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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A .		2011				ise a copy of this re				4	00 30 5	0.12
	For the 2011 calendar year, or tax year beginning 10-01, 2011, and ending 09-30, 20 Check if applicable C Name of organization Oklahoma Coalition Against Domestic Violence D Employer											
_	Check if a						t Domest	tic Viol	ence			er identification no.
ᆗ ′	Address cl	hange	Doing Busin			sault, Inc.			1		73-113	
ַ '	Name cha	nge		,	x if mail is not deliver	ed to street address)			Room/su	ute	E Telephor	
ַ ן	nıtıal retur	ח		N Santa Fe					124			524-0700
╝.	Terminate	d	City or town	n, state or country,	and ZIP + 4						•	502,905
⊒ ′	Amended	return	Oklah	oma Cıty,	OK 73118						G Gross re	ceipts \$
_) ′	Application	n pending	F Name and	d address of princip	pal officer				H(a)	Is this a group r	etum for	
			<u> </u>						┙"	affiliates?		Yes X No
<u>'</u>	Tax-exem	pt status 🔀	501(c)(3)	501(c) () (insert no)	4947(a)(1) or	527		Н(ъ)	Are all affiliates if "No," attach a	included?	Yes No
J 1	Nebsite:		dvsa.org	3					H(c)	Group exemption	n number	<u> </u>
		ganization 🔀	Corporation	Trust Ass	ociation Other	>	L Year	of formation .	1981	M State of le	gal domicile	OK
Pa	rt I	Summar	у									
		•	•		•					rention c		
		violence	and sex	ual assau	lt through	educational	seminar	s, publi	.catio	ns and ot	ther act	ivities
Ĉ G	1	on a sta	tewide b	asis.								·
l o i y				-								
Vе iг	2	Check this b	ox ▶ 🗌 if th	he organization	n discontinued its	s operations or disp	posed of mo	ore than 25%	6 of its ne	et assets		
t n	3	Number of v	oting member	ers of the gove	erning body (Par	t VI, line 1a)				3		30
la еп	4	Number of ir	ndependent	voting membe	rs of the governi	ng body (Part VI, li	ne 1b)			4		30
S C	5	Total number	er of individua	als employed i	n calendar year	2011 (Part V, line 2	2a)			5	;	10
& ^e	6	Total number	er of volunter	ers (estimate if	necessary) .					6		
	7a	Total unrelat	ted business	revenue from	Part VIII, colum	n (C), line 12				7	a	0
						-T, line 34					ь	0
	1									nor Year	Cu	urrent Year
R e	8	Contribution	s and grants	s (Part VIII, line	e 1h)			1		782,80	64	602,896
												0
	10	_				a(7d)		· ·			13	9
	11					ດ1,0c, and 11e)						0
2	12					t VIII, column (A), I				782,8	77	602,905
	13					lines (-3)						
	144				رام (X, eglümn (A)			Ī				
E P	15					X eolumn (A), line				503,2	27	388,408
œ,	162			16 11 . 2		11e)						0
Þ				\	plumn (D), line 2			169				
þ						If-24e)				450,8	21	342,379
20		-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		column (A), line 25				954,04	_+	730,787
		•		•						(171,1		(127,882)
 Net	+15	Trevenue les	3 expenses	Odbtract inte	10 HOITIME 12	· · · · · · · · · · · · · · · · · · ·	<u></u>		Beamana	of Current Year		ind of Year
Asset	s 20	Total accets	(Part X, line	16)				ŀ		227,2		137,291
or Fund	21		es (Part X, IIIe					• • • • •		176,4		214,434
Bal- ance:	1		•	,		20		• • • • •		50,7		(77,143)
	rt II		re Block	ices Subilaci	inte 21 nomine	20		• • • • •		30,7.		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				examined this retur	n, including accompa	nying schedules and sta	tements, and to	the best of my	knowledge	and belief, it is		
						formation of which prepa						- <u></u>
		Marc	na Smith	Ym.	4000	Water					1/2/	12:013
Sig	n		re of officer		uca (Janos				<u>_</u>	ate/	<u>600-10</u>
		,		. T	Di monto	_					, ,	
He	e		print name and	<u> </u>	ve Directo	<u> </u>						
		<u>, , , , , , , , , , , , , , , , , , , </u>	•	-30	I nu mus		Date			Charle	DTIN	
D			eparer's name		Preparer's signatur	· ` — V · I				Check If	PTIN	162200
Pai		Louise	restie	<u>.</u>	\bigcirc 1 $\stackrel{\cdot}{\bigcirc}$ $\stackrel{\cdot}{\bigcirc}$	- Curre	- 10 /-	18-2013		self-employed		062299
	parer			dwg inc					Firm's E		- 1580	1679
US	e Only	Firm's addres	is 🕨		rexel Blvd				Phone r	10	405 040	0100
					a City OK 7						405-949	
Mav	the IRS	S discuss this	s return with	the preparer s	hown above? (s	ee instructions)					13/	Yes 🗌 No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

Form	1990 (2011) Oklahoma Coalition Against Domestic Violence	73-1131211	Page 2
	rt III. Statement of Program Service Accomplishments	<u>-</u>	<u> </u>
	Check if Schedule O contains a response to any question in this Part III	<u> </u>	🗆
1	Bnefly describe the organization's mission		
	Advocate for the prevention of family violence and sexual assault through	educational	
	seminars, publications and other activities on a statewide basis.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes X	No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes 🛚	No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as me	-	
	expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the ar	mount of	
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 695,215 including grants of \$ 602,896) (Reven	ue \$	
74	Prevention of family violence and sexual assault.	ue	
	- 10 von 01 1 marri violence and ocadar assault.		
			
4b	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	١
	/ (Expenses 4) (Novel	<u> </u>	′
			
			-
4c	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	
	(Cotton) (Exponests 4) (Notes		_ ′
A -1	Other program accuracy (Decords in Oaks 1 to O.)		
4d	Other program services (Describe in Schedule O)	•	
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 695,215		
	F G		

Page 3

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_		
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)?	2	<u>X</u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
_	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	.		
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	ا ۽		}
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		٠
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			.,
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		١,,
40	complete Schedule D, Part IV	3		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10		٠,,
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			X
11				
	VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a	v	1
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	114	_X_	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е		11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	İ	x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			<u>-</u> _
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investmetnt, and program service activities outlisde the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b	L	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	L	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	L	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	<u></u>	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return?	20b		

₽ã	Checklist of Required Schedules (continued)			5
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		_ X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		<u>X</u> _
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
Ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
20	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
20	Part VI	_ 37		<u> X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Rar	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	• • •		. 📙
1a	Enter the number reported in Box 2 of Form 1006. Fates 0 of act applicable.		Yes	No
b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	: -		
c		1	-	
·	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c	37	لتستسمأ
2a	reportable gaming (gambling) winnings to prize winners?	16	X	
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar with a with a water assumed by the statements.			
b	Statements, filed for the calendar year ending with or within the year covered by this return	2b		لنسا
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country	2		2112
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	7	7 34 32 3 7 7 3 7 8	7
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	استختصا	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			2 m 5 m
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		. <u>.</u>	
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
d	required to file Form 8282?	7c	3 - 2	7
e	If "Yes," indicate the number of Forms 8282 filed during the year	70		3
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7. 6.7.	2	74
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	, '` 		3
	organization, have excess business holdings at any time during the year?	8	احمققمما	
9	Sponsoring organizations maintaining donor advised funds.		- d	
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<u> </u>	· 5 · *	
1	Section 501(c)(12) organizations. Enter			***
a	Gross income from members or shareholders		-	: -
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
2a	against amounts due or received from them)	12a		تــــا
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	•	٠_	-
	Is the organization licensed to issue qualified health plans in more than one state?	13a		1
	Note. See the instructions for additional information the organization must report on Schedule O		- 17.	4
b	Enter the amount of reserves the organization is required to maintain by the states in which	, A.	· 2 · -	
	the organization is licensed to issue qualified health plans	3.	ا القريم . التي	1.5
С	Enter the amount of reserves on hand		12.	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		_ <u></u>

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7	b below, and for a	"No"							
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule (
	Check if Schedule O contains a response to any question in this Part VI				. 😿					
Sec	tion A. Governing Body and Management									
		-		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 30		-	-					
	If there are material differences in voting rights among members of the governing body, or									
	If the governing body delegated broad authority to an executive committee or similar									
	committee, explain in Schedule O			-						
b	Enter the number of voting members included in line 1a, above, who are independent									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with									
	any other officer, director, trustee, or key employee?		2		Х					
3	Did the organization delegate control over management duties customanly performed by or under the direct									
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X					
6	Did the organization have members or stockholders?		6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint									
	one or more members of the governing body?		7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,									
	stockholders, or persons other than the governing body?		7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			,	:					
	the year by the following									
а	The governing body?		8a	X						
b	Each committee with authority to act on behalf of the governing body?		8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at									
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Coo	de)								
40-	B 18			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?		10a		v					
L.	MINA-Balance and the second of		104		Х					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,									
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b							
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	g the form?		х						
11a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Describe in Schedule O the process, if any, used by the organization to review this Form 990	g the form?	10b 11a							
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13		10b 11a 12a	Х						
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise		10b 11a							
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Oklahoma Coalition Against Domestic Violence

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Page 7

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII	" <u></u>

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)	(C)				(D)	(E)	(F)			
Name and Trile	Average hours per	Position				Reportable compensation	Reportable compensation from	Estimated amount of			
	week	l -	(do not check more than one				from	related	other		
	(describe		box, unless person is both an				the organization	organizations (W-2/1099-MISC)	compensation from the		
	hours for related		officer and a director/trustee)			_	(W-2/1099-MISC)	(VV-2/1099-WIIGC)	organization		
	organizations in Schedule O)	t d nrure st ct t du or du or	S 11	l f	Key employee	H c e m g h p e o y e e t e d	F o r m e r			and related organizations	
(1) Amanda Doran	1										
Legislative	1.00			x				0	O	0	
(2) Carolyn Husmann											
Funding and Finance	1.00			x			.				
(3) Evelyn Hibbs										-	
Chair	1.00			x				C	0	0	
(4) Laura Allison											
By-Laws	1.00			X				0	0	0	
(5) Mechelle King											
Professional Development	1.00			X			<u> </u>	c	0	0	
(6) Sissy Carden											
Membership	1.00			<u> </u>				С	0	0	
(7) Tracey Lyall											
Personnel	1.00			X				С	0	0	
(8) Marcia Smith											
Executive Director	40.00				X	₫		61,189		18,704	
(9)											
(10)											
(11)											
(12)					<u> </u>						
(13)			<u> </u>	-							
(14)								<u></u>	<u> </u>		

Form 990 (2011)

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sea not cheek more bear one by the company of the c		(A)	(B)							(D)	(E)	(F)
Section Sect		Name and Title		///	ot ob			han ana			'	
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Part V	<u>/III]</u>	Statement of Revenue					· · · · · · · · · · · · · · · · · · ·	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
,	1a	Federated campaigns	1a	 				
	h	_	1b	34,977				
Contri-	-	Membership dues		34,911			ĺ	
butions,		Fundraising events	1c					
Gifts, Grants	d	Related organizations	1d					
and	Ө	Government grants (contributions)	10	524,721			•	Ì
Other	f	All other contributions, gifts, grants,						
Sumitar Amounts		and similar amounts not included above	1f	43,198				-
	9	Noncash contributions included in lines 1a-	1f \$					
	h	Total. Add lines 1a-1f		<u> ▶</u>	602,896			
				Business Code			j	
	2a							
_	ь		_					
Program Service	С							
Revenue	d		_					
			—					
		All other program service revenue	_					
		Total. Add lines 2a-2f				¢ -	9. 5	
	_							
		Investment income (including dividends, interest of abbas areals are supply			١ ,			
		and other similar amounts)						
		Income from investment of tax-exempt bond						
	5	Royalties						
	_	(ı) Real		(II) Personal			·	
		Gross rents				-	,	
		Less rental expenses			. '.		a" .	
		Rental income or (loss)			-	<u> </u>		
	d	Net rental income or (loss)		<u> </u>				
	7a	Gross amount from sales of (i) Securities	5	(II) Other				- "-
		assets other than inventory			-	•	7	
	ь	Less cost or other basis			ĺ	<u></u>	2	
0		and sales expenses			1			
ť	С	Gain or (loss)			,	,	e:	
h	d	Net gain or (loss)		<u> ▶</u>				
r	8a	Gross income from fundraising						-
_		events (not including \$					*	
R		of contributions reported on line 1c)	_				-	
v		See Part IV, line 18	а				'	
0	ь	Less direct expenses	b	- "	1		5	
n u		Net income or (loss) from fundraising events		▶		}		
ē		Gross income from gaming activities	-					
		See Part IV, line 19	а		}	-		
	ь	Less direct expenses			1	}	1	,
	1	Net income or (loss) from gaming activities			<u> </u>	<u> </u>		
		Gross sales of inventory, less						
	IVa	returns and allowances	а					
	Ь	Less cost of goods sold			†			
	ı	Net income or (loss) from sales of inventory		•				
	⊢ -	Miscellaneous Revenue	• •	Business Code		 		
	11a	miscellaticons (/cacting		DADAROS OUG	 		ļ	
	''-				 			
					 		 	· · · · · · · · · · · · · · · · · · ·
	ي	All other revenue	_	-	 			-
	ı			<u> </u>			 	
	l				602,905		,	
	_ '4	Total revenue. See instructions	• •	<u> </u>	1 302,303	1 -	1`	1

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response to any quest				<u></u>
Do n	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				- 、
	organizations in the United States See Part IV, line 21.				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			1	
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members			,	
5	Compensation of current officers, directors,				
	trustees, and key employees	61,189	61,189		
6	Compensation not included above, to disqualified			į	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	235,210	235,210		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	68,624	68,624		
10	Payroll taxes	23,385	23,385		
11	Fees for services (non-employees)				
а	Management				. <u> </u>
b	Legal				
c	Accounting	14,533	14,533		
d	Lobbying	22,169			22,169
0	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	61,977	61,977		
12	Advertising and promotion				
13	Office expenses	27,606	27,606		
14	Information technology				
15	Royalties				
16	Occupancy	32,500	32,500		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	84,805	84,805		·· _
20	Interest				
21	Payments to affiliates	<u>-</u>			
22	Depreciation, depletion, and amortization	7,467		7,467	
23	Insurance	5,760		5,760	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Bank charges	176		176	
b	Certification	393	393		
C	Outreach	70,523	70,523		
d	Dues and Subscriptions	5,844	5,844		
	All other expenses	8,626	8,626		
25	Total functional expenses. Add lines 1 through 24e	730,787	695,215	13,403	22,169
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here If				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2011) Oklahoma Coalition Against Domestic Violence 73-1131211 Page 11 Part X **Balance Sheet** (B) (A) Beginning of year End of year 39,185 1 20,651 2 2 160,655 97,501 3 3 Pledges and grants receivable, net 938 4 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing Α employers and sponsoring organizations of section 501(c)(9) voluntary s 6 employees' beneficiary organizations (see instructions) θ 7 Notes and loans receivable, net 7 t 8 Inventones for sale or use 2,866 3,039 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a 63,453 22,587 10c 15,120 11 11 Investments - other securities See Part IV, line 11 12 12 13 13 Investments - program-related See Part IV, line 11 14 14 15 980 15 980 Total assets. Add lines 1 through 15 (must equal line 34) 227,211 137,291 16 16 17 29,109 17 26,438 18 18 126,838 19 88,913 19 Deferred revenue 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 99,083 20,525 25 Total liabilities. Add lines 17 through 25 26 176,472 26 214,434 Organizations that follow SFAS 117, check here > 🔀 and complete Ν F lines 27 through 29, and lines 33 and 34. u e t (16, 324)27 (20,640) 27 n d 67,063 (56,503) 28 28 29 29

(77, 143)

30

31

32

33

50,739

227,211

Organizations that do not follow SFAS 117, check here and

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances

complete lines 30 through 34.

30

31 32

33

34

.,	· · · · · ·				
Form	1990'(2011) Oklahoma Coalition Against Domestic Violence 73-11	31211		Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u>.</u>			. 🗆
			_		
1	Total revenue (must equal Part VIII, column (A), line 12)		ϵ	02,	905
2	Total expenses (must equal Part IX, column (A), line 25)		7	30,	787
3	Revenue less expenses Subtract line 2 from line 1		(:	L27,	882)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	Ī		50,	739
5	Other changes in net assets or fund balances (explain in Schedule O)	<u> </u>			0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))			(77,	143)
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			<u>.</u>	. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990				1
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in		1		
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	· · · L	2a	X	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	<u>X</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in				1
	Schedule O		l		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	1	1		
	issued on a separate basis, consolidated basis, or both	ĺ			
	X Separate basis	_		- 	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?	· L	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		T		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b	Х	
	EEA	- 1	Form	990 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number 73-1131211 Oklahoma Coalition Against Domestic Violence Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated Type III-Other **b** Type II e 🔲 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) 119(8) Provide the following information about the supported organization(s) h (i) Name of supported (II) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization in col organization (described on lines 1-9 in col (i) listed in your the organization in support (i) organized in the above or IRC section governing document? col (i) of your support? US? (see instructions) Yes Yes Yes No No (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2011

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

<u> Sec</u>	uon A. Public Support							
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) To	tal
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	755,864	679,823	1,096,453	782,864	602,721	3,91	7,725
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge				·		; !	
4	Total. Add lines 1 through 3	755,864	679,823	1,096,453	782,864	602,721	3,91	7,725
5	The portion of total contributions by each							
	person (other than a governmental unit or		}					
	publicly supported organization) included		*		_			
	on line 1 that exceeds 2% of the amount		ı	,				
	shown on line 11, column (f)	·-				ž	29	0,375
6	Public support. Subtract line 5 from In 4		-	•	-		3,62	7,350
Sec	tion B. Total Support		·					
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) To	tal
7	Amounts from line 4	755,864	679,823	1,096,453	782,864	602,721	3,91	7,725
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	806	331	7	13	g		1,166
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10 .		۳				3,91	8,891
12	Gross receipts from related activities, etc. (see instructions) .				12		_
13	First five years. If the Form 990 is for the corganization, check this box and stop here							▶□
<u>Sec</u>	tion C. Computation of Public Su	ipport Percent	age					
14	Public support percentage for 2011 (line 6,	column (f) divided	by line 11, column	(f))		14	92.56	%
15	Public support percentage from 2010 Sche	dule A, Part II, line	14			15	99.95	%
16a	33 1/3% support test - 2011. If the organiz	ation did not check	the box on line 13	, and line 14 is 33	1/3% or more, che	ck this box		
	and stop here. The organization qualifies a	is a publicly suppor	ted organization					\mathbf{x}
þ	33 1/3% support test - 2010. If the organiz	ation did not check	a box on line 13 o	r 16a, and line 15 i	s 33 1/3% or more	, check this		
	box and stop here. The organization qualifi	ies as a publicly su	pported organization	on				
17a	10%-facts-and-circumstances test - 2011	I. If the organization	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	l is 10% or		
	more, and if the organization meets the "fac	cts-and-circumstand	ces" test, check thi	s box and stop he	re. Explain in Part	IV how the		
b	organization meets the "facts-and-circumst 10%-facts-and-circumstances test - 2010 more, and if the organization meets the "facts and facts and facts are also facts are also facts and facts are also facts and facts are also facts and facts are also facts and facts are also facts are also facts are also facts are also facts and facts are also facts are also facts are also facts are also facts are also facts are also facts and facts are also fa). If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and li	ne 15 is 10% or		▶□
18	more, and if the organization meets the "factorganization meets the "facts-and-circumst Private foundation . If the organization did	tances" test The or	ganızatıon qualifie	s as a publicly sup	ported organizatio	n		▶ □

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513	 					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			3			
C	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)				-		
	ction B. Total Support					_	
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						
ıva	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the or organization, check this box and stop here)(3)	▶□
Sec	ction C. Computation of Public Su	pport Percen	tage				
15	Public support percentage for 2011 (line 8, c		•	• • • • • • • •			%
	Public support percentage from 2010 Sched					. 16	%
	ction D. Computation of Investme			-1 (0)		1471	
17 40	Investment income percentage for 2011 (line		=				<u>%</u>
18	Investment income percentage from 2010 Sc	cnedule A, Part III,	ine 1/		• • • • • • • • •	. 18	%
	33 1/3% support tests - 2011. If the organiz 17 is not more than 33 1/3%, check this box	and stop here. Th	ne organization qu	alifies as a publici	y supported organi	zation	▶□
	33 1/3% support tests - 2010. If the organization 18 is not more than 33 1/3%, check this Private foundation. If the organization did n	box and stop her	. The organizatio	n qualifies as a pu	iblicly supported or	ganization	

Form 4720

d Total

b c ď Total

а Ь c d

(g) Tax on disqualifying lobbying

expenditures - Schedule H. Part II. col. (d)

(k) Tax on prohibited benefits - Sch L,

Part II, col (d), and Part III, col (d)

Department of the Treasury

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

(Sections 170(f)(10), 684(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4965, 4968, and 4987)

2011

OMB No 1545-0052

► See separate Instructions. Internal Revenue Service For calendar year 2011 or other tax year beginning 10-01 , 2011, and ending 09-30,20 12 Name of organization or entity Employer identification number Oklahoma Coalition Against Domestic Violence 73-1131211 Number, street, and room or suite no (or P O box if mail is not delivered to street address) Check box for type of annual return STE 124 3815 N Santa Fe Avenue Form 990 Form 990-EZ City or town, state, and ZIP code Form 990-PF Oklahoma City, OK 73118 Form 5227 Yes No Is the organization a foreign private foundation within the meaning of section 4948(b)? B Has corrective action been taken on any taxable event that resulted in Chapter 42 taxes being reported on this form? (Enter "N/A" if not applicable) If "Yes," attach a detailed description and documentation of the corrective action taken and, if applicable, enter the fair market value of any property recovered as a result of the correction If "No," (i e , any uncorrected acts, or transactions), attach an explanation (see instructions) Taxes on Organization (Sections 170(f)(10), 664(c)(2), 4911(a), 4912(a), 4942(a), 4943(a), 4944(a)(1), 4945(a)(1), 4955(a)(1), 4965(a)(1), and 4966(a)(1)) Tax on undistributed income - Schedule B, line 4 2 Tax on investments that jeopardize charitable purpose - Schedule D, Part I, column (e) 3 Tax on political expenditures - Schedule F, Part I, column (e) 5 6 Tax on excess lobbying expenditures - Schedule G, line 4 Tax on disqualifying lobbying expenditures - Schedule H, Part I, column (e) 7 9 Tax on being a party to prohibited tax shelter transactions - Schedule J, Part I, column (h) 10 Tax on taxable distributions - Schedule K, Part I, column (f) 10 11 Tax on a charitable remainder trust's unrelated business taxable income. Attach schedule 12 Part II-A Taxes on Managers, Self-Dealers, Disqualified Persons, Donors, Donor Advisors, and Related Persons (Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4955(a)(2), 4958(a), 4965(a)(2), 4966(a)(2), and 4967(a)) (b) Taxpayer identification number (a) Name and address of person subject to tax d (d) Tax on investments that jeopardize (c) Tax on self-dealing - Schedule A, (e) Tax on taxable expenditures -(f) Tax on political expenditures charitable purpose - Schedule D, Part II, col (d), and Part III, col (d) Schedule E, Part II, col (d) Schedule F, Part II, col (d) Part II, col (d) b C

(h) Tax on excess benefit

(d), and Part III, col (d)

transactions - Schedule I, Part II, col

Tax on taxable distributions -

Schedule K, Part II, col (d)

(f) Total - Add cols (c) through (k)

(i) Tax on being a party to prohibited

tax shelter transactions - Schedule J,

Part II, col (d)

Partil	EB Summa	ry of Tax	es (See Tax Payme	nts in the i	nstruc	tions)		
1 Er	nter the taxes listed in	n Part II-A, c	column (I), that apply to	managers	s, self-	dealers, disqualified		
ре	ersons, donors, dono	r advisors, a	nd related persons wh	o sign this	form	If all sign, enter the		
to	tal amount from Part	II-A, column	n (l)				. 1	
2 To	otal tax. Add Part I, II	ine 12, and F	Part II-B, line 1				. 2	
3 To	otal payments includi	ng amount p	aid with Form 8868 (s	ee instruct	ions)		3	
4 Ta	ax due. If line 2 is lar	ger than line	3, enter amount owed	(see instru	actions	s)	▶ 4	
5 O	verpayment. If line 2	ls smaller th	nan line 3, enter the dif	ference TI	nis is y	our refund	▶ 5	
			ULE A - Initial Ta					
Parti	Acts of S		ng and Tax Comp					-
(a) Act	(b) Date		. <u></u>					
number	of act					(c) Description of act		
1								
2	-							
3								
4		 						-
5								
(d) Que	estion number from Form 99	90-PF,				f) Initial tax on self-dealing	(g)	Tax on foundation managers (if
Part \	VII-B, or Form 5227, Part VI applicable to the act	I-B,	(e) Amount involved in	act	`	(10% of col (e))	apple	cable) (lesser of \$20,000 or 5% of col (e))
	applicable to the act							
								
					-			
		<u> </u>						
Parti	Summary	of Tax L	iability of Self-D	ealers a	nd P	roration of Payments		
also the same	Carl Carl	0		(b) Act no		(c) Tax from Part I, col (f),		(d) Self-dealer's total tax
	(a) Names of self-de	eaters liable for t	tax	Part I, col		or prorated amount		liability (add amounts in col. (c)) (see instructions)
				·	-		-	<u> </u>
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						· · · · · · · · · · · · · · · · · · ·		1
								
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								-
								1
Partil	III Summa	ry of Tax	Liability of Four	dation I	Vlana	gers and Proration of	Pavm	ents
	•	_	-	(b) Act no		(c) Tax from Part I, col (g),		(d) Manager's total tax liability
	(a) Names of foundate	on managers lial	ble for tax	Part I, col		or prorated amount		(add amounts in col. (c)) (see instructions)
				<u> </u>			_	
						· · · · · · · · · · · · · · · · · · ·		7
								7
			•		-	· - · · -		
								7
								1
								
							<u> </u>	1
								1
	sc	HEDULF	B - Initial Tax on	Undist	ribute	ed Income (Section 494	2)	<u> </u>
1 U			ore 2010 (from Form 9				<u>-,</u>	
		•	m Form 990-PF for 20			, , , , , , , , , , , , , , , , , , , ,	2	
								<u> </u>
				_			. 3	
	under section 4942 (add lines 1 and 2) Tax - Enter 30% of line 3 here and on page 1, Part I, line 1							1

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Part II	Summary of Tax Liability of Fo	oundation Manage	on Managers and Proration of Payments						
	(a) Names of foundation managers liable for tax	(b) Investment no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)					
	,								
-		EEA		Form 4720 (2011)					

		A A	 =					
		SCHEDULE E -			ole Exp	enditures	(Section 4945	5)
Part I	<u> Expenditure</u>	s and Computa	ation of Ta	ax				
a) Item umber	(b) Amount	(c) Date paid or incurred	(d)) Name and address of	of recipient		(e) Description	on of expenditure and purposes for which made
1	-							
2			<u> </u>					
3								<u>-</u>
4	-							
		 	-					
5	<u> </u>	L	_				22.1.1.1	
	tion number from Form 990-F 227, Part VI-B, applicable to		(9)) Initial tax imposed of (20% of col. (I			managen	tax imposed on foundation s (if applicable) - (lesser of 0,000 or 5% of col. (b))
		····				·		
-				· · · · · · · · · · · · · · · · · · ·				
	column (g) Enter here						5 .	
otal - o	ne 4							
Part I	Summary	of Tax Liability	of Found	ation Manag	ers and	Proratio	n of Paymen	ts
	(a) Names of foundation r			(b) Item no from Part I, col (a)		ax from Part I, o	ol (h), or	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
								, ,
								1
				_				
								,,,,
		SCHEDULE F	- Initial Ta	axes on Polit	ical Ex	penditure	s (Section 495	55)
Part I	Expenditure	es and Comput						•
	Experientale	T	1	<u>un</u>		(e) Initial t	ax imposed on	(f) Initial tax imposed on
a) Item number	(b) Amount	(c) Date paid or incurred	(d) Descrip	tion of political expend	liture	organizatio	n or foundation of col (b))	managers (if applicable) (lesser of \$5,000 or 2-1/2% of col (b))
1								
2								
3							-	
4		-						
5								
-	<u>-</u> .							
otal - o	column (e) Enter here	and on Part I, line 5		<u></u> .				
	column (f) Enter total (
Part I	Summary of	Tax Liability of	<u>Organizat</u>	tion Manage	s or Fo	undation	Managers &	Proration of Payments
	(a) Names of organic foundation manag	-		(b) Item no from Part I, col (a)	(c) T	ax from Part I, o prorated am	**	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
							-	1
								1
 -	-			-			<u> </u>	
								1
								1
								1

EEA

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73-1131211

Page 4

Form 4720 (2011)

Form 4720	0 (2011) Oklah	oma Coalition	Against	Domestic V	iolence	e		73-	1131211	Page 5
		SCHEDULE G -	Tax on E	xcess Lobby	ying Ex	penditure	S (Section 49	911)		
1 Exces	s of grassroots expe	nditures over grassro	oots nontaxa	able amount (fron	n Schedul	le C (Form				
990 or	r 990-EZ), Part II-A, o	column (b), line 1h) ((See instruc	tions before maki	ng an					
								1		
		litures over lobbying		-				1		
990-E	Z), Part II-A, column	(b), line 1i) (See ins	tructions be	fore makıng an e	ntry) .			2		
3 Taxab	le lobbying expendit	ures - enter the large	r of line 1 o	rlıne 2				3		
								l i		
4 Tax -	~ ~	ere and on Part I, line						4		
		EDULE H - Taxe			obbying	<u>g</u> Expendi	tures (Section	on 4912)	
Part I	Expenditure	s and Computa	tion of T	ax		Т		(8.T.	ax imposed on or	
(a) Item	(b) Amount	(c) Date paid	(d) Descripti	on of lobbying expend	itures		ed on organization fcol (b))		nanagers (if appli	cable) -
number		or incurred				(376 0)		ļ	(5% of col (b	»))
1						ļ		1		
2	<u> </u>					 		-		
3										
4						ļ		 -		
5	<u>==</u>							17.2		
Total - col	lumn (e). Enter here	and on page 1, Part I	l, line / .	· · · · · · · · ·		<u> </u>				<u> </u>
				-						
		or prorated amount) I						4-		
Part II	Summary	of Tax Liability	of Organ			-		_	Managara total i	tay liability
	(a) Names of organization	managers liable for tax		(b) Item no from (c) Tax from Part I, col (f), or Part I, col (a) prorated amount				Manager's total t add amounts in o	xol (c))	
				Fait1, 601 (a)	ļ	profated amount			(see instruction	ons)
					_			-{		
								┥		
								 		
								4		
					ľ			4		
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								-		
								-		
		MIEDINE: : :	· : 1 ==	<u> </u>	<u> </u>	Tunas : 11	(0	4050		
		HEDULE I - Init				ransaction	ons (Section	4958)		
Part I	Excess Ben	efit Transaction	is and fa	ix Computati	on					
Transaction	(b) Date of			(c)	Description	of transaction				
number	transaction						 			
1	_									
2										
3										
4						·		_		
5							, AR 12	Y OR OTTO	nization manager	~
	(d) Amount of excess	benefit	(e)	Initial tax on disqualif				_	nization manager le) (lesser of	•
	(4) 741104111 01 02000			(25% of col (d))		\$2	0,000 or 1	0% of col (d))	

<u> </u>				Benefit Transactions	(Section 4958) Continued	_
Part III	Summary of	Tax Liability of Dis	squalified Pers	ons and Proration of F	Payments	
	mes of disqualified persor		(b) Trans no fi Part I, col (a)	rom (c) Tax from Part I, col	(e). (d) Disqualified person's total t	
						-
						
	~ •					 -
	-					
Partill	Summary of	Tax Liability of 50	1(c)(3), (c)(4) &	(29) Organization Mai	nagers and Proration of Payr	nents
a) Names of		organization managers liable for	(b) Trans no f	rom (c) Tax from Part I, col	(f), (d) Manager's total tax lial	othty
	SCHEDULE	J - Taxes on Being	a Party to Pro	hibited Tax Shelter Tr	ansactions (Section 4965)	
Partil	Prohibited T	ax Shelter Transac	ctions (PTST) a	nd Tax Imposed on th	e Tax-Exempt Entity	
(a) Fransaction number	(b) Transaction date	(c) Type of transaction 1 - Listed 2 - Subsequently listed 3 - Confidential 4 - Contractual protection		(d) Description of t	ansaction	
1						
2			<u>-</u>			
3						
4				<u> </u>	· · · · · · · · · · · · · · · · · · ·	_
5					· · · · · · · · · · · · · · · · · · ·	
have reason was a PTST v	ix-exempt entity know or to know this transaction when it became a party to s ? Answer Yes or No			(g) 75% of proceeds attnbutable the PTST	to (h) Tax imposed on the tax-exem entity (see instructions)	npt
		_				
Total - colu	umn (h) Enter here	and on Part I, line 9				

Oklahoma Coalition Against Domestic Violence

Form 4720 (2011)

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Form 4720		Coalition Again			73-1131211 Page
Part II	Tax Imposed o	n Entity Managers	(Section 4965) Cor	ntinued	
	(a) Name of entity	manager	(b) Transaction number from Part I, col (a)	(c) Tax - enter \$20,000 for each transaction listed in col (b) for each manager in col (a)	(d) Manager's total tax liability (add amounts in col. (c))
	- ~				
•	SCHEDULE K - T		stributions of S Is (Section 4966)	ponsoring Organizations See instructions	Maintaining Donor
Part:I	Taxable Distrib	outions and Tax Co	mputation		
(a) em number	(b) Nar	me of sponsoring organization and donor advised fund	d	(c) Descripti	on of distribution
1					
2					
3					
4					
(d) Date o	of distribution	(e) Amount of distri	bution	(f) Tax imposed on organization (20% of col (e))	(g) Tax on fund managers (lesser of 5% of col (e) or \$10,000)
	-				
	mn (f) Enter here and	on Part I, line 10	dun Port II. column (c		
Part II				Proration of Payments	
	(a) Name of fund manag		(b) Item no from Part I, col (a)	(c) Tax from Part I, col (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
	~				
_					
			EEA		Form 4720 (201

SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967)

See the instructions

Part I	Prohibited Benef	its and Tax Comput	ts and Tax Computation									
(a) Item number	(b) Date of prohibited benefit			(c) Description of	f benefit							
1	~											
2												
3												
4												
5	-				-							
(d) Amou	int of prohibited benefit	(e) Tax on prohibited (see ii	benefit (125% of col (onstructions)	1))		of applicable) (lesser of 10% of col 000) (see instructions)						
				_								
					**							
Part II	Summary of Tax	Liability of Donors,	Donor Advis	ors, Relate	ed Persons and P	roration of Payments						
	(a) Names of donors, donor related persons liable		(b) Item no from Part I, col (a)		rom Part I, col. (e) or orated amount	(d) Donor, donor advisor, or related persons total tax liability (add amounts in col. (c)) (see instructions)						
				·								
						-						
						-						
						<u> </u>						
	-											
						4						
Part III	Tax Liability of	Fund Managers and	Proration of	Payments	_ 							
	(a) Name of fund managers liabl		(b) item no from	(c) Tax f	from Part I, col (f) or	(d) Fund manager's total tax liability (add amounts						
			Part I, col (a)	pr	rorated amount	in col (c)) (see instructions)						
						-						
	-					1						
						4						
			I			1						

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2011

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 6 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organizations	s Complete Part III			
Nam	ne of organization			E	mployer identification number
O	clahoma Coalition Against Do	mestic Violence		•	73-1131211
Pa	rt I-A Complete if the organ	ization is exempt under sect	ion 501(c) or i	s a section 52	27 organization.
1	Provide a description of the organization	's direct and indirect political campaign	activities in Part I	<u>v</u>	
2	Political expenditures			. .	\$
3	Volunteer hours				•
Pa	rt I-B Complete if the organ	ization is exempt under sect	ion 501(c)(3).		
1	Enter the amount of any excise tax incur				\$
2	Enter the amount of any excise tax incur				• \$
3	If the organization incurred a section 495				
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV			·	
Pa		ization is exempt under sect		cept section 5	501(c)(3).
1	Enter the amount directly expended by the			,	
	activities				> \$
2	Enter the amount of the filing organization	•		,	
	527 exempt function activities			· • • • • • • • • • • • • • • • • • • •	> \$
3	Total exempt function expenditures Add			,	
	line 17b				
4	Did the filing organization file Form 1120				
5	Enter the names, addresses and employ		· · · · · · · · · · · · · · · · · · ·	-	
	organization made payments. For each of	• •	•	•	
	the amount of political contributions rece	, , ,	•		
	as a separate segregated fund or a politi	ical action committee (PAC) If addition	ai space is neede	a, provide informat	tion in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organization funds If none, ento	on's contributions received and
					delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

cned			t Domestic vic			izii Page	_
Pa	rt II-A Complete if the organization	n is exempt un	der section 501	(c)(3) and filed	Form 5768 (ele	ction under	
	section 501(h)). Check in the filing organization belongs to	o on officetod arrays	(and list in Bort IV o	ach affiliated aroun n	namharis		
•	_ ,		•		Hellibel 3		
	name, address, EIN, expenses, a			•			
•	Check I if the filing organization checked l		•	piy	(a) Filing	(b) Affiliated	_
		bying Expenditure			organization's totals	group totals	
_	(The term "expenditures"	_		· ·	\$192 <u></u>	3.04p.1041.0	_
1a	Total lobbying expenditures to influence public	, :=		• • • • • • • •			_
b	Total lobbying expenditures to influence a legisl	, ,	, ,,				_
С	Total lobbying expenditures (add lines 1a and 1						_
đ	Other exempt purpose expenditures						
0	Total exempt purpose expenditures (add lines 1						_
f	Lobbying nontaxable amount Enter the amount	t from the following t	able in both			Ì	
	columns						_
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is :		-	
	Not over \$500,000	20% of the arr	ount on line 1e			, , -	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	ver \$1,500,000			
	Over \$17,000,000	\$1,000,000				l	
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)					
h	Subtract line 1g from line 1a If zero or less, ent	er-0					
i	Subtract line 1f from line 1c If zero or less, enter	er -0-					
j	If there is an amount other than zero on either li	ine 1h or line 1i, did	the organization file	Form 4720		-	
	reporting section 4911 tax for this year?			<u></u>		Yes N	lc
	(Some organizations that columns belo	made a section 50 w. See the instruc	tions for lines 2a th	t have to complete rough 2f on page 4			
	Lobb	ying Expenditures	During 4-Year Ave	raging Period			_
	Calendar year (or fiscal year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total	
	beginning in)						
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))		-				
С	Total lobbying expenditures						_
d	Grassroots nontaxable amount						
0	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots Johnwing expenditures						

Schedule C (Form 990 or 990-EZ) 2011 Oklahoma Coalition Against Domestic Violence 73-1131211 Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description Yes No **Amount** of the lobbying activity. During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Х Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X X Х Publications, or published or broadcast statements? X Direct contact with legislators, their staffs, government officials, or a legislative body? X X 22,169 X Other activities? 22,169 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Х If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		
	political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV	Supplemental Information	

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

2011

Open to Public

Employer identification number Name of the organization 73-1131211 Oklahoma Coalition Against Domestic Violence Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other _____ Yes purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 🗌 Yes 🔲 No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

.•	•					
Sched	ule D (Form 990) 2011 Oklahoma Coalit	non Against I	omestic Viol	ence	73-1131	211 Page 2
Pa	t III Organizations Maintaining	Collections of	Art, Historical	Treasures, or C	ther Similar As	sets (continued)
3	Using the organization's acquisition, accession,					
	collection items (check all that apply)					
а	Public exhibition	d 🗌 Loa	n or exchange prog	rams		
b	Scholarly research	e ☐ Oth	er			
c	Preservation for future generations			-		
4	Provide a description of the organization's colle	ctions and explain h	ow they further the	organization's exemp	ot purpose in	
	Part XIV					
5	During the year, did the organization solicit or re	eceive donations of	art, historical treasu	res, or other similar		
	assets to be sold to raise funds rather than to b	e maintained as par	t of the organization	n's collection?	<u></u>	. Tes No
Pai	rt IV Escrow and Custodial Arra	ingements. Con	nplete if organizatio	n answered "Yes" to	Form 990,	
	Part IV, line 9, or reported an amount	nt on Form 990, Parl	X, line 21			
1a	Is the organization an agent, trustee, custodian	or other intermedial	y for contributions	or other assets not		
	ıncluded on Form 990, Part X?					🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part XIV ar	nd complete the folio	wing table			
					Amo	ount
C	Beginning balance			[_1	С	
d	Additions during the year			<u> 1</u>	d	
0	Distributions during the year			<u> 1</u>	е	
f	Ending balance			1	f	
2a	Did the organization include an amount on Form	n 990, Part X, line 2	19			. 🗌 Yes 📗 No
	If "Yes," explain the arrangement in Part XIV					
.Pa	rt V Endowment Funds. Complete	if the organization a	nswered "Yes" to F	orm 990, Part IV, line	10	,
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					5 cm - 8 5 cm
¢	Net investment earnings, gains, and losses				<u> </u>	2 - 3 - 2 - 2 - 3 - 3 - 3
d	Grants or scholarships				 	
0	Other expenditures for facilities					家族的
	and programs					
f	Administrative expenses					
g	End of year balance				<u>l</u>	
2	Provide the estimated percentage of the current	it year end balance (line 1g, column (a))	held as		
а	Board designated or quasi-endowment	%				
b	Permanent endowment 9 %					
C	Temporarily restricted endowment	%				
	The percentages in lines 2a, 2b, and 2c should	equal 100%				
3a	Are there endowment funds not in the possess	ion of the organization	on that are held and	I administered for the		

	organization by					Yes	No
(T)					3a(i)		
b	b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?						
4	Describe in Part XIV the intended uses of the organization's endowment funds						
Pa	rt VI Land, Buildings, and Equipmer	nt. See Form 990, Part	X, line 10				
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Boo	k value	
1a	Land						

8,000

55,453

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Leasehold improvements

Equipment

4,857

10,263

15,120

3,143

45,190

Page 3

Oklahoma Coalition Against Domestic Violence

Part VII Invest	ments - Other Securities. Se	e Form 990, Part X, line 12				
	on of security or category	(b) Book value	(c) Method of valuation Cost or end-of-year market			
	ing name of security)		Cost of end-of-year market	value		
(1) Financial derivatives						
(2) Closely-held equity int	erests					
(3) Other						
(A)						
(B)						
(C)		· · · · · · · · · · · · · · · · · · ·				
(D)						
(E)		·				
(F)	····					
(G)						
(H)						
(i) Total (Column (b) must equal F	form 990, Part X, col (B) line 12)					
		e Form 990 Part Y line 13				
	ments - Program Related. Se					
(a) Descri	ption of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value			
(1) (2)		 				
(3)		- 44				
(4)						
(5)			 			
(6)			-			
(7)		.,	-			
(8)				**		
(9)				· · · · · · · · · · · · · · · · · · ·		
(10)						
	Form 990, Part X, col (B) line 13)					
	Assets. See Form 990, Part X, line	15	1 · · · · · · · · · · · · · · · · · · ·			
<u> </u>		escription		(b) Book value		
(1) Rent deposits	3			980		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Column (b) must	equal Form 990, Part X, col (B) line 15	<u>)</u>	<u> </u>	980		
Part X Other L	iabilities. See Form 990, Part X, Irr	ne 25				
1. (a) D	escription of liability	(b) Book value				
(1) Federal income tax						
(2) Due to Govern		83,443		•		
(3) Accrued compo	ensated absences	15,640	<u> </u>			
(4)		· · · · · · · · · · · · · · · · · · ·				
(5)			,			
(6)						
(8)						
(9)						
(10)						
(11)						
Total (Column (b) must equal	Form 990, Part X, col (B) line 25)	99,083	3 ', '			

ched	ule D (Form 990) 2011 Oklahoma Coalition Against Domestic Violence	73-1131211	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial St	<u>atements</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	<u> </u>	
а	Net unrealized gains on investments	_	
b	Donated services and use of facilities		
C	Recovenes of prior year grants		
d	Other (Describe in Part XIV)		
0	Add lines 2a through 2d	. 2е	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	2.0	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	. *	
C	Add lines 4a and 4b		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pá	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
đ	Other (Describe in Part XIV)		
8	Add lines 2a through 2d	. 20	
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	. 4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	
Pa	rt XIV: Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b	b	
and	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete)	
his	part to provide any additional information		
			_
			-

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number 73-1131211 Oklahoma Coalition Against Domestic Violence 01. Form 990 governing body review (Part VI, line 11) The Funding and Finance Committee reviewed the 990 prior to filing 02. Officer, director, etc mailing address (Part VI, line 9) All officers and directores can be reached at the Organization's mailing address 03. Conflict of interest policy compliance (Part VI, line 12c) In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the Steering Comm. or Exec. Comm. Any member of the Steering Comm. may recuse himself or herself at any time from involvement in any decision or discussion in which he or she has or may have a conflict of interest. If the Board or Exec. Comm., has cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall afford the member an opportunity to explain the alleged failure to disclose. If, after further investigation, the the Steering or Exec. Comm. determines the member has failed to disclose a conflict, disciplinary and corrective action will be taken. 04. CEO, executive director, top management comp (Part VI, line 15a) The Chair of the Personnel Committee, in coordination with the Personnel Committ and Chair of Funding and Finance, is responsible for the recruitment, hiring, termination, supervision, and evaluation of teh Executive Director. 05. Other officer or key employee compensation (Part VI, line 15b The Executive Director is responsible for the recruitment, hiring, termination,

supervision, and evaluation of all other staff.