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Form **990** 

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

▶ Do not enter Social Security numbers on this form as it may be made public.

Open to Public

	nal Reveni	ue Service	► Information a	bout Form 990 and its in	nstructions is at	www.irs.ge	ov/form99	0.	Inspec	tion	
A	For the	2013 cale	ndar year, or tax year begi			nd ending		, 20			
В	Check if	applicable	C Name of organization OK Fo	undation for Career & T	echnology Edu	cation Inc		D Employer identification number			
	Address	change	Doing Business As						23-7085697		
	Name ch	ange	Number and street (or P O bo	ox if mail is not delivered to st	reet address)	Room/suite		E Telephor	ne number		
	Initial retu	um	1500 W 7th Avenue						405-377-2000		
	Terminat	ed	City or town, state or province	e, country, and ZIP or foreign	postal code						
	Amended	d return	Stillwater, OK 74074					<b>G</b> Gross re	eceipts \$		
	Applicati	on pending	F Name and address of principa	l officer			H(a) is this a g	roup return for	subordinates? Yes	s 🗸 No	
	•						1		s included? 🔲 Yes		
ī	Tax-exer	npt status.	✓ 501(c)(3)	01(c) ( ) ◀ (insert no )	4947(a)(1) or	527	If "N	lo," attach a	alist (see instruction	ons)	
J	Website			- · · · · · · · · · · · · · · · · · · ·			H(c) Group	exemption	number ▶		
ĸ			✓ Corporation ☐ Trust ☐ A	ssociation ☐ Other ►	L Yea	ar of formation			of legal domicile	OK	
	art I	Summ	<del></del>				1070				
	1		escribe the organization's	mission or most signifi	cant activities:	Provide s	cholarshi	os to stud	lents seeking a	iob in a	
æ	ļ -		d technology program of s							A	
Activities & Governance			a toomorea, program or s	and the state of t		<u></u>	<u> </u>				
E	2	Check th	is box ▶☐ if the organiza	ation discontinued its o	perations or di	sposed of	more than	25% of	its net assets.		
Š	3		of voting members of the					3		35	
8	4		of independent voting me			line 1b)				35	
es	5		mber of individuals emplo	•		-		5			
ž	6		nber of volunteers (estima	•				6		15	
Ąct	7a		elated business revenue					7a			
•	b		lated business taxable inc					7b		0	
	<del>  7</del> -	1101 011101			,	<del></del>	Pnor Ye		Current Y		
	8	Contribut	tions and grants (Part VIII	line 1h)		–		3,869.25	<del></del>	58,775.00	
Revenue	9		service revenue (Part VIII	•			2.	11,106.77		212,086.26	
ķ	10							38,958.20		45,411.59	
æ	11				•		·	80.00		40,411.00	
	11 Other revenue (Part-VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total evenue and lines 8,14 rough 11 (must equal Part VIII, column (A), line 12									316,272.85	
	13		nd similar amounts paid (					54,014.22 12,000.00	<u>`</u>	21,000.00	
	14		paid to or for members (F					12,000.00	<del>-</del>	21,000.00	
	15	Salaries	other compensation, empl	wee honofits (Part IX co	olumn (A) lines	5_10\					
Expenses	16a		onal fundraising fees (Part								
듗	b		draising lees (rait la				STATES IN				
翼	17		penses (Partix, column (					22,523.00		244,079.10	
	18		penses. Add lines 13–17 (			" ⊢		34,523.00		265,079.10	
	19	•	less expenses. Subtract	•				19,491.22		51,193.75	
	+	Nevenue	iess expenses. Subtract	inte to northine tz .	<u> </u>		ginning of Ci		End of Y		
sets or	20	Total acc	sets (Part X, line 16) .					59,244.38		910,438.13	
Ass	21		pilities (Part X, line 26)			· ·	1,0	0.00		0.00	
Net As: Fund Ba	22		ets or fund balances. Subt	ract line 21 from line 2	 n	· ·	1.0	59,244.38	10	910,438.13	
	art II		ture Block	1401 1110 21 110111 1110 21		<u></u>		JJ,E44.30		310,730.13	
	_		ary declare that I have examine	d this return, including accord	nnanving schedule	e and stateme	ents and to	the best of r	my knowledge an	d helief it is	
tru	ie, correc	t, and comp	lets Declaration of preparer (of)	er than officer) is based on all	Information of whi	ch preparer h	as any know	ledge,,	, /	,	
		<del>1 k (</del>	(HAN) ( H	10/1				12/10	1/2011	<del></del>	
Sig	an	Sign	nature of officer	ــــــــــــــــــــــــــــــــــــــ	,		b	77	y Caure		
	ere		is orden	myd Mon	nhar			•	•		
		Type	e or print name and title	min to		<del></del>					
		1,	pe preparer's name	Preparer's signature	<del></del> .	Date	<del></del>	1	PTIN		
	aid	1	Marian and a second					Check self-em	ıf		
	epare	1					 				
Us	se Onl							n's EIN ▶			
Mar	y the IC		address <b>&gt;</b> is this return with the prep	arer shown above? (se	e instructions)		Ph	one no	Ye	s No	
_	<u> </u>		ection Act Notice, see the s		inau delions)	0-4 411	11282Y	· · · ·		990 (2013)	
		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	war while conthoc			OM trail	11/8/1		ruim	ICU (3)	



Form 99	D (2013) ,Page 2
Part	
1	Check if Schedule O contains a response or note to any line 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 by expenses. 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 \$ 216,750.00 including grants of \$ ) (Revenue \$ 188,655.69)
	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 Tournmament funds are used to support scholarships for students seeking a teaching career in a career and
	technology education program of study.
4b	(Code: ) (Expenses \$ 21,000.00 including grants of \$ ) (Revenue \$ 0.00)
	Grants: A \$3,000 grant was provided to each of the Oklahoma State Career Tech Student Organizations to assist with
	leadership activities for their memberships.
,	
4c	(Code: ) (Expenses \$ 13,812.03 including grants of \$ ) (Revenue \$ 13,690.00)
	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 \$ )
4e	Total program service expenses > 251 562 03

art	Checklist of Required Schedules	-	V 1	Na
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	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	<b>✓</b>	
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		<u> </u>
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		
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
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 debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
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		1
	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		
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
	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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 .	11e		<b>√</b>
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	✓
14 a		14a	<u> </u>	1
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 99	0 (2013)		4	age <b>4</b>
Part	V Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	04	Yes	No
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	21		<b>✓</b>
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		<b>✓</b>
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		<b>√</b>
b c	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>✓</b>
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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		1
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):	· · · · · · · · · · · · · · · · · · ·	**************************************	* 4
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		1
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		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, -Part I	31	-	1
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		- <b>-</b> -
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 <i>If "Yes," complete Schedule R, Part I</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		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
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, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
		For	ա <b>990</b>	(2013)

Form **990** (2013)

orm 99	0 (2013)			Page 5
Part				
	Check if Schedule O contains a response or note to any line in this Part V			<u>.                                     </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1			. 1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		*. ×	1 1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		-	فنتا
_	reportable gaming (gambling) winnings to prize winners?	1c	<b>/</b>	
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-		ļ	1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		ļ
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		· •
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	30		<del> </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
<b>h</b>	If "Yes," enter the name of the foreign country:	70		1.3
b	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		•	1. 4
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		<del>                                     </del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	>	1	1.
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	1	-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<b>/</b>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	<b> </b>		1
	required to file Form 8282?	7c	17	<b>V</b>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	1 15	1
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		1
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		17
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		1	<u> </u>
_	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.		v.*.	
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	<b>✓</b>
10	Section 501(c)(7) organizations. Enter:		1 *	
а	Initiation fees and capital contributions included on Part VIII, line 12	4	,	1:
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	-	i,	
11	Section 501(c)(12) organizations. Enter:		<b>I</b>	
a	Gross income from members or shareholders	- ·	1. ^	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		1	
40-		120	<del> </del>	1
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	<del> </del>	+
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
13 a	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del>                                     </del>	+
a	Note. See the instructions for additional information the organization must report on Schedule O.	.50	-	+
ь	Enter the amount of reserves the organization is required to maintain by the states in which		1	1
-	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes " has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b		T

Part		and i		"No"
· ar c	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI			
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 1a 35			
	If there are material differences in voting rights among members of the governing body, or		4	
	if the governing body delegated broad authority to an executive committee or similar		٠,	
	committee, explain in Schedule O.	· ′	Ž 🖘,	
р 2	Enter the number of voting members included in line 1a, above, who are independent . <b>1b</b> 35 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	بمشهد	Port
3	Did the organization delegate control over management duties customarily performed by or under the direct			<del>  •</del>
_	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	✓	
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	✓	ļ
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	ļ.,	ļ <u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
_	The governing body?	8a	-	L
a b		8b	1	
9	Each committee with authority to act on behalf of the governing body?	- 60	<b>V</b>	ļ
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	1	1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.	)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
Ь	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		ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	, <sub>k</sub>	<b>/</b>
b 40-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10	. ** 3 . 3 .	12:5
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		-
_		120	├	├
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 -	-Did the organization have a written whistleblower policy?	13	<u> </u>	1
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	<b>V</b>
15	Did the process for determining compensation of the following persons include a review and approval by	,	2	,1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ر شف	
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b	<u> </u>	
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1.*2	
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?	1	<del>  ``</del>	-
_	· · · · · · · · · · · · · · · · · · ·	16a	ļ	✓,
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	1	
Sect	ion C. Disclosure	1 100	<del>-</del>	<del></del>
17	List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	(c)(3)	s only
	available for public inspection. Indicate how you made these available. Check all that apply.		,	
	☐ Own website ☐ Another's website ☑ 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 int	terest	polic	y, and
	financial 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 th	е	
	Organization: Lica Edon, 1500 W 7th Avenue, Stillwater, OK, 74074, (405)277, 2000			

_			•
P:	20	А	

Form	ററെ	1201	9

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

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 nor	any related	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee.	
(A) Name and Title	(B)  Average hours per week (list any hours for	(do n box, i	ot ch unles	Pos leck is pe d a d	ition more rson irecte	than on the street that the st	one an tee)	( <b>D)</b> Reportable	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) Kent Burris - Chairman 3 C T Circle, Drumright, OK 74030	2 hrs			✓				-0-	-0-		-0-
(2) Will Williams - Vice Chairman 8312 N 99th East Avenue, Owasso, OK 74055	2 hrs			1				-0-	-0-		-0-
(3) RL Beaty - Secretary/Treasurer	2 hrs			Ť							<u> </u>
401 Hoppy Road, Stillwater, OK 74074				✓			<u>.                                    </u>	-0-	-0-		-0-
(4)	T										
(5)								-			
(6)											
(7)											
(8)											
(9)							ļ.,				
(10)											
(11)			_								
(12)							L				
(13)											
(14)											

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average	box,	unles	Pos neck ss pe	rson	than o	an	(D) Reportable	(E) Reportable		(F) Estimated
		hours per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	d Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation ( related organization (W-2/1099-MI	s	amount of other compensation from the organization and related organizations
(15)												
(16)												
(17)												
(18)												
(19)								-				
(20)						-						
(21)												
(22)												
(23)												
(24)												
(25)			_	<u> </u>	:	<del>                                     </del>						
1b c d	Sub-total	VII, Section		•	•	•	· ·	<b>&gt; &gt; &gt;</b>	-0- -0-		-0- -0-	-0 -0 -0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited						e) w		ore than \$10		
3	Did the organization list any former of employee on line 1a? If "Yes," complete											Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150	,000	)? <i>[</i>	f "Ye	es, "				4
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue c	ompe	ensa	tion	ı fro	m an	y ur	_	zation or indi		5
Section	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Rej year.											
	(A) Name and business add	dress							(B) Description of	services	Co	(C) ompensation
								_				
								L				
2	Total number of independent contractor received more than \$100,000 of compen							o ti	hose listed ab	ove) who		

Part VIII		Statement of Revenue								
		Check if Schedule O contains a response	onse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaigns 1a  Membership dues 1b			TOVELIGE					
عَ ق	C	Fundraising events 1c		ĺ			1			
ifts ar A	d	Related organizations 1d					3			
S, E	e	Government grants (contributions) 1e		1						
Sil	f	All other contributions, gifts, grants,								
ž ž		and similar amounts not included above 1f	58,775.00							
اقع	g	Noncash contributions included in lines 1a-1f \$	**/*****							
Cor	h	Total. Add lines 1a-1f	>	58,775.00						
			Business Code		······································					
Jen 1	2a	Scholarships	-	175,776.26						
æ	ь	Golf Tournament		22,620.00						
ဋ	c	Hall of Fame		13,690.00						
ě	d									
Program Service Revenue	е						_			
gra	f	All other program service revenue .								
<u> </u>	g	Total. Add lines 2a-2f	▶	212,086.26						
	3	Investment income (including divide								
		and other similar amounts)	, L	45,411 59						
	4	Income from investment of tax-exempt both	nd proceeds▶ │							
	5	Royalties								
		(i) Real	(II) Personal							
	6a	Gross rents								
	ь	Less: rental expenses								
	С	Rental income or (loss)				ļ				
	_ d	Net rental income or (loss)								
	7a	Gross amount from sales of (i) Securities	(ii) Other							
	١.	assets other than inventory		1						
	b	Less: cost or other basis								
		and sales expenses .								
	C	Gain or (loss)								
	d	Net gain or (loss)	<u> ▶</u>							
venue	8a	Gross income from fundraising events (not including \$								
Other Rev		of contributions reported on line 1c).  See Part IV, line 18 a								
₹	Ь	Less: direct expenses b					<b></b>			
		Net income or (loss) from fundraising	events . ►		w. ·					
	9a	Gross income from gaming activities.  See Part IV, line 19 a								
	١.		<del>-</del>				1			
		Less: direct expenses <b>b</b> [  Net income or (loss) from gaming active	utios				<del>                                     </del>			
	100	Gross sales of inventory, less	/Ities P			<del> </del>	<del></del>			
	lua	returns and allowances a								
	.	Less: cost of goods sold b	<del></del>							
	D	Net income or (loss) from sales of inve	entory			-				
	<u>c</u>	Miscellaneous Revenue	Business Code			+				
	110					1				
	11a					<del>                                     </del>	<del>                                     </del>			
	b					<del>                                     </del>				
	٦	All other revenue		<del>                                     </del>	<del></del>					
	d	Total. Add lines 11a-11d	•			<del> </del>				
	12 e	Total revenue. See instructions		216 272 05		<u> </u>	<del> </del>			

	90 (2013)				Page 10
Part	IX Statement of Functional Expenses			· · · · · ·	
Section	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	l other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		🗆
	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	21,000.00	21,000.00		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> 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  Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits				
11	Fees for services (non-employees):				
а	Management				
b	Legal				<del> </del>
C	Accounting	1,400.00		1,400.00	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		E 100 8 1 4 5 3 6	・記事を ・/ とり続き	<u> </u>
f	Investment management fees				<u></u>
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	812.97		812.97	
14	Information technology				
15	Royalties				
16	Occupancy			<del></del>	
17 18	Travel	<u> </u>		_	
<u>.</u> io_	for any federal, state, or local public officials	·		_	
19	Conferences, conventions, and meetings	473.53		472.52	
20	Interest	473.33		473.53	
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			`	<b>,</b>
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			:	<i>,</i> *
а	Scholarshine	240 750 00	040 ==0 0=		*
b	Golf Tournament	216,750.00 9,740.57	216,750.00		
c	Hall of Fame	13,812.03	9,740.57 13,812.03		
d	Miscellaneous	1,090.00	13,012.03	1,090.00	
е	All other expenses	.,,,,,,,,		1,030.00	
25	Total functional expenses. Add lines 1 through 24e	265,079.10	261,302.60	3,776.50	
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)				

Pa	ırt X	Balance Sheet	<del></del> -		
		Check if Schedule O contains a response or note to any line in this Pa			🗆
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	182,762.46	1	153,527.51
	2	Savings and temporary cash investments	1,676,481.92	2	1,756,910.62
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
1	6	Loans and other receivables from other disqualified persons (as defined under section			1
l		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and		•	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ets	_	· · · · · · · · · · · · · · · ·		7	
Assets	7	Notes and loans receivable, net		8	<del></del>
	8	Inventories for sale or use		9	
	9 10a	Land, buildings, and equipment: cost or	·	<del></del> +	,
ĺ	·va	other basis. Complete Part VI of Schedule D		1	
	ь	Less: accumulated depreciation 10b	<del> </del>	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	<u></u>
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,859,244.38	16	1,910,438.13
	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	
ies	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and		\ \ \	
Ē		disqualified persons. Complete Part II of Schedule L		22	
Liabilities	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 Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.00	26	0.00
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	807,122.76	27	805,312.51
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	1,052,121.62	29	1,105,125.62
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
šše	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ϋ́	32	Retained earnings, endowment, accumulated income, or other funds .		32	<del></del>
Š	33	Total net assets or fund balances	1,859,244.38		1,910,438.13
	34	Total liabilities and net assets/fund balances	1,859,244,38	34	1,910,438.13 Form <b>990</b> (2013

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

Form **990** (2013)

За

**3b** 

#### SCHEDULE A (Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number Name of the organization Oklahoma Foundation for Career and Technology Education, Inc. 23-7085697 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **d** ☐ Type III–Non-functionally integrated **b** Type II c Type III-Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? . . . . . . . . . . . . . 11g(i) (ii) A family member of a person described in (i) above? . . . . . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) Is the organization (vii) Amount of monetary (ii) EIN (v) Did you notify (vi) Is the the organization in (described on lines 1-9 in col (i) listed in your organization in col support organization (i) organized in the US? above or IRC section governing document? col (i) of your support? (see instructions)) Nο Yes No Yes (A) (B) (C) (D) (E)

Total

Part	(Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	
Section	on A. Public Support	quality unde	er the tests its	stea below, p	iease comple	te Part III.)	<del></del>
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(u) 2000	(0) 2010	(0) 2011	(a) 2012	(e) 2013	(i) Total
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)		3 7 7 7 3 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	*	, , , ,		
		<del></del>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, , , , , , , , , , , , , , , , , , ,	* * *	*	
6 Secti	Public support. Subtract line 5 from line 4.  on B. Total Support	<u> </u>	1 * * *	<u> </u>			
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(i) Total
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 12 13	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc. <b>First five years.</b> If the Form 990 is for the	ne organizatio	n's first, secon			12	n 501(c)(3)
	organization, check this box and stop he		<u> </u>				▶ 🗆
	on C. Computation of Public Suppor						<del></del>
14 15	Public support percentage for 2013 (line 6					14	<u>%</u>
16a	Public support percentage from 2012 Sch 331/3% support test—2013. If the organiz					15 n% or more o	hook this
	box and <b>stop here</b> . The organization qua	lifies as a pub	licly supported	l organization		/3/0 Or 11101 <del>0</del> , C	. •
b	331/a% support test—2012. If the organ check this box and stop here. The organ	nization did no	ot check a box	x on line 13 o	r 16a, and line		or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "f organization	ets the "facts- facts-and-circ	-and-circumsta umstances" te:	inces" test, che st. The organiz	eck this box ar ation qualifies	nd <b>stop here. I</b> as a publicly s	line 14 is Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization or Explain in Part IV how the organization or supported organization	tion meets the neets the "fact	e "facts-and-cits-and	ircumstances" tances" test. 1	test, check the	nis box and <b>st</b> on qualifies as a	, and line <b>op here</b> . a publicly
18	Private foundation. If the organization di instructions	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

### 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.)

				,		<del>:'/</del>	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	235,304.13	154,614.81	208,604.06	214,976.02	270,861.26	1,084,360.28
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 to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						3333
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	235,304.13	154,614 81	208,604.06	214,976.02	270,861.26	1,084,360.28
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)		} <sup>*</sup> *				1,084,360.28
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	235,304.13	154,614.81	208,604.06	214,976.02	270,861.26	1,084,360.28
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	56,213.51	28,787.12	65,430 30	38,958.20	45,411.59	234,800.72
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	30,213.31	20,707.12	03,430 30	30,330.20	11.55	234,000.72
C	Add lines 10a and 10b	56,213.51	28,787.12	65,430.30	38,958.20	45,411.59	234,800.72
11	Net income from unrelated business 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, and 12.)	291,517.64	183,401.93	274,034.36	254,014.22	316,272.85	1,319,241.00
14	First five years. If the Form 990 is for the organization, check this box and stop he	ne organization	's first, secon	d, third, fourth	, or fifth tax ye		n 501(c)(3)
Secti	ion C. Computation of Public Suppor						
15	Public support percentage for 2013 (line 8			3, column (f))		15	82 %
16	Public support percentage from 2012 Scl	nedule A, Part I	II, line 15 .			16	81 %
	ion D. Computation of Investment In						
17	Investment income percentage for 2013 (	line 10c, colum	ın (f) divided b	y line 13, colur	mn (f))	17	18 %
18	Investment income percentage from 2012			•		18	19 %
19a	331/3% support tests - 2013. If the organ					ore than 331/39	6, and line
	17 is not more than 331/3%, check this box	and stop here.	The organizati	on qualifies as	a publicly supp	orted organizati	on . 🟲 🔽
b	33 <sup>1</sup> / <sub>3</sub> % support tests – 2012. If the organization 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this						31/3%, and
20	Private foundation. If the organization di	-	_	-		-	

Schedule A (I	chedule A (Form 990 or 990-EZ) 2013 Page <b>4</b>						
Part IV	Supplemental Information. 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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#### SCHEDULE O (Form 990 or 990-EZ)

### 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.

OMB No 1545-0047

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection				
ame of the organization	Employer identification number			
dahoma Foundation for Career and Technology Education, Inc	23-7085697			
rt VI, #6 and 7a - The organization has members who meet on an annual basis. All l	business is approved during this meeting.			
rt VI, #11 and Part XI, #2c - The organization has a Finance Committee that prepare	s the budget each year. The audited financial			
atements are presented to the board members at the annual meeting. Members mu	st vote to approve both items.			
<del>-</del>				
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