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Form 990

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2016

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](http://www.irs.gov/form990).

Open to Public Inspection

**A** For the 2016 calendar year, or tax year beginning , 2016, and ending , 20

**B** Check if applicable:  
☐ Address change  
☒ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization **UNITED WAY OF PAYNE COUNTY, INC**  
 Doing business as  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**109 E 9TH**  
 City or town, state or province, country, and ZIP or foreign postal code  
**STILLWATER, OK 74074**

**D** Employer identification no  
**73-0602756**

**E** Telephone number  
**(405) 377-2161**

**G** Gross receipts\$  
**961,111**

**F** Name and address of principal officer  
 H(a) Is this a group return for subordinates? ☐ Yes ☒ No  
 H(b) Are all subordinates included? ☐ Yes ☐ No  
 If 'No,' attach a list (see instructions)  
 H(c) Group exemption number

**I** Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ( ) (insert no ) ☐ 4947(a)(1) or ☐ 527

**J** Website **WWW.STILLWATERUNITEDWAY.ORG**

**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other **L** Year of formation **M** State of legal domicile **OK**

## Part I Summary

**Activities & Governance**

1 Briefly describe the organization's mission or most significant activities **UNITED WAY RAISES FUNDS TO SUPPORT/DISTRIBUTE TO 22 NON-PROFIT AGENCIES WHICH SERVE AND ASSIST IN EXCESS OF 40,000 PAYNE COUNTY RESIDENTS**

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) **3** **36**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** **36**

5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) **5** **3**

6 Total number of volunteers (estimate if necessary) **6** **829**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** **0**

7b Net unrelated business taxable income from Form 990-T, line 34 **7b** **0**

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	911,986	890,764
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,990	1,080
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	42,841	40,843
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	956,817	932,687
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	689,812	710,281
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	141,923	143,353
16a Professional fundraising fees (Part IX, column (A), line 11a)		0
16b Total fundraising expenses (Part IX, column (D), line 25)	46,434	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	57,173	64,789
18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	888,908	918,423
19 Revenue less expenses - Subtract line 18 from line 12	67,909	14,264

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,488,495	1,541,351
21 Total liabilities (Part X, line 26)	898,231	936,823
22 Net assets or fund balances - Subtract line 21 from line 20	590,264	604,528

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer **Shen Carter** Date **6/22/17**

Type or print name and title **Shen Carter**

**Paid Preparer Use Only**

Print/Type preparer's name **MEGAN M STONE** Preparer's signature **Megan M Stone** Date **05-17-2017** Check ☐ if PTIN self-employed **P00641369**

Firm's name **DUGGER & CO CPA'S PC** Firm's EIN **405-372-3909**

Firm's address **PO 1713 Stillwater OK 74076** Phone no

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2016)

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**Part 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

**UNITED WAY RAISES FUNDS TO SUPPORT/DISTRIBUTE TO 22 NON-PROFIT AGENCIES WHICH SERVE AND ASSIST IN EXCESS OF 40,000 PAYNE COUNTY RESIDENTS**

**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 ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as 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 \$ 784,822 including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**THIS ORGANIZATION DEVELOPS TEAMWORK AMONG THE SOCIAL AGENCIES OF THE STILLWATER, OKLAHOMA AREA IN THE INTEREST OF THE FINANCIAL SUPPORT OF SUCH AGENCIES AND THE EFFECTIVE PLANNING AND EXECUTION OF THE SOCIAL PROGRAMS OF THE COMMUNITY**

**4b** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4c** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4d** Other program services (Describe in Schedule O )

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses **784,822**

**Part 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	X
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	2	X
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 <b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . . .	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I . . . . .	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . .	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	8	X
9 Did the organization report an amount in Part X, line 21, 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	X
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	X
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 as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	11a	X
b 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	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX . . . . .	11d	X
e 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 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 Schedule D, Parts XI and XII . . . . .	12a	X
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	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	14a	X
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	X
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	X
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	X
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	X
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	X
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	X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .		X
<b>23</b> 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 . . . . .		X
<b>24a</b> 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 . . . . .		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .		X
<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 . . . . .		X
<b>26</b> 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 "Yes," complete Schedule L, Part II . . . . .		X
<b>27</b> 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 . . . . .		X
<b>28</b> 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) . . . . .		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . .		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . .		X
<b>c</b> 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 . . . . .		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . .		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . .		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . .		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . .		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I . . . . .		X
<b>34</b> 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 . . . . .		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .		X
<b>37</b> 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 . . . . .		X
<b>38</b> 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 . . . . .	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	<b>1a</b> 3		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b> 0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	X	
<b>2a</b> 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.	<b>2a</b> 3		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<b>2b</b>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	<b>3b</b>		
<b>4a</b> 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)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> 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?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> 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?	<b>7a</b>		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year.	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		X
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		X
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		X
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		X
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		X
<b>10 Section 501(c)(7) organizations.</b> Enter			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter			
<b>a</b> Gross income from members or shareholders.	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</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.	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand.	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	<b>14b</b>		

**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 instructionsCheck if Schedule O contains a response or note to any line in this Part VI ☒**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b> 36		
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>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b> 36		
<b>2</b> 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? . . . . .	<b>2</b>		X
<b>3</b> 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? . . . . .	<b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>	X	
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		X
<b>6</b> Did the organization have members or stockholders? . . . . .	<b>6</b>		X
<b>7a</b> 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? . . . . .	<b>7a</b>		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	<b>7b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .			
<b>a</b> The governing body? . . . . .	<b>8a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>		X
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	<b>9</b>		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code)

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>		X
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	<b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	<b>12c</b>	X	
<b>13</b> Did the organization have a written whistleblower policy? . . . . .	<b>13</b>	X	
<b>14</b> Did the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	X	
<b>15</b> 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? . . . . .			
<b>a</b> The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	X	
<b>b</b> Other officers or key employees of the organization . . . . .	<b>15b</b>	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>		X
<b>b</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? . . . . .	<b>16b</b>		

**Section C. Disclosure**

**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 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 interest policy, and financial statements available to the public during the tax year

**20** State the name, address, and telephone number of the person who possesses the organization's books and records **►**  
**SHERI CARTER (405) 377-2161, 109 E 9TH, STILLWATER, OK 74074**

**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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JORGE ATILES DIRECTOR		X						0	0	0
(2) SUZETTE BARTA DIRECTOR		X						0	0	0
(3) THOMAS COON DIRECTOR		X						0	0	0
(4) JAY CAFFEY DIRECTOR		X						0	0	0
(5) CASEY BILLINGSLEY DIRECTOR		X						0	0	0
(6) DARA BEASLEY DIRECTOR		X						0	0	0
(7) JACE DAWSON TREASURER		X		X				0	0	0
(8) ROBERTA DOUGLAS DIRECTOR		X						0	0	0
(9) PRECIOUS ELMORE-SANDERS DIRECTOR		X						0	0	0
(10) KEVIN FOWLER DIRECTOR		X						0	0	0
(11) CASEY BROWN DIRECTOR		X						0	0	0
(12) RANDY BROWN DIRECTOR		X						0	0	0
(13) MARY KAY JENNINGS DIRECTOR		X						0	0	0
(14) KEN EASTMAN DIRECTOR		X						0	0	0



**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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <u>PATRICIA HUFFMAN</u> DIRECTOR		X						0	0	0
(2) <u>CARRIE HULSEY-GREENE</u> DIRECTOR		X						0	0	0
(3) <u>STEVE O'NEIL</u> DIRECTOR		X						0	0	0
(4) <u>DAWN LINDSLEY</u> DIRECTOR		X						0	0	0
(5) <u>KAYLA ISAACS</u> DIRECTOR		X						0	0	0
(6) <u>CHIP PARKS</u> DIRECTOR		X						0	0	0
(7) <u>ANGELA PRADIA</u> PRESIDENT		X		X				0	0	0
(8) <u>LISA SMITH</u> DIRECTOR		X						0	0	0
(9) <u>MICAH SEXTON</u> DIRECTOR		X						0	0	0
(10) <u>STEVE SPRADLING</u> DIRECTOR		X						0	0	0
(11) <u>MITCH KILCRASE</u> DIRECTOR		X						0	0	0
(12) <u>LINDA MCPHERSON</u> DIRECTOR		X						0	0	0
(13) <u>CLEMENT WARD</u> VICE PRESIDENT		X		X				0	0	0
(14) <u>DENISE WEAVER</u> PRESIDENT ELECT		X						0	0	0

**Part VII****Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) COURTNEY REDDING DIRECTOR		X						0	0	0
(16) LEE DENNEY DIRECTOR		X						0	0	0
(17) PHILLIP GOODWIN DIRECTOR		X						0	0	0
(18) CARA PENCE DIRECTOR		X						0	0	0
(19) ANNIE SMITH DIRECTOR		X						0	0	0
(20) STEPHAN WILSON DIRECTOR		X						0	0	0
(21) JEREMY ZWEIACKER DIRECTOR		X						0	0	0
(22) LISA THOMAS DIRECTOR		X						0	0	0
(23) ELENA ATKINSON ADMINISTRATIVE ASSISTANT					X			27,420	0	0
(24) IVY HILL MARKETING DIRECTOR					X			35,629	0	0
(25) SHERI CARTER EXECUTIVE DIRECTOR						X		64,548	0	0
<b>1b Sub-total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								127,597	0	0
<b>2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization</b>									0	

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
<b>3</b>		X
<b>4</b>		X
<b>5</b>		X

**Section B. Independent Contractors**

- 1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
<b>2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization</b>		

**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 890,764				
	<b>g</b> Noncash contributions included in lines 1a-1f \$					
	<b>h</b> Total. Add lines 1a-1f		890,764			
<b>Program Service Revenue</b>	<b>2a</b> Business Code					
	<b>b</b>					
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g</b> Total. Add lines 2a-2f					
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		2,092	2,092	
<b>4</b> Income from investment of tax-exempt bond proceeds						
<b>5</b> Royalties						
<b>6a</b> Gross rents		(i) Real (ii) Personal				
<b>b</b> Less rental expenses						
<b>c</b> Rental income or (loss)						
<b>d</b> Net rental income or (loss)						
<b>7a</b> Gross amount from sales of assets other than inventory		(i) Securities (ii) Other	16,502			
<b>b</b> Less cost or other basis and sales expenses			17,514			
<b>c</b> Gain or (loss)			(1,012)			
<b>d</b> Net gain or (loss)			(1,012)	(1,012)		
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c)						
See Part IV, line 18		<b>a</b> 44,561				
<b>b</b> Less direct expenses		<b>b</b> 10,910				
<b>c</b> Net income or (loss) from fundraising events			33,651			33,651
<b>9a</b> Gross income from gaming activities						
See Part IV, line 19		<b>a</b>				
<b>b</b> Less direct expenses		<b>b</b>				
<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less cost of goods sold	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>			<b>Business Code</b>			
<b>11a</b> DAY OF CARING		6,500	6,500			
<b>b</b> MISCELLANEOUS		692	692			
<b>c</b>						
<b>d</b> All other revenue						
<b>e</b> Total. Add lines 11a-11d		7,192				
<b>12</b> Total revenue. See instructions		932,687	8,272	0	33,651	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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 domestic organizations and domestic governments. See Part IV, line 21 . . .	710,281	710,281		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .				
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	64,548	32,274	16,137	16,137
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 . . . . .	63,049	31,525	15,762	15,762
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .	5,995	2,998	1,499	1,498
9 Other employee benefits . . . . .				
10 Payroll taxes . . . . .	9,761	4,881	2,440	2,440
11 Fees for services (non-employees)				
a Management . . . . .	8,676	2,863	5,813	
b Legal . . . . .				
c Accounting . . . . .				
d Lobbying . . . . .				
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 Schedule O) . .				
12 Advertising and promotion . . . . .				
13 Office expenses . . . . .	605		605	
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .				
17 Travel . . . . .				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .				
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	3,226		3,226	
23 Insurance . . . . .	14,817		14,817	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) .				
a DUES . . . . .	10,465		10,465	
b CAMPAIGN EXPENSES . . . . .	10,577			10,577
c UTILITIES . . . . .	2,501		2,501	
d LEASE EXPENSES . . . . .	3,179		3,179	
e All other expenses . . . . .	10,743		10,743	
25 <b>Total functional expenses.</b> Add lines 1 through 24e .	918,423	784,822	87,187	46,414
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	44,840	1	19,165
	<b>2</b> Savings and temporary cash investments	921,933	2	976,270
	<b>3</b> Pledges and grants receivable, net	483,823	3	506,999
	<b>4</b> Accounts receivable, net		4	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 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	
	<b>7</b> Notes and loans receivable, net		7	
	<b>8</b> Inventories for sale or use		8	
	<b>9</b> Prepaid expenses and deferred charges		9	
	<b>10a</b> Land, buildings, and equipment. Cost or other basis. Complete Part VI of Schedule D	10a 120,734		
	<b>b</b> Less: accumulated depreciation	10b 83,444	37,798	10c 37,290
	<b>11</b> Investments - publicly traded securities	101	11	1,627
	<b>12</b> Investments - other securities. See Part IV, line 11		12	
	<b>13</b> Investments - program-related. See Part IV, line 11		13	
	<b>14</b> Intangible assets		14	
	<b>15</b> Other assets. See Part IV, line 11		15	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,488,495	16	1,541,351	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	10,248	17	10,053
	<b>18</b> Grants payable		18	
	<b>19</b> Deferred revenue	887,983	19	926,770
	<b>20</b> Tax-exempt bond liabilities		20	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		23	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		24	
	<b>25</b> 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	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25	898,231	26	936,823
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34</b>		
<b>27</b> Unrestricted net assets		590,264	27	107,518
<b>28</b> Temporarily restricted net assets			28	497,010
<b>29</b> Permanently restricted net assets			29	
<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
<b>30</b> Capital stock or trust principal, or current funds			30	
<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund			31	
<b>32</b> Retained earnings, endowment, accumulated income, or other funds			32	
<b>33</b> <b>Total net assets or fund balances</b>		590,264	33	604,528
<b>34</b> <b>Total liabilities and net assets/fund balances</b>	1,488,495	34	1,541,351	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	932,687
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	918,423
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	14,264
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	590,264
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	604,528

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .  
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? . . . . .  
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, review, or compilation of its financial statements and selection of an independent accountant? . . . . .  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .

- b** 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 . . . . .

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization

UNITED WAY OF PAYNE COUNTY, INC

Employer identification number

73-0602756

**Part I 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 12, 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 (Form 990 or 990-EZ) )
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ 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 \_\_\_\_\_
- 5 ☐ 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 )
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II )
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )
- 11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**
- 12 ☐ 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f Enter the number of supported organizations \_\_\_\_\_
- g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .	809,088	815,107	851,577	911,986	890,764	4,278,522
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 <b>Total.</b> Add lines 1 through 3 . . . . .	809,088	815,107	851,577	911,986	890,764	4,278,522
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
6 <b>Public support.</b> Subtract line 5 from line 4 . . . . .						4,278,522

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4 . . . . .	809,088	815,107	851,577	911,986	890,764	4,278,522
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	3,178	2,599	2,124	1,990	1,080	10,971
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 VI) . . . . .	43,479	39,664	38,472	42,841	40,843	205,299
11 <b>Total support.</b> Add lines 7 through 10 . . . . .						4,494,792
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	95.19	%
15 Public support percentage from 2015 Schedule A, Part II, line 14 . . . . .	15	95.06	%
16a <b>33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>			
b <b>33 1/3% support test - 2015.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>			
17a <b>10%-facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>			
b <b>10%-facts-and-circumstances test - 2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>			
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>			



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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II  
If the organization fails to qualify under the tests listed below, please complete Part II )

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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 . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6</b> <b>Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8</b> <b>Public support.</b> (Subtract line 7c from line 6) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) . . . . .						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12) . . . . .						

**14** **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

**19a** **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

**b** **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

**20** **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . ▶ ☐

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
<b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV** Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b>		
11c		

**Section B. Type I Supporting Organizations**

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

**Section C. Type II Supporting Organizations**

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

**Section D. All Type III Supporting Organizations**

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
3		

**Section E. Type III Functionally-Integrated Supporting Organizations**

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.	
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.	
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).	
2 Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	
2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	
3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	
3b		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> )		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

- 7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) See instructions	
7	<b>Total annual distributions.</b> Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required - explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			
a				
b				
c	From 2013 . . . . .			
d	From 2014 . . . . .			
e	From 2015 . . . . .			
f	<b>Total</b> of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D, line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			
7	<b>Excess distributions carryover to 2017</b> Add lines 3j and 4c			
8	Breakdown of line 7			
a				
b	Excess from 2013 . . . . .			
c	Excess from 2014 . . . . .			
d	Excess from 2015 . . . . .			
e	Excess from 2016 . . . . .			

**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization

UNITED WAY OF PAYNE COUNTY, INC

Employer identification number

73-0602756

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate value of contributions to (during year) . . . . .		
3 Aggregate value of grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
<input type="checkbox"/> Preservation of land for public use (e g , recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No	
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(i) Revenue included on Form 990, Part VIII, line 1 . . . . .	► \$
(ii) Assets included in Form 990, Part X . . . . .	► \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenue included on Form 990, Part VIII, line 1 . . . . .	► \$
b Assets included in Form 990, Part X . . . . .	► \$

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a ☐ Public exhibition d ☐ Loan or exchange programs
- b ☐ Scholarly research e ☐ Other \_\_\_\_\_
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ☐ %
- b Permanent endowment ☐ %
- c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

- b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

- 4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	77,593		45,301	32,292
c Leasehold improvements				
d Equipment	43,141		38,143	4,998
e Other				

**Total.** Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c) **37,290**



**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Column (b) must equal Form 990, Part X, col (B) line 12)		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) must equal Form 990, Part X, col (B) line 13)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col (B) line 15)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	

2 Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	943,597
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII)	<b>2d</b>	10,910
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	10,910
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	932,687
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12)	<b>5</b>	932,687

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	929,333
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII)	<b>2d</b>	10,910
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	10,910
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	918,423
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18)	<b>5</b>	918,423

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**01. Other revenues not included on Form 990 (Part XI, line 2d)**

PART XI LINE 2D ARE FUNDRAISING EXPENSES THAT HAVE NOT BEEN SUBTRACTED FROM THE AUDITED

FINANCIAL STATEMENTS LIKE IT IS HERE ON THE FORM 990

**Part XIII****Supplemental Information** *(continued)***02. Other expenses not included on Form 990 (Part XII, line 2d)**

PART XII LINE 2D ARE FUNDRAISING EXPENSES THAT HAVE NOT BEEN SUBTRACTED FROM THE AUDITED

FINANCIAL STATEMENTS LIKE IT IS HERE ON THE FORM 990

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

▶ Attach to Form 990 or Form 990-EZ

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

Employer identification number

**UNITED WAY OF PAYNE COUNTY, INC**

**73-0602756**

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17  
Form 990-EZ filers are not required to complete this part

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

**a** ☐ Mail solicitations

**b** ☐ Internet and email solicitations

**c** ☐ Phone solicitations

**d** ☐ In-person solicitations

**e** ☐ Solicitation of non-government grants

**f** ☐ Solicitation of government grants

**g** ☐ Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b>						
<b>2</b>						
<b>3</b>						
<b>4</b>						
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>Total</b>						

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

**Part II**

**Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>GOLF TOURNAM</u> (event type)	(b) Event #2 <u>JUKE JOINT J</u> (event type)	(c) Other events <u>NONE</u> (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts . . . . .	31,361	13,200		44,561
	2 Less Contributions . . . . .				
	3 Gross income (line 1 minus line 2) . . . . .	31,361	13,200		44,561
Direct Expenses	4 Cash prizes . . . . .				
	5 Noncash prizes . . . . .				
	6 Rent/facility costs . . . . .				
	7 Food and beverages . . . . .				
	8 Entertainment . . . . .				
	9 Other direct expenses . . . . .	10,910			10,910
	10 Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				10,910
11 Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				33,651	

**Part III**

**Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue . . . . .				
Direct Expenses	2 Cash prizes . . . . .				
	3 Noncash prizes . . . . .				
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .				
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶				

9 Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Employer identification number

73-0602756

**Part I General Information on Grants and Assistance**

- 1 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 criteria used to award the grants or assistance? Yes ☒ No ☐
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	AMERICAN RED CROSS 114 W 8TH STILLWATER, OK 74074	73-0579222	501 (C) (3)	45,000				FOR OPERATIONS
(2)	BIG BROTHERS/BIG SISTERS 1513 SANGRE ROAD STILLWATER, OK 74074	73-1076608	501 (C) (3)	41,640				FOR OPERATIONS
(3)	MISSION OF HOPE 1804 S PERKINS STILLWATER, OK 74074	73-0772341	501 (C) (3)	3,000				BEDDING
(4)	EDWIN FAIR MENTAL HEALTH CE 102 FIR PERRY, OK 73077	73-6113221	501 (C) (3)	46,250				FOR OPERATIONS
(5)	GIRL SCOUT, MAGIC EMPIRE CO 315 W 12TH AVE STILLWATER, OK 74074	73-0579240	501 (C) (3)	9,384				FOR OPERATIONS
(6)	EDWIN FAIR MENTAL HEALTH CE 102 FIR STILLWATER, OK 74074	73-6113221	501 (C) (3)	1,500				KITCHEN PROJECT
(7)	LEGAL AID OF WESTERN OKLAHO 312 S DUCK STILLWATER, OK 74074	73-1298893	501 (C) (3)	10,441				FOR OPERATIONS
(8)	LIFE ADULT DAYCARE CENTER 411 W MATTHEWS STILLWATER, OK 74075	73-1184845	501 (C) (3)	32,000				FOR OPERATIONS
(9)	MISSION OF HOPE 1804 S PERKINS STILLWATER, OK 74074	73-0772341	501 (C) (3)	61,927				FOR OPERATIONS
(10)	MOBILE MEALS 1323 W 6TH AVE STILLWATER, OK 74074	73-1337911	501 (C) (3)	34,300				FOR OPERATIONS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization

UNITED WAY OF PAYNE COUNTY, INC

Employer identification number

73-0602756

**Part I. General Information on Grants and Assistance**

1 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 criteria used to award the grants or assistance? ☐ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	PAYNE COUNTY CASA 315 E 6TH STILLWATER, OK 74074	73-1396936	501 (C) (3)	22,000				FOR OPERATIONS
(2)	PAYNE COUNTY DRUG COURT 217 W 5TH STILLWATER, OK 74074	73-1573279	501 (C) (3)	20,512				FOR OPERATIONS
(3)	PAYNE COUNTY YOUTH SERVICES 2224 W 12TH STILLWATER, OK 74074	73-1093612	501 (C) (3)	38,331				FOR OPERATIONS
(4)	SALVATION ARMY 1101 S LOWRY STILLWATER, OK 74074	73-0579266	501 (C) (3)	34,851				FOR OPERATIONS
(5)	SAVILLE CENTER 1523 W 9TH STILLWATER, OK 74074	73-1546193	501 (C) (3)	25,000				FOR OPERATIONS
(6)	MPower, INC (SHELTERED WORK 516 EXPO CIRCLE STILLWATER, OK 74074	73-0799560	501 (C) (3)	50,000				FOR OPERATIONS
(7)	MPower 516 EXPO CIRCLE STILLWATER, OK 74074	73-0799560	501 (C) (3)	2,475				SHREDDER
(8)	STILLWATER COMMUNITY HEALTH 1321 W 7TH AVE STILLWATER, OK 74074	73-0772341	501 (C) (3)	68,909				FOR OPERATIONS
(9)	STILLWATER INTERFAITH COUNS 306 W 7TH AVE STILLWATER, OK 74074	73-1544869	501 (C) (3)	9,594				FOR OPERATIONS
(10)	STILLWATER LITERACY COUNCIL 1107 S DUCK STILLWATER, OK 74074	73-1355973	501 (C) (3)	4,500				FOR OPERATIONS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

UNITED WAY OF PAYNE COUNTY, INC

Employer identification number

73-0602756

**Part I General Information on Grants and Assistance**

1 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 criteria used to award the grants or assistance? ☐ Yes ☐ No

☐ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	STILLWATER YMCA 204 S DUCK STILLWATER, OK 74074	73-0674204	501 (C) (3)	60,000				FOR OPERATIONS
(2)	WINGS OF HOPE 3800 NORTH WASHINGTON STREET STILLWATER, OK 74075	73-1097811	501 (C) (3)	60,000				FOR OPERATIONS
(3)	4KIDS AND COMMUNITY PO BOX 13 PERKINS, OK 74059	45-3590834	501 (C) (3)	4,000				FOR OPERATIONS
(4)	STILLWATER CARES PO 1452 STILLWATER, OK 74076	27-3331134	501 (C) (3)	8,667				FOR OPERATIONS
(5)	STILLWATER GROUP HOMES 904 W 11TH STILLWATER, OK 74074	73-1163767	501 (C) (3)	5,000				FOR OPERATIONS
(6)	SALVATION ARMY 1101 S LOWRY STILLWATER, OK 74074	73-0579266	501 (C) (3)	2,500				DOORS
(7)	STILLWATER YMCA 204 S DUCK STILLWATER, OK 74074	73-0674204	501 (C) (3)	5,000				CAMERAS
(8)	4 KIDS AND COMMUNITY PO BOX 13 PERKINS, OK 74059	45-3590834	501 (C) (3)	500				LAPTOP
(9)	PAYNE COUNTY YOUTH SERVICES 2224 W 12TH STILLWATER, OK 74074	73-1093612	501 (C) (3)	3,000				SPECIAL PROJECT
(10)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.



Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information					

01. Monitoring procedures (Part I, line 2)

RECORDS ARE KEPT FOR ANY GRANTS AWARDED AND RECORDS ARE KEPT ON EACH AGENCY THAT GRANTS ARE AWARDED. FOR ANNUAL OPERATIONAL GRANTS THE AGENCIES GO THROUGH AN EVALUATION WITH THE ALLOCATIONS COMMITTEE, WHERE IT IS DECIDED WHICH AGENCIES ARE GETTING WHAT AMOUNT OF MONIES.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**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

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

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

**UNITED WAY OF PAYNE COUNTY, INC**

Employer identification number  
**73-0602756**

**01. Organizational document changes (Part VI, line 4)**

THE ORGANIZATION HAS UNDERGONE A NAME CHANGE THEY HAVE CHANGED THEIR NAME FROM  
STILLWATER AREA UNITED WAY, INC. TO UNITED WAY OF PAYNE COUNTY, INC. THE NEW BYLAWS AND  
AMENDED CERTIFICATE OF INCORPORATION HAVE BEEN ATTACHED TO REFLECT THIS NEW NAME.

**02. Committee meeting documentation (Part VI, line 8b)**

COMMITTEE CHAIRS REPORT TO THE ENTIRE BOARD EACH MONTH TO GO OVER ANYTHING THAT HAS BEEN  
DISCUSSED BY THE COMMITTEE AND THIS IS INCLUDED IN BOARD MINUTES EACH MONTH.

**03. Form 990 governing body review (Part VI, line 11)**

THE BOARD OF DIRECTORS REVIEWS THE FORM 990 BEFORE IT IS FILED WITH THE INTERNAL REVENUE  
SERVICE AND THE STATE OF OKLAHOMA

**04. Conflict of interest policy compliance (Part VI, line 12c)**

VOLUNTEERS AND EMPLOYEES SHALL COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AND  
AFFIRMATION OF COMPLIANCE ANNUALLY. THEY ALSO SHALL DISCLOSE ANY ACTUAL OR POTENTIAL  
CONFLICT OF INTEREST AS SOON AS IT IS KNOWN, OR REASONABLY SHOULD BE KNOWN.

**05. CEO, executive director, top management comp (Part VI, line 15a)**

THE EXECUTIVE DIRECTOR SHALL BE EVALUATED ANNUALLY ON HIS/HER PERFORMANCE BY THE BOARD  
PRESIDENT WITH INPUT PROVIDED BY MEMBERS OF THE EXECUTIVE COMMITTEE. A RECOMMENDATION FOR  
CHANGES IN COMPENSATION WILL BE MADE TO THE EXECUTIVE COMMITTEE BY THE BOARD PRESIDENT.  
THE EXECUTIVE DIRECTOR'S COMPENSATION IS BASED ON MARKET COMPETITIVE PAY FOR  
KNOWLEDGE/SKILLS AND INVENTIVE FOR PERFORMANCE

Name of the organization

Employer identification number

UNITED WAY OF PAYNE COUNTY, INC

73-0602756

**06. Other officer or key employee compensation (Part VI, line 15b)**

PERFORMANCE EVALUATIONS OF ALL OTHER EMPLOYEES WILL BE CONDUCTED BY THE EXECUTIVE DIRECTOR  
AT 6 MONTH INTERVALS DURING AN EMPLOYEE'S FIRST YEAR WITH UNITED WAY. ANNUAL REVIEWS WILL  
BE CONDUCTED THERAFTER.

**07. Governing documents, etc, available to public (Part VI, line 19)**

ALL GOVERNMENT DOCUMENTS AND POLICIES OF THE ORGANIZATION ARE AVAILABLE TO THE PUBLIC UPON  
REQUEST

## UNITED WAY OF PAYNE COUNTY, INCORPORATED

Field Code Changed

### By-Laws

#### **ARTICLE I**

##### **Name and Place of Business**

###### SECTION 1 1

The name of this organization shall be United Way of Payne County, Incorporated, a not-for-profit corporation, and it may also do business as United Way, Stillwater Area United Way, United Way of Stillwater and Stillwater United Way

###### SECTION 1 2

The principal office and place of business of the Corporation shall be at 109 East Ninth Avenue, Stillwater, Oklahoma, and its mailing address shall be P O Box 308, Stillwater, Oklahoma, 74076-0308

#### **ARTICLE II**

##### **Purposes**

###### SECTION 2 1

The purposes for which this Corporation is formed are

- a To identify the leading health and human care issues and the groups affected by these changing issues, to address these issues through the use of boards, committees, and task forces, and to train volunteers to work in the community, providing individuals and institutions with access to, and making them aware of, local services that address community needs
- b To confirm that the entire community has the opportunity to participate in the local United Way organization, to ensure that United Way fund raising and service areas include the entire natural market where people live, work and are served
- c To raise the maximum funds possible through an annual giving program, as well as on a continuing basis through special planned giving programs, and to provide funding for special programs which are within the purposes of this Corporation
- d To develop a communications and information network that fosters ties between the local United Way and the community by listening to the community as well as informing the community of the programs available,

and to further a communications network that offers an exchange of information and ideas among all funded agencies

e To organize and operate a systematic program for distributing funds raised in the United Way campaigns, to develop ways to include in the distribution plan those organizations which have not been funded before, to reduce or discontinue funding to those organizations that are no longer relevant to community needs, to provide for donor involvement in the fund distribution program, and to provide giving options to the donor

f To receive by gift, grant, devise, bequest and otherwise and from any private or public sources, personal or real property, and to hold, administer, sell, invest, reinvest, manage, use, disburse and distribute, and apply the income and/or principal of the same in accordance with the directions and intent of the donor, as the Corporation may deem best from time to time, for the promotion of any or all of the foregoing purposes

g To do any and all things, either alone or in cooperation with other organizations or institutions, and either directly or by contribution to such other organizations or institutions which it may deem necessary or proper in order to carry into effect any or all of the foregoing objects or purposes

#### SECTION 2 2

Nothing herein shall authorize this Corporation, organized as a not-for-profit corporation under the laws of the State of Oklahoma, directly or indirectly to engage in or include among its purposes, any activities prohibited by state law

#### SECTION 2 3

No substantial part of the activities of this Corporation shall be for the purpose of carrying on propaganda, or otherwise attempting to influence legislation in violation of federal guidelines. None of the activities of this Corporation shall consist of participating in, or intervening in (including the publishing or distribution of statements), any political campaign on behalf of or in opposition to any candidate for public office

#### SECTION 2 4

No part of the net earnings of this Corporation shall inure to the benefit of any private shareholder or any individual. The property of this Corporation is irrevocably dedicated to charitable purposes, and upon liquidation, dissolution or abandonment of the owner, after providing for the debts and obligations thereof, the remaining assets will not inure to the benefit of any private person but will be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable purposes and which has established its tax-exempt status under Section 501(c)(3) and 509 (a)(1), (2) or (3) of the Internal Revenue Code of 1986

### **ARTICLE III Members**

#### **SECTION 3 1**

The Members of this Corporation shall be one class termed "Members "

#### **SECTION 3 2**

Each contributor to the United Way of Payne County, Incorporated shall be a Member for the year in which such contribution is credited

#### **SECTION 3 3**

Each Member shall be entitled to one vote on all matters presented at a meeting of the Members There shall be no cumulative voting or voting by proxy Unless otherwise provided by law or by these by-laws, a majority of the votes cast shall govern in every election and matter voted upon

#### **SECTION 3 4**

Organizations or entities receiving funding from or through the Corporation may be referred to as "Member Agencies" or "Member Organizations" but they are not thereby "Members" with the meaning of these by-laws

### **ARTICLE IV Board of Directors**

#### **SECTION 4 1**

The management of this Corporation shall be vested in a Board of Directors consisting of not less than twenty-five (25) members nor more than thirty-seven (37) directors, eleven (11) of whom shall be elected each year for a term of three (3) years at the annual meeting of Members in order that there be staggered terms The Immediate Past President and chairs of Standing Committees who are not already serving on the Board of Directors shall be ex-officio members with vote in addition to the thirty-three provided above No person may serve on the Board for more than six (6) consecutive years except that additional terms for up to six (6) consecutive years may be served when each is separated by one year of absence from membership on the Board

#### **SECTION 4 2**

Not later than the first day of December of each year, the Executive Committee shall appoint a Nominating Committee consisting of seven (7) persons of whom four (4) shall be from the Board and three (3) from the individual membership The Nominating Committee shall select nominees for Directors and Officers who will make the Board representative of the various interests in the community

#### SECTION 4 3

The United Way of Payne County Board of Directors may declare a position vacant if the Director shall have missed three (3) consecutive meetings

#### SECTION 4 4

The United Way of Payne County Board of Directors shall fill any vacancy occurring in the Board of Directors using the following procedure when a vacancy occurs for any reason, the Executive Committee shall nominate a new director, who shall then be approved by a majority vote of the entire Board of Directors The new director shall serve out the remainder of the unexpired term of the former director he or she is replacing

#### SECTION 4 5

In addition to the duties and powers otherwise delegated to the Board of Directors in these by-laws, the duties and powers of the Board of Directors shall be

- a To manage the affairs of this organization between meetings of the Members thereof
- b To adopt such policies and procedures for the operation of this organization as may be consistent with these by-laws, and designed to carry out the objects of this organization
- c To appoint such committees as it may deem expedient for the carrying out of the objects of this organization
- d To arrange for the raising of funds
- e To control the distribution of funds collected
- f To employ such persons as it may deem necessary for the successful prosecution of the objects of this organization
- g To give at least once a year a full and complete report of its activities at a meeting of the Members of the organization
- h To appoint, for one year, ex-officio, such honorary non-voting members to the Board of Directors and/or such non-voting honorary officers, not to exceed five, whose association with the United Way of Payne County, Incorporated, may be expected to benefit the relationship of the United Way to the community

I To approve appointment of not more than six additional Directors to the Board of Directors for a one year term as recommended by the Executive Committee

J An honorary life membership may be granted to an individual by vote of the Board of Directors Recognition may be given at the annual meeting

## **ARTICLE V**

### **Officers**

#### **SECTION 5.1**

a The officers of this Corporation shall be a President, a President-elect, a Vice President and a Treasurer, who shall be elected by the Board from its Directors

b The Board may appoint or employ an Executive Director, who shall act as Secretary, and other personnel who shall be given such duties as the Board sees fit In the absence of the Executive Director, the Board shall elect a Secretary from among its Directors

#### **SECTION 5.2**

All officers are elected for terms of one year and serve until their successors are elected and qualified

#### **SECTION 5.3**

The duties of the Officers shall be

President - to preside at all meetings of Members and the Board of Directors, to appoint the Chairs of each Committee, to call special meetings when deemed necessary, and to carry out such other duties as usually pertain to this office

President-elect - to perform the duties of the President in the event the President is absent

Vice-President - to perform the duties of the President in the absence of both the President and President-elect The Vice-President shall perform other duties as may be assigned from time-to-time by the Board

Treasurer - to have charge of all the funds of this Corporation and to make reports on transactions and the financial condition of the Corporation All authorized disbursements, other than by petty cash and monthly accounts set up on auto-pay, shall be made by checks signed by the Executive Director and countersigned by the



Treasurer, when available, otherwise by the President or President-elect. All bills for monthly accounts set up on auto-pay will be reviewed and initialed on a monthly basis by the Executive Director and Treasurer. In the absence of the Executive Director, checks shall be signed by the Treasurer and one of the other Officers. All Officers and employees shall be bonded at the cost of the Corporation.

## **ARTICLE VI Standing Committees**

### **SECTION 6 1**

The Standing Committees shall be the Executive Committee, Allocations Committee, Accreditation Committee, Publicity Committee, Policies and Procedures Committee and Campaign Committee.

### **SECTION 6 2**

a The Executive Committee shall consist of the President, President-elect, Vice-President, Treasurer, Chairs of Standing Committees and the Immediate Past President.

b The Executive Committee shall supervise the transaction of all routine business of the Corporation and shall act for the Board in the interim between meetings of the Board. It shall have the authority to order disbursements of the necessary expenses of operating the Corporation and shall possess all other powers delegated to it by these by-laws or by the Board. The Executive Committee shall report its activities at each meeting.

c The Executive Committee shall recommend to the Board the admission of Member Agencies pursuant to ARTICLE VII.

### **SECTION 6 3**

a The Allocations Committee shall consist of a Chair and not less than nine (9) other directors, appointed by the Executive Committee.

b The Allocations Committee shall consider and recommend to the Board the policies of this Corporation in relation to Member Agencies, all matters pertaining to special appropriations, the budgets of all Member Agencies, their allowances, increases or decreases of budgets, and payments to Member Agencies in accordance with such policies and budget considerations. All acts of the Allocations Committee shall be subject to the final approval of the Board.

#### SECTION 6 4

- a The Publicity Committee shall consist of a Chair and not less than five (5) other Directors, appointed by the Executive Committee
- b The Publicity Committee shall supervise and direct a continuous educational and publicity program subject to the approval of the Board. This program shall be designed to inform the community concerning social needs and the services of the United Way of Payne County as well as the Member Agencies in order to encourage sound and intelligent support for such activities

#### SECTION 6 5

- a The Campaign Committee shall consist of a Chair and not less than five (5) other Directors, appointed by the Executive Committee, and the division chairs who are to be selected by the Chair and the Director members of the Campaign Committee
- b The Campaign Committee shall supervise and direct the annual campaign for funds subject to the supervision and direction of the Board

#### SECTION 6 6

- a The Accreditation Committee shall consist of a Chair and not less than four (4) other Directors, appointed by the Executive Committee
- b The Accreditation Committee shall administer the United Way's accreditation program under which each member Agency and each candidate for admission as a Member Agency will be reviewed in accordance with the policies of this Corporation relating to accreditation
- c The Accreditation Committee shall recommend accreditation for a Member Agency or candidate for admission as a Member Agency for a period of not less than two (2) nor more than five (5) years after each review and/or shall propose such other action as the Committee may deem appropriate under the circumstances (including loss of or denial of status as a Member Agency). All acts of the Accreditation Committee shall be subject to the final approval of the Board

#### SECTION 6 7

- a The Policy and Procedures committee shall consist of a chair and not less than 4 other directors appointed by the Executive Committee
- b The Policy and Procedures committee shall review the By-Laws, Code of Ethics, and Personnel Policy and Procedures. This committee will also monitor and

update the Strategic/Long Range Plan and coordinate with the Finance Committee the review of the Financial Policies and Office Financial Safeguards

#### SECTION 6 8

The Board or the President may establish such other committees as deemed necessary or desirable for the accomplishment of the objectives of this Corporation. Members of such committees may or may not be directors

### **ARTICLE VII Member Agencies**

#### SECTION 7 1

- a To be eligible to become a Member Agency, the candidate for admission shall have received a determination that it is exempt from taxation under Section 501 (c)(3) of the Internal Revenue Code of 1986 (or under the relevant provisions of any future Internal Revenue Code) and shall have conducted, for at least one year immediately preceding application for admission, a program of health, welfare, or other activity deemed by the Board to be appropriate for membership
- b Applications for admission shall be processed in accordance with the policies and procedures of this Corporation relating to the admission of new agencies. These policies and procedures shall provide for the Accreditation Committee to review the issues pertaining to accreditation and to make recommendations in that regard to the Executive Committee which will consider the other issues pertaining to admission as well as the recommendation of the Accreditation Committee. The Executive Committee shall in turn make its recommendation to the Board which will vote on said recommendation

#### SECTION 7 2

For the purpose of sharing the joint funds to be raised by the United Way of Payne County, Inc., each Member Agency so sharing shall sign an agreement with the United Way incorporating the following

- a To conduct no benefits, campaigns or solicitations for financial assistance for ordinary routine purposes, nor any similar campaign for special financial purposes within the geographic area of the United Way except with the written consent first obtained by the United Way of Payne County Board of Directors

- b After being given full consideration and hearing, to accept the apportionment of funds made to it by the Allocations Committee and approved by the United Way of Payne County Board of Directors
- c To maintain a reasonable management, with a qualified board of unpaid directors or administrative committee and a responsible county or local representative
- d To cooperate with other social agencies in preventing duplication of effort and in promoting effective service and efficiency and economy of administration
- e To undertake no new line of work or substantial expansion of service in community except with consent first obtained from the United Way of Payne County Board of Directors
- f To keep complete and regular books of account open to inspection by a representative of the United Way of Payne County
- g To file with the United Way of Payne County, at the end of each fiscal year and otherwise upon request, an accurate copy of a complete and satisfactory financial statement certified as to its correctness by the treasurer and president of the organization, and a financial statement showing assets and liabilities of the organization, to submit to the United Way other reasonable information concerning finances, programs, etc , and in such form as the United Way of Payne County Board of Directors or Allocations Committee or Accreditation Committee may require
- h To abide by the rules and regulations promulgated by the United Way of Payne County Board of Directors

#### SECTION 7 3

A Member Agency shall cease to be a Member Agency (1) by its written withdrawal as such sent to and approved by the Board or (2) by action taken by the Board upon the recommendation of the Admissions Committee made pursuant to the policies and procedures of this Corporation as to the revocation of membership

### **ARTICLE VIII**

#### **Meetings**

#### SECTION 8 1

##### **Members**

There shall be an annual meeting of the Members in the month of January each year at such time and place as the Board of Directors shall determine, for the purpose of electing the Directors, receiving reports and transacting any business presented to it. When circumstances justify, a later date may be set by the Executive Committee provided that positive effort shall be made to avoid a date later than February 15. Additional meetings of Members may be held on call of the Board of Directors and must be called upon petition in writing of fifteen (15) or more Members.

## SECTION 8 2

### Board of Directors

- a The organizational meeting of the Board of Directors shall be held annually as soon as possible after the annual meeting of Members for the purpose of electing Officers, and transacting such other business as may come before it.
- b Not less than nine meetings of the Board of Directors shall be held during the year. Other Board meetings shall be held as are desirable for the effective administration of this organization.
- c Special meetings of the Board of Directors may be called at any time by the President, and shall be called on the written request of three (3) Directors.

## SECTION 8 3

### Committees

All committees shall meet upon the call of their chairperson.

## SECTION 8 4

### Notice

- a Member meetings Notice of Member meetings shall be given by local newspaper publicity at least five (5) days before the meeting.
- b Board of Directors meetings Notice of meetings of the Board of Directors shall be given by written or electronic notice (email or text message), sent to each Director at least three (3) days before the meeting.
- c Committee meetings Notice of committee meetings may be given by any type of notice.

## **ARTICLE IX**

### **Quorum**

## SECTION 9 1

Member Meetings A quorum for a regular or special meeting of Members shall consist of at least 22 voting Members

SECTION 9 2

Board of Directors A quorum for a regular or special meeting of the Board of Directors of this organization shall consist of one more than fifty (50%) of the total number of directors then serving on the Board of Directors

SECTION 9 3

Committees The members present at a committee meeting shall constitute a quorum

**ARTICLE X**  
**Amendments**

SECTION 10 1

These by-laws may be enlarged, amended or repealed in all or in part by a majority vote of the Board of Directors at any regular or special meeting of the Members provided

- a That the proposed amendment shall have first been submitted to the Board of Directors for review at least five (5) days prior to the meeting at which the amendments are to be approved

Proposed revisions. July, 2016

Approved by the board of directors, July 28, 2016.

OFFICE OF THE SECRETARY OF STATE



**AMENDED NOT FOR PROFIT  
CERTIFICATE OF INCORPORATION**

*WHEREAS, the Amended Not For Profit Certificate of Incorporation of*

**UNITED WAY OF PAYNE COUNTY, INC.**

*has been filed in the office of the Secretary of State as provided by the laws of the State of Oklahoma.*

*NOW THEREFORE, I, the undersigned, Secretary of State of the State of Oklahoma, by virtue of the powers vested in me by law, do hereby issue this certificate evidencing such filing.*

*IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the Great Seal of the State of Oklahoma.*



*Filed in the city of Oklahoma City this  
9th day of January, 2017.*

A handwritten signature in black ink, reading "Mike Hunter". The signature is written in a cursive, flowing style. Below the signature is a horizontal line.

*Secretary of State*