	and R	elation	ships	With Non	chari	table)
in se	ectio	organization directl n 501(c) of the Co tions?	y or indirectly										Yes	No
		s from the reporting	foundation to	a nonch	arıtable e	xempt organ	nzation	of:						
(1) (Cash	l .										1a(1)		X
• •		r assets										1a(2)		X
		ansactions:	-bewitable ever	nt organ	uzation							1b(1)		Х
		s of assets to a non- hases of assets fror										1b(1)		X
		al of facilities, equip										1b(3)		X
		bursement arrange										1b(4)		X
		ns or loan guarantee										1b(5)		X_
		ormance of services										1b(6)		X
d If th	ne a	of facilities, equipm nswer to any of the the goods, other	e above is "Ye	s," com	plete the	following s	chedule	e. Colu	mn (b)	should	always show			
		any transaction or												
(a) Line no	-	(b) Amount involved	(c) Name of n	oncharitab	le exempt o	rganization	(b)	Descripti	on of trans	fers, tran	sactions, and sha	rıng arra	ngeme	nts
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	+													
		oundation directly ed in section 501(c)								pt orga	nizations		es 🔼	X No
<u>b f "Y</u>	Yes,"	complete the follow			(h) Tunn a	-f				(a) Doso	rintian of relation			
		(a) Name of organization	<u> </u>		(в) туре с	of organization				(c) Desc	ription of relation	isnip		
Sign	Unde	penalties of perjury, I decl	are that I have exam if preparer (other than	ined this re taxpayer) is t	turn, includir pased on all ir	ng accompanying of ormation of which	schedules n preparer	and state has any kr	ments, and	to the b	est of my knowled	ige and i	belief, it	ıs true
Here) ²	sems si			11/13/	/2012	VI	CE PI	RESIDE	ENT	May the IF with the p			return below
	Signa	ature of officer or trustee			Date		Title				(see instruction	· _	Yes [No
	BO		JSTEE	D	2505'0 -:==	ature		· · · · · · · · · · · · · · · · · · ·)ate			PTIN		
Paid		Print/Type preparer's	s name	Prep	arer's sigr	iature			Date		CHECKII	r i i i N		
Prepare	er	Error's pares		<u> </u>							self-employed s EIN ▶		_	
Use On		Firm's name Firm's address								1 111113	3 LIIV P			
		· · · · · · · · · · · · · · · · · · ·		_						Phone	e no_			
					_			-				QC	A DE	10011

Taxpayer's Name THE OLIVER DEWEY	MAYOR FOUN	DATION	477	006	019			Identify	ing Number 4630
DESCRIPTION OF PROPERTY CENTENNIAL II (2	.6575 ACRES) TRAC	т <u>О</u>						
Yes No Did you ac	tively participate in the	operation o	f the acti	vity di	uring the tax year?				
	OMMERCIAL								
OTHER INCOME:									
									
TOTAL GROSS INCOME									
OTHER EXPENSES:					· · · · · · · · · · · · · · · · · · ·		<u> </u>		
INSURANCE						j	134.	- 1	
TAXES							566.		
				-	· · · · · · · · · · · · · · · · · · ·				
						 			
					·				
						-			
			-		 -				
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					···· · · -·				
DEPRECIATION (SHOWN BELOW)									
LESS: Beneficiary's Portion									
AMORTIZATION					· ·				
LESS: Beneficiary's Portion .									
DEPLETION									
LESS: Beneficiary's Portion									
TOTAL EXPENSES						,h	 .		12,700.
TOTAL RENT OR ROYALTY INCOME									-12,700.
Less Amount to	. (1.033)	· <u></u> : -		• •			<u></u>	<u>l</u>	12,700.
Rent or Royalty									
Depreciation						· · · · · —			
Depletion						· · · ·			
Investment Interest Expense						• • • • — —			
						• • • • — —			
Net Income (Loss) to Others						• • • • —			
Net Rent or Royalty Income (Loss)									-12,700.
Deductible Rental Loss (if Applicable									12,700.
SCHEDULE FOR DEPRECIATI		· · · · · ·				<u> </u>	<u> </u>	•	···
(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(ı) Lıfe or rate	(j) Depreciation for this year
			1						
					-				
			_						
Totals					<u></u>				
						-			

Taxpayer's NameIdenTHE OLIVER DEWEY MAYOR FOUNDATION 47700601975-1							ng Number 4630		
DESCRIPTION OF PROPERTY CENTENNIAL (12.8)	752 ACRES)	TRACT (ο.						
	tively participate in the			vity du	uring the tax year?	_ .			
	OMMERCIAL								
OTHER INCOME:			_						
	<u> </u>								
TOTAL GROSS INCOME	<u> </u>						· · · <u>· · </u>		
OTHER EXPENSES:									
INSURANCE							<u>134.</u>		
TAXES						55,	<u>455.</u>		
	· · · · · · · · · · · · · · · · · · ·						<u>.</u>		
									
DEPRECIATION (SHOWN BELOW)									
LESS: Beneficiary's Portion									
AMORTIZATION									
LESS. Beneficiary's Portion .									
DEPLETION									
LESS: Beneficiary's Portion									
TOTAL EXPENSES									55,589.
TOTAL RENT OR ROYALTY INCOME	(LOSS)	<u> </u>			<u> </u>	·	<u> </u>		-55,589.
Less Amount to									
Rent or Royalty									
Depreciation									
Depletion						· · · · · <u></u>			
Investment Interest Expense									
Other Expenses						• • • • • • • • • • • • • • • • • • • •			
Net Income (Loss) to Others								•	
Net Rent or Royalty Income (Loss)									-55,589.
Deductible Rental Loss (if Applicable SCHEDULE FOR DEPRECIATI		<u>· · · · · · · · · · · · · · · · · · · </u>	<u></u>	<u></u>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · ·		•	
SCHEDOLE FOR DEFRECIATI	ON CLAIMICD					Ī			
(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
							 		
						 			
									
		 							-
	-						_		
			 				<u> </u>		· · · · · · · · · · · · · · · · · · ·
	-								.,
									-
Totals							<u></u>	<u> </u>	

TAXPAYER'S Name Iden THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1								ing Number 4630	
DESCRIPTION OF PROPERTY BRAND ROAD (21.2	55 ACRES) D	ALLAS	COUN'	ΓY,					
Yes No Did you ac	tively participate in the	operation o	f the acti	vity di	uring the tax year?				
	OMMERCIAL								
OTHER INCOME									
TOTAL GROSS INCOME			_		-			-	
OTHER EXPENSES:	<u> </u>	<u> </u>	<u> </u>	· · ·			<u> </u>		
INSURANCE							134.		
REPAIRS							607.		
TAXES							050.		
	·								
			_						
			_						
								\dashv	
								\dashv	
		•							
DEPRECIATION (SHOWN BELOW)			-						
LESS: Beneficiary's Portion								-	
AMORTIZATION					• •			-	
LESS. Beneficiary's Portion .								\dashv	
DEPLETION					1			_	
LESS: Beneficiary's Portion								\dashv	
TOTAL EXPENSES								\neg	92,791.
TOTAL RENT OR ROYALTY INCOME									-92,791.
Less Amount to	(1033)	· · · · · ·	<u>· · </u>	:		• • • • • • • • • • • • • • • • • • • •	<u>· · · · · </u>	• • 1	
Rent or Royalty									
Depreciation									
Depletion									
Investment Interest Expense									
• •									
Net Income (Loss) to Others						•			
									-92,791.
Net Rent or Royalty Income (Loss) Deductible Rental Loss (if Applicable									<u> </u>
SCHEDULE FOR DEPRECIATI		• • • • • • • •	<u>• • • • </u>			<u> </u>	• • • •	•	
	(b) Cost or	(c) Date	(d)	(e)	(f) Basis for	(g) Depreciation	(h)	(ı) Lıfe	(j) Depreciation
(a) Description of property	unadjusted basis	acquired	ACRS des	Bus %	depreciation	prior years	Method	or rate	for this year
									
									
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				<u> </u>					<u> </u>
Totals							• • • •		
	· · · · · · · · · · · · · · · · · · ·								

Taxpayer's NameIdentificationTHE OLIVER DEWEY MAYOR FOUNDATION 47700601975-18								ng Number 4630	
DESCRIPTION OF PROPERTY MEADOWDALE (10.7	689 ACRES)	JOSIAH	PHE:	LPS					
	tively participate in the				ring the tax year?				
TYPE OF PROPERTY: 4 - C	OMMERCIAL								
OTHER INCOME:									
TOTAL GROSS INCOME		 -						-	
OTHER EXPENSES:							1 2 4		
INSURANCE							<u>134.</u>		
REPAIRS							604.		
TAXES						25,	179.		
DEPRECIATION (SHOWN BELOW)	· · · · · · · · · · · · · · · · · · ·								
LESS: Beneficiary's Portion					[·				
LESS: Beneficiary's Portion .					_				
DEPLETION									26,917.
TOTAL PENT OF POVALTY INCOME									-26,917.
TOTAL RENT OR ROYALTY INCOME Less Amount to	. (1.033)	<u>· · · · · · · · · · · · · · · · · · · </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	•••	20,017.
Rent or Royalty									
Depreciation									
Depletion									
Investment Interest Expense									
Other Expenses									
Net Income (Loss) to Others						·			
Net Rent or Royalty Income (Loss)								•	-26,917.
Deductible Rental Loss (if Applicable								• —	20,017.
SCHEDULE FOR DEPRECIATI								·	
(a) Description of property	(b) Cost or unadjusted basis	(c) Date	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(ı) Lıfe or rate	(j) Depreciation for this year
							L		
	L	<u> </u>	<u></u>					· · · · ·	

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	7,653. 7,329. 19,098. 8,047. 2,942. 10,014. 1,613. 1,341. 6,812. 1,692. 27,313. 13,222. 16,427.	
REVENUE AND EXPENSES PER BOOKS	7,653. 19,098. 19,098. 7,756. 8,047. 2,942. 10,014. 1,341. 6,812. 13,222. 16,427.) - -
DESCRIPTION	AMERICAN AADVANTAGE GROWTH & INC FD ARTISAN MID CAP VALUE DODGE & COX STK FD FIDELITY CONTRAFUND AMERICAN GRTH FD OF AMER F2 FD#0605 HARBOR INTERNATIONAL FUND ISHARES BARCLAYS TIPS BOND FUND UIT LAZARD EMRG MKTS-INST FD#0638 NEUBERGER BERMAN GENESIS INSTL #1229 PIMCO TOTAL RETURN FUND INST#35 PERMANENT PORTFOLIO PIMCO ALL ASSET-INST ROYCE LOW-PRCD STK-SERV FD#0266 TEMPLETON GLOBAL BOND-ADV FD#0616 VANGUARD INTERMED INDX-SIG FD#1349 VANGUARD INTERMED INDX-SIG BOT SHORT-TERM CASH FUND I MOORE, BILLY BOB AND SUE ANN @ 8.500% D	1

STATEMENT

FORM 990PF, PART I - OTHER INCOME

NET INVESTMENT INCOME	1 1 1 1	-9,320. 3,242.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1	-9,320. 3,242.
DESCRIPTION		BOKF PRIVATE EQUITY MUTUAL FUND REBATES

-6,078.

-6,078.

TOTALS

477006019

AOJ036 9078 11/13/2012 13:10:22

FORM 990PF, PART I - LEGAL FEES	

CHARITABLE PURPOSES	1 1 1 1 1 1	100.	100.	11 11 11 11 11 11 11 11
ADJUSTED NET INCOME	1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NONE	
NET INVESTMENT INCOME	1 1 1 1 1	100.	100.	
REVENUE AND EXPENSES PER BOOKS	† 1 † 1 † 1 † 1 † 1 † 1	100.	100.	H H H H H H H H H H H H H H H H H H H
DESCRIPTION		LEGAL FEES - INCOME (ALLOCABLE	TOTALS	

FEES	11111
ACCOUNTING	
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PART	
	1
990PF	
ORM	1

CHARITABLE PURPOSES	6,000.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	6,000.
DESCRIPTION	TAX PREPARATION FEE (ALLOCABLE TOTALS

75-1864630

FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
TAX FAIMENT - FRICK TE ESTIMATES - PRINCIPAL TAXES ON QUALIFIED TAXES ON NONQUALIFIED TOTALS	1,864. 1,693. 680. 5,295.	1,693. 680. 2,373.	1,864.

OTHER EXPENSES	
1	П
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VNI	; ; ; ;		14,929. 14,929.	8,212. 8,212.
REVENUE AND AND EXPENSES DESCRIPTION PER BOOKS	1	RENT AND ROYALTY EXPENSES OTHER ALLOCABLE EXPENSE-PRINCI		OTHER NON-ALLOCABLE EXPENSE -

32,644.

220,641.

9

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

DESCRIPTION

BONDS

TOTALS

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

TOTALS

EQUITY SECURITIES

ENDING	BOOK VALUE	1 1 1 1 1 1 1

ENDING FMV

1,795,172.

1,914,790. -------1,914,790. 1 1 1

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION	

FIXED INCOME SECURITIES

ENDING	BOOK VALUE	1 1 1 1 1 1	

4,879,148. ENDING FMV

TOTALS

4,879,148. 4,476,881. --------4,476,881.

477006019

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PART	
990PF,	
FORM	

COST/	C OR F	1 1 1 1	
	DESCRIPTION	; ; ; ; ;	

C OR F -----C TOTALS

PARTNERSHIP INTEREST

ENDING	FMV	1 1
ENDING	BOOK VALUE	

368,750. 335,041. 368,750. 335,041. LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

FIXED ASSET DETAIL

ACCUMULATED DEPRECIATION DETAIL

ENDING 'BALANCE	20,805.	12,368.	3,620.	2,676.	39,469.
DISPOSALS					
ADDITIONS			1,259.	1,259.	
BEGINNING BALANCE	20,805.	12,368.	2,361.	1,417.	36,951.
ENDING BALANCE	26,006.	12,368.	7,555.	7,555.	53,484.
DISPOSALS					
ADDITIONS					
BEGINNING BALANCE	26,006.	12,368.	7,555.	7,555.	53,484.
METHOD/ CLASS	 M3	М3	M3	M3	
ASSET DESCRIPTION	COMPUTER SOFTWARE	COMPUTERS	COMPUTER UPGRADE	COMPUTER UPGRADE	TOTALS

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION _ _ _ _ _ _ _ _ _ _

AMOUNT _ _ _ _ _

ADJUSTMENT DUE TO K-1 REPORTING

RETURN OF CAPITAL ON BOOKS

40,638. 347,478.

388,116.

TOTAL

==========

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES ______ OFFICER NAME: SAMUEL W. GRABER ADDRESS: ' P.O. BOX 1905 SHERMAN, TX 75091-1905 TITLE: GOVERNOR AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 2,000. COMPENSATION OFFICER NAME: VICKIE WHITE ADDRESS: 1709 RIVER OAKS CIRCLE SHERMAN, TX 75092 TITLE: GOVERNOR AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 2,000. COMPENSATION OFFICER NAME: JAMES E PLEDGER ADDRESS: 401 N. ELM SHERMAN, TX 75090 TITLE: GOVERNOR AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 COMPENSATION 2,000. OFFICER NAME: NASH LAMB ADDRESS: 244 N 4395 PRYOR, OK 74361-9144 TITLE: **GOVERNOR** AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 COMPENSATION 2,000.

13

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES ______ OFFICER NAME: MARIEN STINSON ADDRESS: · 21 N VANN, STE 1 PRYOR, OK 74361 TITLE: GOVERNOR AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 2,000. COMPENSATION OFFICER NAME: TRACEY L DEAN ADDRESS: 208 S VANN PRYOR, OK 74361-5216 TITLE: GOVERNOR AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 COMPENSATION 2,000. OFFICER NAME: BANK OF TEXAS, NA ADDRESS: P.O. BOX 1088 SHERMAN, TX 75091 TITLE: CORPORATE TRUSTEE AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 164,360. COMPENSATION OFFICER NAME: REGINA D PRUITT ADDRESS: P.O. BOX 1088

SHERMAN, TX 75091

TITLE:

CHAIRMAN

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 50

TOTAL COMPENSATION:

176,360.

==========

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

REGINA PRUITT, THE O.D. MAYOR FDN. C/O BANK OF TX

ADDRESS: \

307 W. WASHINGTON

SHERMAN, TX 75090

RECIPIENT'S PHONE NUMBER: 903-813-5100

FORM, INFORMATION AND MATERIALS:

WRITTEN APPLICATION DESCRIBING THE SPECIFIC NEEDS OF THE APPLICANT

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

GRANTS ARE PROVIDED TO QUALIFIED ORGANIZATIONS WITHIN MAYES COUNTY, OKLAHOMA OR GRAYSON COUNTY, TEXAS FOR CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

UNITED WAY OF GRAYSON COUNTY, INC.

ADDRESS: \

P.O. BOX 1112

SHERMAN, TX 75091-1112

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT CAMPAIGN

FOUNDATION STATUS OF RECIPIENT:

501(C) (3)

RECIPIENT NAME:

MAYES COUNTY UNITED WAY

ADDRESS:

P.O. BOX 863

PRYOR, OK 74362

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT SERVICES

FOUNDATION STATUS OF RECIPIENT:

501(C) (3)

RECIPIENT NAME:

GRAND CENTRAL STATION CENTER

ADDRESS:

2610 SHENANDOAH CIRCLE

SHERMAN, TX 75092

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT FOR STATION

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

AMOUNT OF GRANT PAID 90,000.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: INDIAN NATIONS COUNCIL BOY SCOUTS OF AMERICA ADDRESS: 4295 SOUTH GARNETT TULSA, OK 74146 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT ORGANIZATION FOUNDATION STATUS OF RECIPIENT: 501(C)(3) RECIPIENT NAME: GRAND GATEWAY EDA/PELIVAN TRANSIT P.O. DRAWER B ADDRESS: 333 S. OAK BIG CABIN, OK 74332 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT TRANSIT FOUNDATION STATUS OF RECIPIENT: 501 (C) (3) 24,964. AMOUNT OF GRANT PAID

AMOUNT OF GRANT PAID

RECIPIENT NAME:

DISTRICT #6

9165 N. 440 RD

BIG CAGIN, OK 74332

ADDRESS:

MAYES COUNTY RURAL WATER

1,000.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: PRYOR RESCUE MISSION, INC. P.O. BOX 142 ADDRESS: 640 W. GRAHAM PRYOR, OK 74362 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOR GENERAL OPERATIONS FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID 4,700. RECIPIENT NAME: WICKLIFFE SCHOOL ADDRESS: 11176 E. 470 SALINA, OK 74365 AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: BOYS & GIRLS CLUB OF GREEN COUNTRY ADDRESS: PO BOX 354 PRYOR, OK 74362

RELATIONSHIP:

501(C)(3)

PURPOSE OF GRANT:

FOUNDATION STATUS OF RECIPIENT:

NONE

SUPPORT AFTER-SCHOOL AND NUTRITION PROGRAMS

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

PRYOR AREA FOUNDATION

ADDRESS:

P.O. BOX 367

PRYOR, OK 74362-0367

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT OF FARMER'S MARKET

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

RECIPIENT NAME:

PRYOR CREEK, CITY OF

6 NORTH ADAIR

ADDRESS:

P.O. BOX 1167

PRYOR, OK 74362

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT FOR MEMORIAL/GRAVE SITE

FOUNDATION STATUS OF RECIPIENT:

NON PROFIT

AMOUNT OF GRANT PAID 30,000.

RECIPIENT NAME:

PRYOR PUBLIC SCHOOLS

ADDRESS:

P.O. BOX 548

PRYOR, OK 74361

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT FOR SCHOOL PROGRAM

FOUNDATION STATUS OF RECIPIENT:

NON PROFIT

 THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: AUSTIN COLLEGE ADDRESS: ·

900 N GRAND AVE SHERMAN, TX 75090

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SCHOLARSHIP, DAY OF SERVICE SUPPORT

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

AMOUNT OF GRANT PAID 2,300.

RECIPIENT NAME:

JACK & JILL CHILDCARE CENTER

ADDRESS:

800 WEST M.L.K. DENISON, TX 75021

AMOUNT OF GRANT PAID 2,888.

RECIPIENT NAME:

THE WOOD GROUP OF SHERMAN

ADDRESS:

315 W. MCLAIN

SHERMAN, TX 75092

AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:

THE SHERMAN MUSEUM

ADDRESS:

301 S. WALNUT

SHERMAN, TX 75090

AMOUNT OF GRANT PAID 3,000. RECIPIENT NAME:
TRI-COUNTY SENIOR NUTRITION
PROJECT, INC.
ADDRESS:

4114 AIRPORT DR DENISON, TX 75020

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT FEEDING THE ELDERLY FOUNDATION STATUS OF RECIPIENT: 501(C)(3)

RECIPIENT NAME:
DENISON PERFORMING ARTS INC
ADDRESS:
PO BOX 1035
DENISON, TX 75021

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT ART PROGRAMS

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

AMOUNT OF GRANT PAID 11,500.

RECIPIENT NAME:
HOME HOSPICE OF GRAYSON COUNTY
ADDRESS:
PO BOX 2306
SHERMAN, TX 75091

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT GROWING FOR THE FUTURE PROGRAM

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

 THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: DENISON HELPING HANDS ADDRESS: • 418 WEST CHESTNUT DENISON, TX 75020 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FEEDING THE HUNGRY PROGRAM FOUNDATION STATUS OF RECIPIENT: 501(C)(3) RECIPIENT NAME: DENISON COMMUNITY FDN ADDRESS: 313 WEST WOODARD DENISON, TX 75020 RECIPIENT NAME: HABITAT FOR HUMANITY OF GRAYSON COUNTY ADDRESS: 901 N. GRAND SHERMAN, TX 75091 AMOUNT OF GRANT PAID 500. RECIPIENT NAME: ANIMAL REFUGE FOUNDATION

AMOUNT OF GRANT PAID

STATEMENT

ADDRESS:

3377 SPRADLING ROAD Sherman, TX 75092

22

20,000.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: SHERMAN INDEPENDENT SCHOOL DISTRICT ADDRESS: 2701 LOY LAKE RD SHERMAN, TX 75090 AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: FRIENDS OF THE SHERMAN PUBLIC LIB ADDRESS: 421 N. TRAVIS SHERMAN, TX 75090 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOR VARIOUS PROGRAMS FOUNDATION STATUS OF RECIPIENT: 501(C)(3) 708. AMOUNT OF GRANT PAID RECIPIENT NAME: DOWNTOWN IMPROVEMENT COMPANY ADDRESS: 500 W. CHESTNUT DENISON, TX 75021 AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: DENISON PUBLIC LIBRARY ADDRESS: 300 WEST GANDY DENISON, TX 75020 RELATIONSHIP: NONE

PURPOSE OF GRANT:

501(C)(3)

SUPPORT FOR LIBRARY BUILDING PROGRAM

AMOUNT OF GRANT PAID

FOUNDATION STATUS OF RECIPIENT:

10,000.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

PRYOR MINISTRIES CENTER

ADDRESS:

5 NORTH VANN STREET

PRYOR, OK 74361

RELATIONSHIP: NONE

PURPOSE OF GRANT:

SUPPORT FOR SUPPLIES/DIAPERS

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

AMOUNT OF GRANT PAID 115,000.

RECIPIENT NAME:

LOY PARK IMPROVEMENT ASSOCIATION

ADDRESS:

109 N. LYNN AVENUE

DENISON, TX 75020

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT FOR LIVESTOCK SALE

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

TOTAL GRANTS PAID:

652,185.

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RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
CENTENNIAL II (2.657 CENTENNIAL (12.8752 BRAND ROAD (21.255 A MEADOWDALE (10.7689			12,700. 55,589. 92,791. 26,917.	-12,700. -55,589. -92,791. -26,917.
TOTALS			187,997.	-187,997.
TOTALS		=======	187,997.	-187,99

2011

75-1864630

THE OLIVER DEWEY MAYOR FOUNDATION 477006019

Description of Property

DEPRECIATION	1 9			:									
Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me- thod Conv	Life	ACRS CRS class class	A Current-year (S 179 ss expense	Current-year depreciation
COMPUTER SOFTWARE	12/31/2007		9			26,006.	20,805.	20,805. S	SL HY	3.000	2		
COMPUTERS	12/31/2007	12,368.	100.000			12,368.	12,368.			-+		•	
COMPUTER UPGRADE	07/24/2009	7,555.	100.000		3,778.	3,777.	2,361.	3,620.	\dashv				1,259.
COMPUTER UPGRADE	05/12/2010	7,555.	100.000		3,778	3,777.	1,417.	2,676. S	SI MO	3.000	3		1,259.
									-	_			
									1	_			
										-			
-													
C. Head Assets		52 484			7 556	45 928	16 951	39 469					2.518.
Subtotals		1.505,00				047.65	307100	177717				-	
risted i lobeity													
										_			
Less Retired Assets													
Subtotals													
TOTALS		53,484.		!	7,556.	45,928.	36,951.	39,469.					2,518.
AMORTIZATION													
Asset description	Date placed in service	Cost or basis					Accumulated amortization	Ending Accumulated amortization	Code	Lıfe			Current-year amortization
									1	-			
									+	Т			
									+				
									-				
TOTALS													
*Assets Retired													

*Assets Retired JSA 1X9024 1 000