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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

AF	or the	2013 calendar year, or tax year beginning and endir	ing		
B c	heck if	C Name of organization		D Employer identifi	cation number
X	Addres change Name change	OKLAHOMA SPEAKER S BALL, INC		20-2	018083
	Initial return Termin ated	Number and street (or P.O. box if mail is not delivered to street address) Room	m/suite	E Telephone numbe	
\vdash	Amend			G Gross receipts \$	496,880.
	Applic			H(a) Is this a group re	
	pendir	F Name and address of principal officer.ROBERT G. MCCAMPBELL		for subordinates	
		20 N. BROADWAY, STE 1800, OKC, OK 73102		H(b) Are all subordinates in	
	24.046	mpt status 501(c)(3) X 501(c) (4) 4 (insert no.) 4947(a)(1) or 500 cmpt status 501(c)(3) X 501(c) (4) 4 (insert no.) 500 cmpt status 501(c)(3) 501(c) (4) 4 (insert no.) 501(c) (4) 4 (insert no.) 501(c) (4) 5 (insert no.) 501(c) (4) 5 (insert no.) 501(c) (4) 5 (insert no.) 501(c) (5 (insert no.) 501(c) (6 (527		list (see instructions)
		e: WWW.OKSPEAKERSBALL.COM		H(c) Group exemptio	
			L Voor o		A State of legal domicile: OK
	rt I	Summary	L Teal C	n tormation. 2004 N	A State of legal domicile. OK
		Briefly describe the organization's mission or most significant activities THE PUR	DDOG.		DDODAMION
<u>S</u>		IS TO ORGANIZE AND EXECUTE AN ANNUAL BALL T			
204 divities & Governance					
ver		Check this box I if the organization discontinued its operations or disposed o	or more	1	
Ĝ		Number of voting members of the governing body (Part VI, line 1a)		3	5
~ઇ		Number of independent voting members of the governing body (Part VI, line 1b)		. 4	4
ţį		Total number of individuals employed in calendar year 2013 (Part V, line 2a)	•	5	0
_ ; <u>5</u>		Total number of volunteers (estimate if necessary)		6	6
6 6		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	a	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
ר ש		Donaturbushanan anada wanda (Da AV(III. Las Ala)		Prior Year	Current Year
re		Contributions and grants (Part VIII, line 1h)	-	540,601.	496,880.
≓Ę ∣		Program service revenue (Part VIII, line 2g)	<u> </u>	0.	0.
RêVehùe¹		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
∵		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	}	0.	0.
<u> </u>		lotal revenue add lines 8 through 11 (must equal Part VIII column (A), line 12)	-	540,601.	496,880.
Expenses		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	OSO		55,000.
ζ		Benefits paid to or for members (Part IX, column (A), line 4) AUG 0 8 2014	110	<u> </u>	<u>0.</u>
7 %		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	1 0.	0.
ë		Professional fundraising fees (Part IX, column (A), line 11e) OGDEN, W.	τ⊢	0.	0.
꿃		Total fallacing expenses (Fall 17, column (2), into 20)	<u>-</u>		-10 -11
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		342,395.	540,545.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	347,395.	595,545.
- 2	19	Revenue less expenses Subtract line 18 from line 12	- - -	193,206.	<u> <98,665.</u> >
Net Assets or Fund Balances		- · · · · · · · · · · · · · · · · · · ·	Beg	inning of Current Year	End of Year
Bass		Fotal assets (Part X, line 16)		230,735.	132,070.
		Total liabilities (Part X, line 26)		0.	0.
뙪	22 rt II	Net assets or fund balances Subtract line 21 from line 20		230,735.	132,070.
	_	Signature Block		-	
		ties of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pr	reparer r	nas any knowledge.	
٠.		Supertural superfrom		Date	
Sigr	- 1	AMICK BUOKE GOVERNMENT (MD D) CITE DD		Date	
Here	•	CHUCK THOMPSON, SECRETARY/TREASURER Type or print name and title			
			I Dr	ate Check	DTIN
בי בם		Print/Type preparer's name Preparer's signature	0	if L	PTIN
Paid		KEITH OSBORN, CPA		self-employe	
Prep		Firm's name FIDE BAILLY LLP		Firm's EIN	<u>45-0250958</u>
Use (UNIY	Firm's address 2402 WESTPORT DR			F 000 0005
		NORMAN, OK 73069-6336		Phone no. 4 0	5-292-2900

	1 990 (2013) OKLAHOMA SPEAKER'S BALL, INC	20-2018083	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:	, <u>,</u>	
	THE PURPOSE OF THE CORPORATION IS TO ORGANIZE AND EXECU	TE AN ANNUAL	
	BALL TO INAUGURATE THE CURRENT OKLAHOMA SPEAKER OF THE		
	CELEBRATE THE COMMENCEMENT OF THE OKLAHOMA LEGISLATIVE		ΨO
	BENEFIT A WORTHY OKLAHOMA 501(C)(3) CHARITABLE ORGANIZA		10
		TION.	
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	LX 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	LX 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	s measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers, the total expenses, a	and
	revenue, if any, for each program service reported.	, ,	
4a	(Code) (Expenses \$591,421. including grants of \$55,000.) (Rever	496	880.)
	ORGANIZED AND EXECUTED A GALA EVENT FOR APPROXIMATELY 6		
	CELEBRATE THE UPCOMING LEGISLATIVE SESSION. AS PART OF		
	RAISED \$55,000 FOR AN OKLAHOMA CHARITABLE ORGANIZATION.	BEGAN	
	PREPARATIONS FOR A SIMILAR EVENT FOR 2014.		
		_	
		-	
			
46		-	
4b	(Code) (Expenses \$) (Reven	ue \$)
			
			
		·	
4c	(Code) (Expenses \$) (Reven	ue \$)
			
	Other program services (Describe in Schedule O.)		
-t u		x	
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 591,421.		

Pa	rt IV 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		x
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		
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, Part III	5		x
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,	T -		<u> </u>
•	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	_ _ _		
Ū	Schedule D, Part III	8		Х
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 debt negotiation services?			1
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40	•	х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	_10		
• •	as applicable.			
_				
а	Part VI			v
ь		11a		X
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	441		v
С		11b		X
C	· · · · · · · · · · · · · · · · · · ·			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	X
ū	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	امما		v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			77
	Schedule D, Parts XI and XII	_12a		Х
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			7.7
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
D	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 foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_ <u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			77
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
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	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		<u> </u>
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>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X

20b

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	·		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		
	government 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 or 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		X
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		X
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 25a	24a		X
þ		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	 	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			l
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			l
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			i
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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	1	į	37
	of any of these persons? If "Yes," complete Schedule L, Part III	_27	-	X
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)			
a		28a		X
b		28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00		.
	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	00		x
04	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	If "Yes," complete Schedule N, Part I	24		х
22	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		A
32	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	30		- 43
04	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
J J	If "Yes," complete Schedule R, Part V, line 2	36		
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, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2013) OKLAHOMA SPEAKER'S BALL, INC Part V Statements Regarding Other IRS Filings and Tax Compliance Chèck if Schedule O contains a response or note to any line in this Part V

Vest No.		Check if Schedule O contains a response of note to any line in this Part V					ليك
Enter the number of Forms W-SQ included in line 1a. Enter O- if not applicable		•				Yes	No
Combing wormings to prize with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) withings to prize with beautiful provided to the payment of the mumber of employees reported on Form W3, Transmittal of Wage and Tax Statements, feel for the catendar year ending with or within the year covered by this return. If the sum of lines is and 2 as igneater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1.000 or more dumpt the year? 3 Did the organization have unrelated business gross income of \$1.000 or more dumpt the year? 3 Did the organization have unrelated business gross income of \$1.000 or more dumpt the year? 3 Did the organization have unrelated business gross income of \$1.000 or more dumpt the year? 3 Did the organization and year, did the organization have an interest in, or a signature or other authority over, a financial account; an foreign country (such as a bank account, securities account, or other financial account)? 3 Did the organization are foreign country? 3 Did with a finite requirements for Form TD FGO-221, Report of Foreign Bank and Financial Accounts, 4 Did any taxable party notify the organization that it was or is a party to a prohibited flax shelter transaction? 5 Did with the same party to a prohibited tax shelter transaction at any time during the tax year? 5 Did with organization and gross receives that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charitable contributions? 5 Did who organization are even a cultification are party to a prohibited flax shelter transaction? 5 Did the organization and party to promise the same party as a contribution and party for goods and services provided to the payor? 5 Did the organization that may receive deductible contributions under section 170(c). 6 Did the organization include with every solicitation an explosed or services provided? 7 Did the org	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	3			
gambling) winnings to prize winners? Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. Intel for the calendar year ending with or within the year covered by this return If it at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a D diff or organization have unrelated business gross income of \$1,000 or more during the year? 3a I at any time during the catendar 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)? 5a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5b If Yes, "enter the name of the foreign country," because the organization have an interest in, or a signature or other authority over, a financial accountry. 5b If Yes, "enter the name of the foreign country," because the organization and the vasor or is a party to a prohibited accountry. 5c See instructions for filing requirements for Form TDF 50/22 1, Report of Foreign Bank and Financial Accounts. 5c Was the organization a party to a prohibited tax sheller transaction? 5c If Yes, "do the organization related that was or is a party to a prohibited tax shelter transaction solic any contributions that were not tax deductible as chanitable contributions? 5c If Yes, "do the organization network payment in excess of \$75 made party by a prohibited tax shelter transaction or grits were not tax deductible? 5c If Yes, "do the organization encourage apyment in excess of \$75 made party by a prohibition and party for goods and services provided to the payor? 5c If Yes, "do the organization encourage apyment in excess of \$75 made party by a prohibition and party for goods and services provided to the payor? 5c If Yes, "do the organization encourag	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, led for the calendary year ending with or within the year covered by this return. 1 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 If the organization have unnelled business gross income of \$1,000 or more during the year? 3 If Yes, 1 has at field a Form 990 ff for this year? If You, 1 to line 3b, provide an explanation in Schedule O 4 If Yes, 1 the 1 file of the foreign country (such as a bank account, securities account, or other financial account)? 5 If Yes, 1 the reth ename of the foreign country: 5 If Yes, 1 the reth ename of the foreign country (such as a bank account, securities account, or other financial account)? 5 If Yes, 1 the reth ename of the foreign country: 5 If Yes, 1 the reth ename of the foreign country (such as a bank account, securities account, or other financial accounts. 5 If Yes, 1 the state of the foreign country (such as a bank account, securities account, or other financial accounts. 5 If Yes, 1 the state of the foreign country (such as a bank account, securities account, or other financial accounts. 5 If Yes, 1 the state of the organization file Form 8886-17? 6 If Yes, 1 the state of the organization file Form 8886-17? 6 Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 If Yes, 1 the organization that may receive deductible as charitable contributions and parity for goods and services provided? 7 Organizations that may receive deductible contributions under section 170(c). 8 If Yes, 1 indicate the number of Forms 88826 field during the year and property for which it was required? 9 If Yes, 1 indicate the number of Forms 88282 field during the year and pare	С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportab	le gamıng			
ties of or the calendary year ending with or within the year covered by this return Note. If the sum of lines 1s and 2s ignates than 250, you may be required to e-fife (see instructions) Note. If the sum of lines 1s and 2s ignates than 250, you may be required to e-fife (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 81. If "Yes," and if fled a Form 990-17 for this year? If "No," to line 3b, provide an explanation in Schedule O 82. A stary time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 82. A stary time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountly is a bank account, securities account in a foreign country. Implementation is secured as a count of the financial accounts. 83. A x the organization apparty to a prohibited tax shelter transaction at any time during the tax year? 84. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 85. A x to lime 5a or 5b, did the organization flee form 88861? 86. D x x to lime 5a or 5b, did the organization flee form 88861? 87. Organizations that may receive deductible contributions under section 170(c). 88. D if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 88. D if "Yes," did the organization return a personal property for which it was required to the form 88862? 88. D if "Yes," did the organization return any payment in excess of 375 made party as a contribution and partly for goods and services provided to the payor? 98. D if the organization receive a payment in excess of 375 made party as a contribution of the payor. 99. D if the organization receive a payment in excess of 375 made party as a contribution of year. 99. D if the organization receive a payment in exces		(gambling) winnings to prize winners?			1c		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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? 3b If Yes, "has it field a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendary year, did the organization have an interest in, or a signature or their authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b If "Yes," and the foreign country: ▶ See instructions for filing requirements for Form TD F 9022 1, Report of Foreign Bank and Financial Accounts. 5b Was the organization a party to a prohibited tax sheller transaction? 5c If "Yes," to line Sa or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c If "Yes," to line Sa or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c If "Yes," to line Sa or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c If "Yes," to line Sa or 5b, did the organization that it was or is a party to a prohibited as shell that such contributions or gifts were not tax deductible? 6c If "Yes," to lide the organization module with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," did the organization neture a payment in excess of \$75 made partily as a contribution on an party for goods and services provided to the payor? 7b If "Yes," did the organization neture a payment in excess of \$75 made partily as a contribution on an expresses statement that such contributions or gifts were not tax deductible? 6c If Yes," an include the number of Forms 8282 filed during the year. 6d If Yes, "indicate the number of Forms 8282 filed during the y	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return	2a	0			
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e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? h If the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter. a 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 Section 501(c)(12) organizations. Enter: a 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) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 13b Is the organization licensed to issue qualified health plans in more than one state? 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 in more than one states in which the organization is licensed t	Ь		7.4		,,,		
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		1 100, That it mod a form 120 to report these payments: If 140, provide an explanation in schedule				990	20131

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}
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 1a5			
	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 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2		х
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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		X
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		x
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			
9	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 Code)	, ,		
	, , , , , , , , , , , , , , , , , , , ,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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	1	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
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	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			•
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OK			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d fınar	icial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	tion 🕨		
	SARAH SMITH - 405-795-0588			
	1725 GREENBRIAR DRIVE, NORMAN, OK 73072			

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

Check if Schedule O contains a response or note to any line in this Part VII

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 organiz	(C)					ıısaı			(E)	
(A) Name and Title	(B) Average			Pos	ıtıor			(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per					than is bot		compensation	compensation	amount of
	week	offic	cer ar	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	i di	يو			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		, s	bens	·	(W-2/1099-MISC)		organization
	organizations below	ual tr	le ua		l ge	yee y				and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			Organizations
(1) CHUCK THOMPSON	0.30									
SECRETARY/TREASURER		X		X		<u> </u>	Ļ.,	0.	0.	0.
(2) LINDA K. HOLLMAN	10.00					ŀ				
DEPUTY TREASURER		X		Х		_	_	19,050.	0.	0.
(3) MARIAN M. FREE	10.00									
EXECUTIVE BALL DIRECTOR		X		X				19,000.	0.	0.
(4) ROBERT G. MCCAMPBELL	1.00					ŀ				
PRESIDENT		X		Х		<u> </u>		0.	0.	0.
(5) KAREN BURGESS	0.30									
DIRECTOR		X						0.	0.	0.
(6) ROBYN ELLIOTT	0.30									
DIRECTOR		X						0.	0.	0.
(7) MARK LIOTTA	0.30									
VICE PRESIDENT	_	X		X		_		0.	0.	0.
(8) SARAH SMITH	10.00									
DEPUTY TREASURER		X	_	X	<u> </u>	Ļ _	L.	0.	0.	0.
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\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

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Га	I L V	1111	-			45 D- 1340			
		`	Check if Schedule O conf	tains a response	e or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines	nts, and nve 1f	496,880.				
9 g		h	Total. Add lines 1a-1f		•	<u>496,880.</u>			
Program Service Revenue		a b c d			Business Code			P	
Pro		e	All other program service reve						-
_		ī a	Total. Add lines 2a-2f	enue					
	3	я_	Investment income (including other similar amounts)		rest, and				
	4 5		Income from investment of ta Royalties	x-exempt bond	proceeds				
	5		noyames	(ı) Real	(II) Personal			_	
			Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	V · · · · ·					
		b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securities	(II) Other	į			
Other Revenue			Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of	P				:
oth			Less direct expenses	b	·				
-			Net income or (loss) from fund	-	<u> </u>				
		b	Gross income from gaming ac Part IV, line 19 Less direct expenses	a b					
			Net income or (loss) from gan Gross sales of inventory, less	-					· · · · · · · · · · · · · · · · · · ·
		b	and allowances Less: cost of goods sold Net income or (loss) from sale	a b					
			Miscellaneous Revenu		Business Code				
	11	а							
		b							
		С							
		d	All other revenue						
		е	Total. Add lines 11a-11d		▶ [L		

496,880

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).	
	. Check if Schedule O contains a respon	nse or note to any line in (A)		(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		ı		
	organizations in the United States. See Part IV, line 21	<u>55,000.</u>	55,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,			j	
	organizations, and individuals outside the				
	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				
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	Other salaries and wages		·		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		_	-	
10	Payroll taxes				
11	Fees for services (non-employees)	20.050	20.050		1
a	Management	38,050.	38,050.		
b	Legal	2 650			
С	Accounting	3,650.		3,650.	
d	, , ,				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	· -			
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				-
12	Advertising and promotion	1 1 1		121	
13	Office expenses	131.		131.	
14	Information technology			 .	<u></u>
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
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 0.)				
а	BALL EXPENSE - ENTERTAI	256,056.	256,056.		
b	BALL EXPENSE - CATERING	113,772.	113,772.		
C	BALL EXPENSE - DECORATI	77,449.	77,449.		
d	PRINTING AND MAILING	22,690.	22,347.	343.	
	All other expenses	28,747.	28,747.		
25	Total functional expenses. Add lines 1 through 24e	595,545.	591,421.	4,124.	0.
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 (2013)
Part X Balance Sheet

		rt X (A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	230,735.	_1	132,070
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, director	s,		
ľ	trustees, key employees, and highest compensated employees. Comp	plete		
- 1	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as define	ed under		
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and co	ntributing		
	employers and sponsoring organizations of section 501(c)(9) voluntary	•		
2	employees' beneficiary organizations (see instr). Complete Part II of Si	ch L .	6	
7	Notes and loans receivable, net		7	
8 1	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 10a		i i	
Ь	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)	230,735.	16	132,070
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	
22	Loans and other payables to current and former officers, directors, tru	stees,		
22	key employees, highest compensated employees, and disqualified pe			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	. •
24	Unsecured notes and loans 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 Par	t X of		
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
		and		
,	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	230,735.	27	132,070
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117 (ASC 958), check here			
5	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
27 28 29 30 31 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	230,735.	33	132,070
34	Total liabilities and net assets/fund balances	230,735.	34	132,070
				Form 990 (2013

	990 (2013) OKLAHOMA SPEAKER'S BALL, INC	20-201	8083	Page 12
Pa	rt XI Reconciliation of Net Assets		_	
	Check if Schedule O contains a response or note to any line in this Part XI			
	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,880.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>5,545.</u>
3	Revenue less expenses Subtract line 2 from line 1	_3		3,665.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	230	<u>,735.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities .	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	132	<u>,070.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u>
				Yes No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	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	Were the organization's financial statements audited by an independent accountant?		2b	X
	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			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	1 1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt		
	Act and OMB Circular A-133?		3a	<u> </u>
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	990 (2013)

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Attach to Form 990.

OMB No 1545-0047	2013	O. 4. D. 4.1.
OMB	2	Č

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

% X Schedule I (Form 990) (2013) **Employer identification number** 20-2018083 (h) Purpose of grant or assistance FOR USE AS NEEDED Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 50,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table INC (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) OKLAHOMA SPEAKER'S BALL, Enter total number of other organizations listed in the line 1 table 46-1782778 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government OKLAHOMA CITY, OK 73102 105 N. HUDSON STE. 650 Name of the organization 111 PROJECT Part I Part II

Page 2 Schedule I (Form 990) (2013) (f) Description of non-cash assistance 20-2018083 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant 26 (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2013) 332102 10-29-13 Part III

SCHEDULE 0

(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.

2013
Open to Public

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number OKLAHOMA SPEAKER'S BALL, INC 20-2018083 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: OKLAHOMA SPEAKER OF THE HOUSE; TO CELEBRATE THE COMMENCEMENT OF THE OKLAHOMA LEGISLATIVE SESSION; AND TO BENEFIT A WORTHY OKLAHOMA 501(C)(3) CHARITABLE ORGANIZATION. FORM 990, PART VI, SECTION A, LINE 8B: EXPLANATION: THERE ARE CURRENTLY NO COMMITTEES ABLE TO ACT ON BEHALF OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND REVIEWED AT LEAST BY THE TREASURER AND CHAIRMAN. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: THE POLICY COVERS ALL BOARD MEMBERS AND EXECUTIVE DIRECTORS. CONFLICTS ARE REVIEWED AND DETERMINED BY THE CHAIRMAN OF THE BOARD. CHAIRMAN HAS A CONFLICT, IT IS REVIEWED AND DETERMINED BY THE REMAINING BOARD MEMBERS. A PERSON WITH A CONFLICT HAS TO RECUSE HIM/HERSELF FROM ANY INVOLVEMENT WITH THAT PARTICULAR MATTER. FORM 990, PART VI, SECTION B, LINE 15A: EXPLANATION: EXECUTIVE DIRECTOR IS THE ONLY POSITION LISTED ABOVE FOR WHICH COMPENSATION IS RECEIVED. THE EXECUTIVE DIRECTORS COMPENSATION IS REVIEWED AND APPROVED EACH YEAR BY THE BOARD OF DIRECTORS. THE REVIEW INCLUDES THE CHAIRMAN OF THE BOARD COMPARING THE EXECUTIVE DIRECTORS COMPENSATION TO

OTHER SIMILAR ORGANIZATIONS IN OKLAHOMA. THE BOARD ADOPTED A COMPENSATION

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013)

332211 09-04-13

Schedule O (Form 990 or 990	D-EZ) (2013)		Page 2
Name of the organization	OKLAHOMA SPEAKER'S	BALL, INC	Employer identification number 20-2018083
REVIEW POLICY	AS OF JULY 24, 2012		
FORM 990, PART	VI, SECTION C, LIN	Œ 19:	
EXPLANATION: T	HE GOVERNING DOCUME	NTS AND CONFLICT OF IN	TEREST POLICY ARE
PUBLICLY AVAIL	ABLE UPON REQUEST T	O OKLAHOMA SPEAKERS BA	LL, INC. FINANCIAL
STATEMENTS ARE	PUBLICLY FILED WIT	H THE OKLAHOMA ETHICS	COMMISSION AND ARE
MADE AVAILABLE	ONLINE BY THE COMM	IISSION.	
			·

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print OKLAHOMA SPEAKER'S BALL, INC 20-2018083 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your P.O. BOX 1524 return See City, town or post office, state, and ZIP code For a foreign address, see instructions instructions NORMAN, OK 73070-1524 0 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 SARAH SMITH The books are in the care of ► 1725 GREENBRIAR DRIVE - NORMAN, OK 73072 Telephone No ► 405-795-0588 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2014, to file the exempt organization return for the organization named above. The extension is for the organization's return for. ► X calendar year 2013 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit Balance due, Subtract line 3b from line 3a. Include your payment with this form, if required,

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 323841 12:31-13

instructions.

by using EFTPS (Electronic Federal Tax Payment System). See instructions

Form 8868 (Rèv. 1-2014)

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment