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Form 990

Return of Organization Exempt From Income Tax

. | 2

OMB No. 1545-0047

Open to Public

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

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

For the 2012 calendar year, or tax year beginning 2012, and ending 20 D Employer identification number C Name of organization OK Foundation for Career & Technology Education, Inc. Check if applicable: Doing Business As 23-7085697 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change 405-377-2000 Initial return 1500 W 7th Avenue City, town or post office, state, and ZIP code Terminated G Gross receipts \$ Amended return Stillwater, OK 74074 H(a) Is this a group return for affiliates?
Yes No Application pending F Name and address of principal officer Kent Burris, Chairman H(b) Are all affiliates included? ☐ Yes ☑ No 501(c)(3) If "No," attach a list. (see instructions) 501(c) () ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ H(c) Group exemption number ▶ Form of organization: Corporation Trust Association ☐ Other ▶ L Year of formation M State of legal domicile: OK Part I Briefly describe the organization's mission or most significant activities: Provide scholarships to students seeking a job in a career and technology program of study. Provides support to the Oklahoma Career Tech system. Sygnue | MActigities Argovernance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 35 4 Number of independent voting members of the governing body (Part VI, line 1b) 35 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 15 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h). 3,869.25 188,608.06 9 Program service revenue (Part VIII, line 2g) 19,996.00 211,106.77 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 65,430.30 38,958.20 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 80.00 ·Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 274,034.36 254,014.22 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 12,000.00 12,000.00 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 Salaries, other compensation, employee benefits, (Part 1X, column (A), lines 5-10) 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 19 a 711ct, 11f=24e) 17 206,108.67 222,523.00 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)
Revenue less expenses. Subtract line 18 from line 12 18 218,108.67 234.523.00 19 55,925.69 19,491.22 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,839,753.16 1,859,244.38 21 Total liabilities (Part X, line 26) . 0.00 0.00 22 Net assets or fund balances. Subtract line 21 from line 20 1,839,753.16 1,859,244.38 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check I If Paid self-employed Preparer Firm's EIN ▶ Firm's name Use Only Phone no Firm's address ▶

☐ Yes ☐ No

May the IRS discuss this return with the preparer shown above? (see instructions)

	(2012) Page
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
'	Provide scholarships to students seeking a job in a career and technology program of study. Provide support to the Oklahoma
	Career Tech system.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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 measured bexpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 210,107.13 including grants of \$) (Revenue \$ 211,106.77)
	Scholarships: Awarded to students for academic achievement and also provided to adult students for continuing education at a
	career and technology center. Scholarships also awarded to students seeking a career as a Ag Education teacher.
	Golf Tournament: Funds raised are used to support scholarships for students seeking a teaching career in a career and
	technology education program of study.
4b	(Code:) (Expenses \$
	Grants/Travel to National Conferences: a \$2,000 grant was provided to each of the Oklahoma State Career Tech Student
	Organizations to assist with leadership activities for their memberships. Travel was also provided for the state advisors to attend
	their national leadership conferences.
4c	(Code:) (Expenses \$750.00 including grants of \$) (Revenue \$0.00)
	Hall of Fame: Ceremony to honor those individuals who have made significant contributions to the Oklahoma Career and Technology Education system.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$

) (Revenue \$

Part I	V 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	Ť		Ť
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		/
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		 	† * –
J	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u>-</u>		
0	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			/
-	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	<u> </u>	
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	١ ـ		,
		7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		,
_	complete Schedule D, Part III	8	-	/
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	١.		,
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	1		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	ļ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	134.	\$	1.
	VII, VIII, IX, or X as applicable.		5 4	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	ļ	✓
ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		L
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		1	
	Schedule D, Parts XI and XII	12a	<u> </u>	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	Ì		1
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Ľ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			١,
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			١.
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	ļ	/
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	ļ	[}
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓_
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>	1
20 a	·	20a	<u> </u>	1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	1	1

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Part	Checklist of Required Schedules (continued)			
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	Yes	No
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		√
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		√
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		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		√
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		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
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		√
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):	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		July :
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		√
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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,			
38	Part VI	37	✓	1
			n 990	(2012)

Form **990** (2012)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Officer if Correctine C contains a response to any question in this fact v	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a -0-			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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)?			1
h	If "Yes," enter the name of the foreign country: ▶	4a		V
b	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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			
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	✓	
b b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	√	
C	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			V
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		✓
h	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			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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		✓
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:			
''	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		✓
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C 140	Enter the amount of reserves on hand	145		/
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		✓
<u>b</u>	in res, mas it med a rount report these payments? If two, provide an explanation in Schedule O.	שרון		

Part '	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	truct	ions.
Casti	Check if Schedule O contains a response to any question in this Part VI	<u>····</u>	• •	
Section	on 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 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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓ ·
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3	-	1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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?	4 5 6 7a	✓ ✓	√ √
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		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b 9	✓	<u></u> ✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		√
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓
b 12a b	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? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	TAPE	✓
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 14 15	Did the organization have a written whistleblower policy?	13 14		✓
а	The organization's CEO, Executive Director, or top management official	15a		
b 16a	Other officers or key employees of the organization	15b		
b	with a taxable entity during the year?	16a 16b		✓
Secti	on C. Disclosure	1 100		L
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Lica Edon 1500 W 7th Avenue Stillwater, OK 74074: (405) 377, 2000	of the	•	

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orm	aan	(2012)

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Part VII	Compensation of Office	ers, Directors,	Trustees,	Key Employees,	Highest	Compensated E	mployees,	and
	Independent Contracto	re						

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

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

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

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

Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per	box,	unies	Pos neck is pe	rson	than out the thick the thi	n an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individua or directo		Officer		Highest compensated employee	Forme	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Kent Burris - Chairman	2 hrs			,						
3 C T Circle, Drumright, OK 74030	<u> </u>			✓		<u> </u>	┝	-0-	-0-	-0
(2) Will Williams - Vice Chairman	2 hrs	ł		/						
8312 N 99th East Avenue, Owasso, OK 74055		-		-	┢	<u> </u>	├	-0-	-0-	-0
(3) RL Beaty - Secretary/Treasurer 401 Hoppy Road, Stillwater, OK 74074	2 hrs	ł		/				-0-	-0-	-0
(4)	· · · · · · · · · · · · · · · · · · ·			Ť	-			-0-	-0-	
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	of fice Individua	unles er and	s pe	ition more	n oth st highest compensated to bot st employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fr related organizations (W-2/1099-MIS		(F) Estimated amount of other compensation from the organization and related organizations
(15)							8				+	
(16)												<u>-</u>
(17)												
(18)												
(40)												
											-	
(04)											_	
								_				
(22)												
(23)												
(24)					-							
(25)												
1b c d	Sub-total	VII, Sectio	n A		-			> > >	-0- -0-		-0- -0-	-0- -0- -0-
2	Total number of individuals (including but reportable compensation from the organic	t not limited	to th					e) w		ore than \$100		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc Schedule J	tor, o	uch	ind	vid	ıal					Yes No 3 ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$'	150,	,000	? /:	f "Ye	s," ·	complete Sch	nedule J for	such	4 /
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv	idual	5 夕
Section	on B. Independent Contractors								·····			
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	iress				<u>-</u>			(B) Description of s	ervices	C	(C) ompensation
						_						
2	Total number of independent contractor) th	nose listed ab	ove) who	The second	

Form **990** (2012)

Dor	- V/III	Statement of Davis	.			****	rage U			
Par	VIII	Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII								
		Check if Schedule O Contains a res	Joinse to any quest	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
इ इ	1a	Federated campaigns 1a	1							
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		•						
s, G	С	Fundraising events 10	;							
Sift lar,	d	Related organizations 10	d							
ž, E	е	Government grants (contributions)								
tior er S	f	All other contributions, gifts, grants,								
혈美		and similar amounts not included above 1								
d d	g	Noncash contributions included in lines 1a-1f: \$	+							
<u>2 g</u>	h	Total. Add lines 1a-1f	Business Code	3,869.25						
Program Service Revenue	١ ـ	5 · · · ·	Business Code							
eve	2a	Scholarships		193,441.77			193,441.77			
8	b	Golf Tournament	-	17,665.00			17,665.00			
Ž	6		•				 			
တ္တ	d		•							
<u>Tar</u>	e f	All other program service revenue.		·			<u> </u>			
Jo Jo	g	Total. Add lines 2a–2f		211,106.77		I				
- -	3	Investment income (including div	idends, interest.	211,100.77						
•			▶	38,958.20			38,958.20			
	4	Income from investment of tax-exempt	bond proceeds ▶	33/333.23			00/000:20			
	5					 				
		Royalties	(II) Personal							
	6a	Gross rents								
	b	Less: rental expenses		ì						
	С	Rental income or (loss)		_						
	d	Net rental income or (loss)								
	7a	Gross amount from sales of (i) Securities	(ii) Other							
•		assets other than inventory								
	ь	Less: cost or other basis								
		and sales expenses .								
	С	Gain or (loss)					<u></u>			
	d	Net gain or (loss)	. <u> </u>							
Other Revenue	8a	Gross income from fundraising events (not including \$								
Re∢		of contributions reported on line 1c).								
ē		See Part IV, line 18	a							
횽	1	'Less: direct expenses	b							
_		Net income or (loss) from fundraising				<u> </u>				
	9a	Gross income from gaming activities		İ						
		See Part IV, line 19	a							
		Less: direct expenses	b				ļ			
		Net income or (loss) from gaming a					 			
	10a	Gross sales of inventory, less				1				
	١.	returns and allowances								
			b_							
	<u></u>	Net income or (loss) from sales of in	nventory ▶ Business Code							
	44-	iviiscellaneous rievenue	Dusiness Code			-	 			
	11a	Minallanaua	-	90.00						
	b	Miscellaneous	-	80.00			80.00			
	C d	All other revenue	·			<u> </u>	 			
	l e	Total. Add lines 11a-11d		80.00			 			
	12	Total revenue. See instructions.		254.014.22			254.014.22			

Form 990 (2012)	Page 10
Part IX Statement of Functional Expenses	
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
OL 1 YO L 1 L O L L'ANDRE DE LE CONTRACTOR DE LA CONTRACT	$\overline{}$

	Check if Schedule O contains a respon	se to any question	in this Part IX		<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	12,000.00	12,000.00		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	.2,000.00	,2,333,33		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) $$.				
7 8	Other salaries and wages				
9 10	Other employee benefits				
11 a	Fees for services (non-employees): Management				
b	Legal				
C	Accounting	1,200.00		1,200.00	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	287.59		287.59	
14	Information technology				
15 16	Royalties				
17	Travel	8,536.09	8,536.09		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0,330.09	0,330.03	-	
19	Conferences, conventions, and meetings .	577.19		577.19	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				·-
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	Scholarshine	202 574 22	202 574 00		
a b	Call Taxamamama	203,574.00	203,574.00		
C	Hall of Famo	6,533.13 750.00	6,533.13 750.00		
d	Miscellaneous	1,065.00	730.00	1,065.00	
e	All other expenses	.,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
25	Total functional expenses. Add lines 1 through 24e				
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)	234,523.00	231,393.22	3,129.78	

Form **990** (2012)

	990 (20 art X	·	<u> </u>	•	Page 11
	art A	Check if Schedule O contains a response to any question in this P	Part X		
	 -	Officer if Schedule O Contains a response to any question in this r	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	139,672.95	1	182,762.46
	2	Savings and temporary cash investments	1,700.080.21	2	1,676,481.92
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
S	5	Loans and other receivables from current and former officers, director trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under secti 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers a sponsoring organizations of section 501(c)(9) voluntary employees' beneficial organizations (see instructions). Complete Part II of Schedule L	nd ary	6	
Assets	7	Notes and loans receivable, net		7	
Ÿ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			1,859,244.38
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, director trustees, key employees, highest compensated employees, at the payable of t	nd		·
jab		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related this parties, and other liabilities not included on lines 17-24). Complete Part of Schedule D	ird t X	25	
	26	Total liabilities. Add lines 17 through 25		 == 	0.00
es –			and 0.50		0.00
Š	27	Unrestricted net assets	816,062.56	27	807,122.76
ala	28	Temporarily restricted net assets		28	007,122.70
Net Assets or Fund Balances	29	Permanently restricted net assets		1 1	1,052,121.62
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ a complete lines 30 through 34.			1,7002,121102
	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
ét	33	Total net assets or fund balances		33	1,859,244.38
~	34	Total liabilities and net assets/fund balances	1 839 753 16		1.859.244.38

Part	t 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)		254,014.22
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	234,523.00
3	Revenue less expenses. Subtract line 2 from line 1	. 3	19,491.22
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		1,839,753.16
5	Net unrealized gains (losses) on investments		
6	Donated services and use of facilities		
7	Investment expenses		,
8	Prior period adjustments		
9	Other changes in net assets or fund balances (explain in Schedule O)		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, I		
	33, column (B))	- 10	1,859,244.38
Part	t 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: 🗹 Cash 🔲 Accrual 📗 Other		
	If the organization changed its method of accounting from a prior year or checked "Othe	r," explain in	
*	Schedule O.	_	
2 a			2a √
:	If "Yes," check a box below to indicate whether the financial statements for the year were	compiled or	
	reviewed on a separate basis, consolidated basis, or both:		
_	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
b	The first of the second control of the secon		2b √
	If "Yes," check a box below to indicate whether the financial statements for the year were	audited on a	
	separate basis, consolidated basis, or both:		
	Separate basis Consolidated basis Both consolidated and separate basis	for accordant	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility of the audit, review, or compilation of its financial statements and selection of an independent		
	If the organization changed either its oversight process or selection process during the tax ye		2c ✓
	Schedule O.	ar, explain in	
2-		e eet forth in	
3a	the Single Audit Act and OMB Circular A-133?		
ь			
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo		3b
			Form 990 (2012)
			101111 000 (2012)

SCHEDULE'A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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. Name of the organization

Inspection **Employer identification number**

Oklat			hnology Education, Inc							085697	
Pai			rity Status (All orga			<u> </u>			nstruction	ons.	
The o	_	-	ation because it is: (Fo		_		-	-			
1			hes, or association of			ed in sec	tion 170	(b)(1)(A)(i).		
2			170(b)(1)(A)(ii). (Attac		-						
3											
4		earch organizatione, city, and stat		ction witr	ı a nospit	ai descri	pea in se	ction 17	U(D)(1)(A)	(III). Enter the	
5	-	*	the benefit of a colle	ao or uni	vorcity o	wood or	oporatod	by 2 00	voromon	tal unit described in	
•		o)(1)(A)(iv). (Com		ge or am	iversity O	Wiled Oi	operated	by a go	veninen	tal unit described in	
6			•	al unit de	ecribed in	eaction	170(h)(1	11/41/6/			
7											
-			(A)(vi). (Complete Par				. g			gonoral paole	
8	☐ A community	trust described i	n section 170(b)(1)(A)(vi). (Cor	nplete Pa	art II.)					
9	_		receives: (1) more that		-	·=	om contri	butions.	members	ship fees, and gross	
			d to its exempt funct								
			ent income and unre						n 511 ta	ex) from businesses	
	acquired by the	ne organization a	ifter June 30, 1975. Se	ee sectio	n 509(a)(2). (Com	plete Par	t III.)			
10	_	-	l operated exclusively		•	•					
11			nd operated exclusive								
			olicly supported organdescribes the type of								
				• •						~	
•	a ☐ Type I	b ☐ Type	II c Type II that the organization							tionally integrated	
-			ers and other than on								
	or section 509	•		0 0, 11101	o pasiioi,	Сарроп	ou organ		.00011000	000tion 000(u)(1)	
f			a written determination	on from	the IRS t	that it is	a Type	I, Type I	II, or Typ	oe III supporting	
		check this box								🗆	
g	Since August	17, 2006, has t	he organization accep	pted any	gift or co	ontributio	n from a	ny of the	•		
	following pers										
			ndirectly controls, eit						d in (ii) a	nd Yes No	
•	• •	•	ody of the supported	•						11g(i)	
		•	on described in (i) abo							11g(ii)	
h			a person described in ion about the support							11g(iii)	
	Name of supported	(ii) EIN	(iii) Type of organization		organization	1	ou notify	6.51	- 46-	(vii) Amount of monetary	
W	organization	(11) 2.114	(described on lines 1-9	in col (ii) lis	sted in your	the organ	nization in	organizat	s the tion in col.	support	
			above or IRC section (see instructions))	governing document?		col (i) of your support?			zed in the S.?		
			(300 mar donons)	Yes	No	Yes	No	Yes	No	1	
(A)											
<u> </u>											
(B)								}			
									<u> </u>		
(C)											
(D)	•										
					-	ļ		ļ			
(E)											
Tota	ni -)		1				

Part							•
	(Complete only if you checked th						alify under
Sooti	Part III. If the organization fails to	quality unde	er the tests iis	stea below, p	lease comple	te Part III.)	
	on A. Public Support	(a) 2009	(h) 2000	(a) 2010	(4) 2011	(6) 2012	(f) Total
Calen	dar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(i) iotai
1	membership fees received. (Do not include any "unusual grants.")						
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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.				1	L ,	
	on B. Total Support		T	1			
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4					<u> </u>	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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						
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	re			n, or fifth tax y		
	ion C. Computation of Public Support Public support percentage for 2012 (line			I 1 column (A)		14	%
14 15	• • • • • • • • • • • • • • • • • • • •		•			15	%
16a	Public support percentage from 2011 Schedule A, Part II, line 14						
b	331/3% support test-2011. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more,						or more, ► □
17a	10% or more, and if the organization me	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported					
b	15 is 10% or more, and if the organiza Explain in Part IV how the organization m	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization					
1Ω	Private foundation If the organization d					k this box and	

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.)

	Section A. Public Support									
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and membership fees									
	received. (Do not include any "unusual grants.")	235,233.03	235,304.13	154,614.81	208,604.06	214,976.02	1,048,732.05			
2	Gross receipts from admissions, merchandise									
	sold or services performed, or facilities furnished in any activity that is related to the									
	organization's tax-exempt purpose									
3.	Gross receipts from activities that are not an		-							
•	unrelated trade or business under section 513									
4	Tax revenues levied for the									
-	organization's benefit and either paid		İ							
	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	235,233.03	235,304.13	154,614.81	208,604.06	214,976.02	1,048,732.05			
	Amounts included on lines 1, 2, and 3	255,255.05	233,304.13	134,014.01	200,004.00	214,370.02	1,040,732.03			
	received from disqualified persons .									
b	Amounts included on lines 2 and 3				-					
U	received from other than disqualified									
	persons that exceed the greater of \$5,000									
	or 1% of the amount on line 13 for the year				1					
c	Add lines 7a and 7b						_			
8	Public support (Subtract line 7c from									
•	line 6.)		j				1,048,732.05			
Section	on B. Total Support	<u> </u>	البــــا		\		1,040,732.03			
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
9	Amounts from line 6	235,233.03	235,304.13	154,614.81	208,604.06	214,976.02	1,048,732.05			
10a	Gross income from interest, dividends,	200,200.00	233,004.13	104,014.01	200,004.00	214,070.02	1,040,702.00			
104	payments received on securities loans, rents,									
	royalties and income from similar sources .	60,257.18	56,213.51	28,787.12	65,430.30	38,958.20	249,646.31			
b		00,237.10	30,213.31	20,707.12	03,430.30	30,330.20	240,040.51			
	section 511 taxes) from businesses									
	acquired after June 30, 1975									
c	Add lines 10a and 10b	60,257.18	56,213.51	28,787.12	65,430.30	38,958.20	249,646.31			
11	Net income from unrelated business	00,237.10	30,213.31	20,707.12	03,430.30	30,330.20	243,040.51			
••	activities not included in line 10b, whether									
	or not the business is regularly carried on					_				
12	Other income. Do not include gain or									
	loss from the sale of capital assets									
	(Explain in Part IV.)					80.00	80.00			
13	Total support. (Add lines 9, 10c, 11,		-			30.00	30.00			
	and 12.)	295,490,21	291,517.64	183,401.93	274,034.36	254,014.22	1,298,458.36			
14	First five years. If the Form 990 is for the									
	organization, check this box and stop he	•			=					
Secti	on C. Computation of Public Support	rt Percentage	e							
15	Public support percentage for 2012 (line			3, column (f))		15	81 %			
16	Public support percentage from 2011 Sci		•			16	80 %			
	on D. Computation of Investment In			·						
17	Investment income percentage for 2012 (y line 13, colun	nn (f))	17	19 %			
18	Investment income percentage from 201	1 Schedule A, f	Part III, line 17			18	20 %			
19a	331/3% support tests-2012. If the organ					ore than 331/39	6, and line			
	17 is not more than 331/3%, check this box									
b	331/23% support tests -2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/23%, and									
	line 18 is not more than 331/23%, check this box and stop here. The organization qualifies as a publicly supported organization									
20	Private foundation. If the organization d	id not check a	box on line 14,	19a, or 19b, c	heck this box	and see instruc	ctions 🕨 🔲			
	Schedule A (Form 990 or 990-F7) 2012									

Schedule A (F	Form 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
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	• `	·
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	·····	
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		·

SCHEDULE O' (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization Employer identification number Oklahoma Foundation for Career & Technology Education, Inc 23-7085697 Part VI, #6 and 7a - the organization has members who meet on an annual basis. All business is approved during this meeting. Part VI #11 and Part XI #2c - the organization has a Finance Committee that prepares the budget each year. The audited financial statements are presented to the board members at the annual meeting. Members must vote to approve both items.