Department of the Treasury

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

_				gov/Tomissor/Tormstr			0.0./0.0 1.0
<u> </u>	Fo	r cal	endar year 2017 or tax year beginning	07/	01 , 2017, and endi		06/30 <b>,20</b> 18
	Ν	lame c	of foundation			A Employeridenti	fication number
	7	THE	OLIVER DEWEY MAYOR FOUNDATI	ON 477006019		75	-1864630
-	N	lumbe	r and street (or P.O box number if mail is not delivered	to street address)	Room/suit	B Telephone numb	per (see instructions)
	т	n	DOV 1620	•		ه ا	18-619-15 <u>27</u>
-			. BOX 1620 town, state or province, country, and ZIP or foreign pos	tal code			10-013-1327
<del>9</del>	C	ity or i	town, state or province, country, and zir or loreign pos	star code	•	C If exemption applic	ation is
<b>6</b>						pending, check her	
			SA, OK 74101-1620				
<b>\$</b> € (	G	Che	ck all that apply: Initial return	Initial return	of a former public chai	ity D 1 Foreign organiza	ations, check here 🕨
<b>%</b> 5			Final return	Amended ret	urn	2 Foreign organiza	
<b>3</b> 2			Address change	Name change	е	85% test, check computation .	here and attach
in i	Н	Che	ck type of organization: X Section 501	c)(3) exempt private f	oundation	$\overline{\mathcal{M}}$	
ENVELOPE NOV	Г	_	ection 4947(a)(1) nonexempt charitable trust	Other taxable pr	K/	f   '	b)(1)(A), check here
9 7	<u>'</u>			unting method: X C		1	
' 'ت				ther (specify)	Accidar	<i>?</i> 1	b)(1)(8), check here
			· ' '   —		ah hasia l	— under section 507)	DI TADI, CHECK Here .
	_			column (d) must be on ca	sn basis.)	<u> </u>	(d) Disbursements
2018	Lit	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) nevenue una	(b) Net investment	(c) Adjusted net	for charitable
œ			may not necessarily equal the amounts in	expenses per books	income	income	purposes
_			column (a) (see instructions) )	Doord	.15 449 A 3 - 1 133 .1 - 1 V	, 591 3 50 Merhiph , F 2 J 2000 - 2 E al.	(cash basis only)
2		1	Contributions, gifts, grants, etc., received (attach schedule) .				
1		2	Check If the foundation is not required to attach Sch B				
70		3	Interest on savings and temporary cash investments-				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7		4	Dividends and interest from securities	125,115.	125,115.		STMT-1
	ı		Gross rents	•	•		
			Net rental income or (loss) -164, 291.	The state of the state of the state of	*	CONTROL PRE	DENZED.
				323,371.		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	ĭ	оа b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,584,610	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 -1 4 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1	45 THE RESERVE TO SERVE THE SERVE TO SERVE THE	
į	e		000000 011 11110 000		323,371.	NOV. 121	1 9 2018 S
ć	Kevenue	7	Capital gain net income (from Part IV, line 2).	The state of the s	3 <u>23,371.</u>	ika a fa	**************************************
_	_	8	Net short-term capital gain	1	The state of the s	005	
		9	Income modifications		AND THE PROPERTY OF THE PROPER	LUGI	
		IVa	and allowances	The state of the s	The state of the s	THE STREET STREET, STREET	
£107	- 1	b	Less Cost of goods sold .		**		
7	-	C	Gross profit or (loss) (attach schedule)				
<b>2</b>	-	11	Other income (attach schedule)	-9,466	-9,466.		STMT: 2
<b>&gt;</b>	-	12	Total. Add lines 1 through 11	439,020.	439,020.		The state of the s
<u>ກ</u>	T	13	Compensation of officers, directors, trustees, etc.	176,610.	132,458.		44,153
			Other employee salaries and wages		NONE	NON	E
<u>-</u>	2	15	Pension plans, employee benefits		NONE		
SCANNEU	9	16a	Legal fees (attach schedule) STMT . 3	24,600	10,693.	NON	
Ž i	ŭ	L	Accounting fees (attach schedule) STMT 4	6,000	NONE		
<b>Z</b> 9	Administrative Expenses	D	•	0,000			7 3,300
	<u></u>	C	Other professional fees (attach schedule)				
<u>ග</u>	١	17	Interest	10 102	2 755		7 /20
	٤	18	Taxes (attach schedule) (see instructions). 5.	10,193	2,755.		7,438
7	Ξ	19	Depreciation (attach schedule) and depletion.		4= :2=		* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_	9	20	Occupancy	17,486	17,486.	·	
2	_	21	Travel, conferences, and meetings :		NONE	NON_	<del></del>
	Ο,	22	Printing and publications		NONE		
, <b>\</b>	au	2.2		171,503	171,503.	164,291	
	าg and	23	Other expenses (attach schedule) STMT. 6.	1/1,303			l
, <b>,</b>	iting and	23	•	171,303			i i
	erating and	23 24	Total operating and administrative expenses.		334,895.	164,291	. 71,498
	Jperating and	23 24 25	<b>Total operating and administrative expenses.</b> Add lines 13 through 23	406,392	334,895.		
		21 22 23 24 25	Total operating and administrative expenses.  Add lines 13 through 23	406,392 769,220	The state of the s		769,220
	4	26	Total operating and administrative expenses.  Add lines 13 through 23	406,392 769,220 1,175,612	334,895.		. 71,498 769,220 . 840,718
	4	26 27	Total operating and administrative expenses.  Add lines 13 through 23  Contributions, gifts, grants paid  Total expenses and disbursements Add lines 24 and 25  Subtract line 26 from line 12	406,392 769,220 1,175,612	334,895.		769,220
	4	26 27 a	Total operating and administrative expenses.  Add lines 13 through 23  Contributions, gifts, grants paid  Total expenses and disbursements Add lines 24 and 25  Subtract line 26 from line 12  Excess of revenue over expenses and disbursements	406,392 769,220 1,175,612 -736,592	334,895.	164,291	769,220
	4	26 27 a b	Total operating and administrative expenses.  Add lines 13 through 23  Contributions, gifts, grants paid  Total expenses and disbursements Add lines 24 and 25  Subtract line 26 from line 12	406,392 769,220 1,175,612	334,895.		769,220

Part II		Attached schedules and amounts in the description column should be for end-of-year		Beginning of year	End of year			
K	art II	amounts only (See instruct	ions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing		183,225.	94,48	<u>7. 94,698</u> .		
		Savings and temporary cash investments						
		Accounts receivable				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Less allowance for doubtful accounts						
	4	Pledges receivable ▶		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		27 2 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
		Less allowance for doubtful accounts ▶						
		Grants receivable						
	_	Receivables due from officers, directors, truste						
		disqualified persons (attach schedule) (see instru						
	7	Other notes and loans receivable (attach schedul	e) <b>&gt;</b>					
		Less. allowance for doubtful accounts						
ន	8	Inventories for sale or use						
Assets		Prepaid expenses and deferred charges						
As		Investments - U S and state government obligations (att						
		Investments - corporate stock (attach schedule)		1,737,101.	1,487,58	4. 1,491,963		
		Investments - corporate bonds (attach schedule)	_	3,215,524.	2,858,57	9. 3,715,918		
	11	Investments - land, buildings, and equipment basis		Parameter Commence				
		Less, accumulated depreciation	,	1,589,905.	1,589,90			
	12	(attach schedule) Investments - mortgage loans						
	13	Investments - other (attach schedule)	STMT 10	88,060.	70,36	6. 70,366		
	14	Land, buildings, and equipment basis				1 7 . 1 5 6 4 1 6 2 4 1 6 1		
		Less accumulated depreciation		7,556.	. No. Kiloh il dili Bassadrallar e la basinesterde len sentini bishisherererebebu			
		(attach schedule) Other assets (describe	STMT 11)	2.		2. 2		
		Total assets (to be completed by all file	ers - see the					
		instructions. Also, see page 1, item I)		6,821,373.	6,100,92	3. 13,368,083.		
П		Accounts payable and accrued expenses				1. 5. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
		Grants payable		l .	-			
SS		Deferred revenue						
ij		Loans from officers, directors, trustees, and other disqui						
Liabilities		Mortgages and other notes payable (attach sche-	· ·					
Lia		Other liabilities (describe						
	23	Total liabilities (add lines 17 through 22)			NO	NE		
		Foundations that follow SFAS 117, check here	▶ X	,				
es		and complete lines 24 through 26, and lines 30						
n C	24	Unrestricted		6,821,373.	6,100,92			
ala	25	Temporarily restricted						
B	26	Permanently restricted						
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, che						
Ē		and complete lines 27 through 31.						
5	27	Capital stock, trust principal, or current funds .						
ets	28	Paid-in or capital surplus, or land, bldg , and equipment						
SS	29	Retained earnings, accumulated income, endowment, o						
ţ	30	Total net assets or fund balances (see instruction		6,821,373.	6,100,92			
Se	31	Total liabilities and net assets/fund l				The state of the s		
	1	instructions)		6,821,373.	6,100,92	3. 重新的图式是由工作到		
.P	art III	Analysis of Changes in Net Assets	or Fund Bala	inces				
		I net assets or fund balances at beginning			must agree with			
		of-year figure reported on prior year's return				6,821,373.		
2		er amount from Part I, line 27a				-736,592.		
		er increases not included in line 2 (itemize)				16,142.		
4		lines 1, 2, and 3				6,100,923.		
5	Dec	reases not included in line 2 (itemize)			_ ;	5		
_6	Tota	al net assets or fund balances at end of year	(line 4 minus	line 5) - Part II, column (I	b), line 30	6,100,923.		
						Form <b>990-PF</b> (2017)		

	990-FF (2017)					rage 3
Par	IV Capital Gains	and Losses for Tax on Inve	estment Income	<b>11.</b> V		
	(a) List and des 2-story br	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	( <b>d)</b> Date sold (mo , day, yr )		
1 a	PUBLICLY TRADED	SECURITIES		D - Donation		
b						
c						
d		_				
_е					<u>                                     </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
а	1,584,610.		1,261,239.			323,371.
b						
C						
d						
е						
	Complete only for assets sh	owing gain in column (h) and owned b	by the foundation on 12/31/69.	(1)	Gains (Col. (h) ga	iin minus
	i) FMV as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (ı)		(k), but not less t	han -0-) <b>or</b>
	1) TIVIV as OF 1273 1703	as of 12/31/69	over col (j), if any		Losses (from co	I. (n)) 
a						323,371.
b						<del>_</del> .
С						
<u>d</u>						<u> </u>
e						
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		323,371.
3		ain or (loss) as defined in sections				
	If gain, also enter in P	art I, line 8, column (c). See in:	structions. If (loss), enter -0- in			
				3		
Par	t V Qualification U	nder Section 4940(e) for Red	uced Tax on Net Investment Ir	icome		
Was			outable amount of any year in the b	ase perio	d?	Yes X No
1			ar; see the instructions before making	no any er	ntries	
<u> </u>	(a)			ig ally ci	(d)	
Cale	Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
	2016	672,132.	14,220,938.			0.047264
	2015	390,549.	15,034,716.	ļ		0.025976
	2014	356,882.	15,893,815.	<u> </u>		0.022454
	2013	940,614.	16,135,868.			0.058293
	2012	900,632.	14,369,772.			0.062675
						0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2				2		0.216662
3	•	•	de the total on line 2 by 5.0, or by			
	the number of years the	foundation has been in existence	ıf less than 5 years	3		0.043332
4	Enter the net value of no	oncharitable-use assets for 2017 f	rom Part X, line 5	4	13	<u>,65</u> 4,689.
5	Multiply line 4 by line 3			5		591,685.
6	, , ,			6		1,041.
7						592,726.
8						840,718.
0	If line 8 is equal to or given Part VI instructions.	greater than line 7, check the bo	x in Part VI, line 1b, and complete		t using a 1% to	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruction	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here	· 1000000000000000000000000000000000000	
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1,	041.
	here X and enter 1% of Part I, line 27b		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J Part I, line 12, col (b).	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		<u>NONE</u>
3	Add lines 1 and 2	1,	041.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		<u>NONE</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	1,	041.
6	Credits/Payments Credits/Payments		
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 3,664.		
b	Exempt foreign organizations - tax withheld at source		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE		
d	Backup withholding erroneously withheld	-","" ) F-% , } !.	
7	Total credits and payments Add lines 6a through 6d	3,	<u>664.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		600
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	2,	<u>623.</u>
11	Enter the amount of line 10 to be. Credited to 2018 estimated tax ▶ 2,623. Refunded ▶ 11		<del></del>
	t VII-A Statements Regarding Activities	1 mg	T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a Yes	No X
	participate or intervene in any political campaign?	10	+ A
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1ь	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		
	published or distributed by the foundation in connection with the activities.		1 1 2 2 3 1
	Did the foundation file Form 1120-POL for this year?	1c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	3.5 Pag	
u	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$		15005
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		
_	on foundation managers.   \$	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1,25
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
	If "Yes," attach a detailed description of the activities.		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	7.4 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	+-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
	If "Yes," attach the statement required by General Instruction T.		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1,5
	By language in the governing instrument, or		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		الأساع الم
	conflict with the state law remain in the governing instrument?	6 X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions TX		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		
	(or designate) of each state as required by General Instruction G7 If "No," attach explanation	8b X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"		
	complete Part XIV	9	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	,	,
	names and addresses	10 X	
	Fo	orm <b>990-PF</b>	(2017)

Part	t VII-A Statements Regarding Activities (continued)				
		4	推致 '	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within	ı the	Ì		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	L <u>'</u>	11	:	<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqui	alıfied			
	person had advisory privileges? If "Yes," attach statement See instructions	· .	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica-		13	Х	
	Website address ► N/A	·			
14	The books are in care of ▶ BANK OF TEXAS, N.A. Telephone no. ▶ (918	)619-1	.527	ı	
	Located at ▶ PO BOX 1620, TULSA, OK ZIP+4 ▶ 74				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			. ▶	$\prod$
	and enter the amount of tax-exempt interest received or accrued during the year				
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other at		1	Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the na	t en			
	the foreign country	110.			
Part	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	75 16		Yes	No
1a	During the year, did the foundation (either directly or indirectly)	變	第77	£	第
		No 🕏			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_ 		5 d 1 15	
		No 🏅		33	
		No 🗟		171.	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No 🖟		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9 🖺
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		\$2. P		
		No 🖹		(m)	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_	763	191 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	X (2)
	foundation agreed to make a grant to or to employ the official for a period after		72.0	4	7 ( ) ( ) (4 kg
		No 📑			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regula	ations		ار مادر ا الرساد ا	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		1b		X
	Organizations relying on a current notice regarding disaster assistance, check here				
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	that		1913	<b>建筑</b>
	were not corrected before the first day of the tax year beginning in 2017?	L	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a p	orivate 🏻			据
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).				
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	_			
	6e, Part XIII) for tax year(s) beginning before 2017?	No 🖁			
	If "Yes," list the years				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942	?(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(	2) to 🗓	西對	area.	
	all years listed, answer "No" and attach statement - see instructions.)	🖵	2b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	3			
	<b>&gt;</b>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
	at any time during the year?	No 🖔			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation	on or 🗟		· 操	NA.
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved b	y the 🖫			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lap	1251			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine in	f the 🗓	H.		
	foundation had excess business holdings in 2017.)	L	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purp		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardi	ze its 🖫	<b>建筑</b>		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in	2017?	4b		Х
		· ·	. 007	DE	(2017)

Par	VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Req	uired (continued)	
5a	During the year, did the foundation pay or incur any amount	unt to			Yes No
	(1) Carry on propaganda, or otherwise attempt to influen	ice legislation (section	n 4945(e))?	. Yes X No	
	(2) Influence the outcome of any specific public elec-	ction (see section 4	1955), or to carry or	ı, <u> </u>	
	directly or indirectly, any voter registration drive?			. Yes X No	
	(3) Provide a grant to an individual for travel, study, or ot	her similar purposes?		. Yes X No	
	(4) Provide a grant to an organization other than a				
	section 4945(d)(4)(A)? See instructions			. Yes X No	
	(5) Provide for any purpose other than religious, ch	aritable, scientific, I	iterary, or educationa	'	
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	xceptions described in	
	Regulations section 53.4945 or in a current notice regard	ding disaster assistan	ce? See instructions .		5b
	Organizations relying on a current notice regarding disast	ter assistance, check	here		
c	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	ax	
	because it maintained expenditure responsibility for the g	rant?		. Yes No	
	If "Yes," attach the statement required by Regulations sec				
6a	Did the foundation, during the year, receive any fun	ds, directly or indire	ectly, to pay premiur	ns	
	on a personal benefit contract?			Yes X No	
b	Did the foundation, during the year, pay premiums, direct				6b X
	If "Yes" to 6b, file Form 8870.		•		
7a	At any time during the tax year, was the foundation a par	ty to a prohibited tax	shelter transaction?.	. Yes X No	, , , , , , , , , , , , , , , , , , ,
b	If "Yes," did the foundation receive any proceeds or have				
Par	Information About Officers, Director and Contractors	rs, Trustees, Fou	ndation Manager	s, Highly Paid Em <sub>l</sub>	oloyees,
1	List all officers, directors, trustees, foundation ma	nagers and their	compensation. See	instructions.	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account,
	(a) Name and address	devoted to position	enter -0-)	and deferred compensation	other allowances
SEE	STATEMENT 12		176,610.		<del></del>
			<u></u>		<del></del>
			<del></del>		
2	Compensation of five highest-paid employees	(other than the	a included on line	1 - see instruction	ne) If none enter
2	"NONE."	(Other than thos	e iliciadea on ilin	e i - see mstruction	nisj. ii none, enter
-		(b) Title, and average		(d) Contributionsto employee benefit	(e) Expense account,
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allowances
				Compensation	
NON	<u> </u>		NONE	NONE	NONE
11011			NONE	NONE	NONE
					•
	· · · · · · · · · · · · · · · · · · ·				
Total	number of other employees paid over \$50,000				NONE
: ui	The man of other employees paid over 400/000				Form 990-PF (2017)

Form 9	990-PF (2017)		Page <b>7</b>
Part	Information About Officers, Directors, Trustees, Formand Contractors (continued)	oundation Managers, Highly Paid Empl	oyees,
3	Five highest-paid independent contractors for professional serv	rices. See instructions. If none, enter "NOI	VE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NON	T.	<del></del>	NONE
11011	<u> </u>		HOME
	- · · · · · · · · · · · · · · · · · · ·		_
	<del></del>		
Total	I number of others receiving over \$50,000 for professional services	s	NONE
Par	IX-A Summary of Direct Charitable Activities	<del></del>	
	st the foundation's four largest direct charitable activities during the tax year. Include ganizations and other beneficiaries served, conferences convened, research papers pro-		Expenses
1 <u>N</u>	ONE		
_			
2		·	
<b>-</b> -			
_			
3_			
_			
4_			
-			
Part	Summary of Program-Related Investments (see in	nstructions)	.
	scribe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
1 <u>N</u>	ONE		
-			
2_			
_		<del></del>	
All	other program-related investments. See instructions		
3 <u>N</u>	ONE		
-			
Total	1. Add lines 1 through 3		
			- 000 DE

Day	Minimum Investment Detum /All demostic foundations must complete the next Europe	an four	ndations
rain.	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	gri ioui	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes:		
а	Average monthly fair market value of securities	1a	5,705,050.
b	Average of monthly cash balances	1b	182,441.
C	Fair market value of all other assets (see instructions)	1c	7,975,137.
	<b>Total</b> (add lines 1a, b, and c)	1d	13,862,628.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	13,862,628.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	207,939.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	13,654,689.
6	Minimum investment return. Enter 5% of line 5	6	682,734.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations, check here ▶ and do not complete this part.)	dations	
_		1	682,734.
1	Minimum investment return from Part X, line 6	•	002,734.
2 a	Tax on investment income for 2017 from Part VI, line 5 2a 1,041.		
	Income tax for 2017. (This does not include the tax from Part VI.) 2b		1,041.
	Add lines 2a and 2b	2c	681,693.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 4	NONE
4	Recoveries of amounts treated as qualifying distributions	5	
5	Add lines 3 and 4	6	681,693. NONE
6	Deduction from distributable amount (see instructions)	В	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	,	601 602
	line 1	7	681,693.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	840,718.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	840,718.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	1,041.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_	839,677.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 990-PF (2017)

Par	XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d)</b> 2017
	line 7 ,				681,693.
	Undistributed income, if any, as of the end of 2017				
	Enter amount for 2016 only			NONE	
	Total for prior years 20,20,20	_	NONE		
	Excess distributions carryover, if any, to 2017.				j
	From 2012 149,564.				
b	From 2013 142,727.				
	From 2014 NONE				
	From 2015 NONE				
	From 2016 NONE				
_	Total of lines 3a through e	292,291.			
	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$840,718				· · · · · · · · · · · · · · · · · · ·
	Applied to 2016, but not more than line 2a			NONE	
	· · · · · · · · · · · · · · · · · · ·				
	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
	· ·				
	Treated as distributions out of corpus (Election required - see instructions)	NONE			
	Applied to 2017 distributable amount				681,693.
	Remaining amount distributed out of corpus	159,025.			
	Excess distributions carryover applied to 2017	NONE			NONE
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a).)  Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	451,316.			
	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions		NONE		
е	Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f	Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				NONE
	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be	NONE			
_	required - see instructions)	IVOINE			
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	149,564.			
9	Excess distributions carryover to 2018.	224 555			
	Subtract lines 7 and 8 from line 6a	301,752.			
10	Analysis of line 9.				
а	Excess from 2013 142,727.				
b	Excess from 2014 NONE		]		
C	Excess from 2015 NONE			ļ	
d	Excess from 2016 NONE				
<u>e</u>	Excess from 2017				Form <b>990-PF</b> (2017

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

JSA
7E1490 1 000

Form 990-PF (2017)

SEE ATTACHED STATEMENT FOR LINE 2

Part XV Supplementary Information (continued)

Recipient Name and address (home or business)	g the Year or Appro	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 25				769,220.
				•
•				
Total		l		769,220.
b Approved for future payment		<u></u>		705,220.
b Approved to rature payment				
•				
	,			
T	l	L	▶ 3b	
Total				i e

Form **990-PF** (2017)

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelated business income Ex		Excluded by	section 512, 513, or 514	(e)		
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)		
a							
b	· · ·						
с					-		
d							
e							
f			-				
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments -							
4 Dividends and interest from securities			14	125,115.			
5 Net rental income or (loss) from real estate.	1, , 1, 1, 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 1 3 3 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 2 2 1 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
a Debt-financed property							
<b>b</b> Not debt-financed property				-164,291.			
6 Net rental income or (loss) from personal property							
7 Other investment income							
8 Gain or (loss) from sales of assets other than inventory	/		18	323,371.			
9 Net income or (loss) from special events · · ·		<u></u>					
10 Gross profit or (loss) from sales of inventory							
11 Other revenue. a			1.4	0.466	<u> </u>		
b BOKF PRIVATE EQUIT			14	-9,466.			
c			-				
d			<u></u>				
e	-		- 1	274 720			
<ul><li>12 Subtotal. Add columns (b), (d), and (e)</li><li>13 Total. Add line 12, columns (b), (d), and (e)</li></ul>				274,729.			
Part XVI-B Relationship of Activities  Line No. Explain below how each activities accomplishment of the foundation	ty for which	h income is reported in	n column (	e) of Part XVI-A contrib			
			-				
		NOT APPLICABL	E				
•							

## Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

		e organization directl									Yes	No
	in sec	tion 501(c) (other	than section	501(c)(3)	organizations)	or in section	on 527, rel	ating to	political			
	_	zations <sup>7</sup>								į		1
		ers from the reporting	=								~	
		sh								1a(1)		<u>X</u>
	(2) Oth	ner assets								1a(2)		<u>X</u>
		transactions:									- <b>-</b> -	_ 1
		es of assets to a none										<u>X</u>
		rchases of assets fror										X
		ntal of facilities, equip										X
		mbursement arrange										X
		ans or loan guarantee										X
		formance of services										X
		g of facilities, equipm									<u> </u>	
		answer to any of th of the goods, other a										
		n any transaction or										
	ne no	(b) Amount involved	, <u> </u>		exempt organization		cription of transfe					
(a) Li	iie iio	(b) Amount mvoived	(c) Name of the	Unchantable	exemplorganization	- (0, 00)	cription of transit	3, (1811380	tions, and snar	mg arre	nigenie.	
				_				-				
							·					
	-											
					· · · · · ·							
_					_							
		<u> </u>					. <u>-</u>					
2a	Is the	foundation directly	or indirectly aff	iliated wi	th, or related to,	one or mor	re tax-exempt	organiz	ations		_	_
	describ	ped in section 501(c)	(other than sec	tion 501(	c)(3)) or in section	ո 527 <sup>7</sup> ․			[	Y	es 🔼	X No
<u>b</u>	If "Yes	" complete the follow	wing schedule.									
		(a) Name of organization	n		(b) Type of organizatio	n		c) Descript	ion of relation	ship		
	Hada	r penalties of perjury, I decla	are that I have avern	and this satur	n including accompany	a cabadulas and	statements and t	a the best	of my knowledg	and i	haliaf it	ie truo
		ct, and complete Declaration of						U 1116 D651	OI IIIY KIIOWIGUŞ	ja ana	ooner, it	13 (100,
Sigr	1	$\alpha$		اء	1 /00 /2010	TITAD	יחתדטתמת	יתי	May the IRS			
Here					1/09/2018		PRESIDE	NT.	with the pro		7 1	
	19	nature office of the	IOMBB	Da	ite	Title			See instruction	ns	Yes	No
	I R	OKF, N.A., TRU Print/Type preparer's na	ISTEE	Proper	er's signature		Date	1	<u> </u>	PTIN		
Paid	l	Timo Type preparer sina	me	Frepare	or o orginature		Date		" [			
	arer	<del></del>				_,		<u>_</u>	f-employed			
-	Only	Firm's name						Firm's EIN	<u> </u>			
USE	Unity	Firm's address						Dharra -				
		1			<del></del>			Phone no		,,, QQ	0-PF	(2017)
									ru			(2017)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES 

NET INVESTMENT INCOME	,993.	28.	,871. 6,87	,168. 3,16	454. 45	,086. 5,08	939. 975.	,055. 1,05	,588. 6,58	65. 26	,646. 14,64	,501. 2,50	,697. 3,69	,665. 1,66	,436. 3,43	,763. 1,76	38. 23	,440. 4,44	888. 88	,225. 2,22	,583. 3,58	,714.	,192. 36,19	94. 19	,848. 4,84	,262. 2,26	,181. 8,18	,600. 2,6	5,115. 125,115.	
REVENUE AND EXPENSES PER BOOKS	2		9	3		C			9		14	2	(*)		(*)			4			(*)	M ;	36		4		ω		125	
DESCRIPTION	#1521	MOND HILL LONG/SHORT-I	COX STK FD	STRAT VAL DIV-INST	HI YLD BD-INST #090	II YLD BD-R6 #022	σ	1986#	#288	Н	L EQ INC-I #1	VAL M/	UR INC-I #142	MFS VAL-R6 #4810		I #1483	3R EQ	-I #051	L MID	T #0799	INTL USD HEDGED-INST #0103	STOCKSPLUS ABS RET-INST #	PIMCO INC-INST #1821		532	ST FD#1931	) ID	VANGUARD M/C GRWTH INDX-ADM #5832	TOTAL	

STATEMENT

DESCRIPTION

FORM 990PF, PART I - OTHER INCOME

REVENUE

AND

BOKF PELP K-1

TOTALS

-9,466. -9,466. INVESTMENT INCOME 1 1 1 1 1 -9,466. -9,466. PER BOOKS EXPENSES

STATEMENT

FORM 990PF, PART I - LEGAL FEES

CHARITABLE PURPOSES	 	13,907.	13,907.	
ADJUSTED NET INCOME	1 1 1 1		NONE	
NET INVESTMENT INCOME	! ! !	10,693.		
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1	13,907.		
			TOTALS	
DESCRIPTION		PLAN REVIEW LEGAL FEES REAL ESTATE LEGAL FEES		

STATEMENT

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	6,000.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	6,000.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

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CHARITABLE PURPOSES	3,774. 3,664. 7,438. ====================================
NET INVESTMENT INCOME	2,541. 214. 2,755.
REVENUE AND EXPENSES PER BOOKS	3,774. 3,664. 2,541. 214. 10,193.
DESCRIPTION	FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED

 $\boldsymbol{\Sigma}$ 

STATEMENT

FORM 990PF, PART I - OTHER EXPENSES

ADJUSTED NET INCOME	164,291.	164,291.
NET INVESTMENT INCOME	164,291. 7,212.	171,503.
REVENUE AND EXPENSES PER BOOKS	164,291. 7,212.	171,503.
DESCRIPTION	RENT AND ROYALTY EXPENSES OTHER NON-ALLOCABLE EXPENSE -	TOTALS

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

DESCRIPTION

BONDS

TOTALS

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THE OLIVER DEWEY MAYOR FOUNDATION 4//UDS

FORM 990PF, PART II - CORPORATE STOCK

FORM 990PF, PART II - CORPORATE BONDS	

ENDING FMV 	366,715. 594,335. 292,076. 352,435. 237,095. 276,994. 321,940. 82,975. 366,415. 44,018. 282,942. 46,940. 143,521. 83,299. 120,418.	
ENDING BOOK VALUE	152,783. 303,680. 296,514. 270,989. 175,528. 243,222. 87,560. 70,475. 370,062. 32,740. 275,765. 39,858. 140,556. 79,917.	
	TOTALS	
DESCRIPTION	AMER BEACON L/C VAL-INST #0066  DODGE & COX STOCK #0145  FIDELITY CONTRAFUND-I #0022  JANUS HENDERSON GLBL EQ INC-I JOHN HANCOCK DISC VAL M/C-I #3  MAINSTAY L/C GRWTH-I #1483  NEUB BERMAN GENESIS-INST #1229  OPPENHEIMER DEV MKTS-I #0799  T ROWE NEW HORIZONS-I #0532  VANGUARD M/C GRWTH INDX-ADM #5  AQR MULTI STRAT ALT-I #15217  DIAMOND HILL LONG/SHORT-I #001  NATIXIS GATEWAY-Y #1986  OAKWARKINTL-INST#2886  OAKWARKINTL-INST#2886  OAKWARKINTL-INST#2886  OAKWARKINTL-INST#2886  OAKWARLINTL STRAT VAL DIV-INST #  MFSVAL-I #0893  MASSMUTUAL SEL M/C GR EQ II-I#  PIMCO STOCKSPLUS ABS RET-INST  FIRST EAGLE GLBL-I #0901  INVESCO QQQ TRUST SERIES 1	

477006019

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THE OLIVER DEWEY MAYOR FOUNDATION 477006019 - OTHER INVESTMENTS FORM 990PF, PART II

75-1864630

DESCRIPTION

COST/ FMV C OR F 1 1 1

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PARTNERSHIP INTEREST

TOTALS

ENDING BOOK VALUE

ENDING FMV 1 70,366.

70,366.

70,366.

70,366. 

FORM 990PF, PART II - OTHER ASSETS 

DESCRIPTION

SALMON LATERAL FILE SALMON CREDENZA

TOTALS

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 ·FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES \_\_\_\_\_\_ OFFICER NAME: GAIL UTTER ADDRESS: 2027 TEXOMA PARKWAY SHERMAN, TX 75091 TITLE: **GOVERNOR** AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2 COMPENSATION ..... 2,000. OFFICER NAME: BANK OF TEXAS, NA ADDRESS: P.O. BOX 1088 SHERMAN, TX 75091 TITLE: CORPORATE AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20 166,610. COMPENSATION ...... OFFICER NAME: JACKIE DRYDEN ADDRESS: P.O. BOX 1088 SHERMAN, TX 75091 TITLE: **GOVERNOR** AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2 2,000. COMPENSATION ...... OFFICER NAME: HORACE GROFF ADDRESS: P.O. BOX 1088 SHERMAN, TX 75091 TITLE: GOVERNOR AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2 2,000. COMPENSATION .....

·FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

MARGO SHERRER

ADDRESS:

P.O. BOX 1088

SHERMAN, TX 75091

TITLE:

GOVERNOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

2,000. COMPENSATION .....

OFFICER NAME:

CAROLYN DEXHEIMER

ADDRESS:

P.O. BOX 1088

SHERMAN, TX 75091

TITLE:

GOVERNOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

2,000. COMPENSATION .....

TOTAL COMPENSATION:

176,610.

==========

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

MELVIN CAMP, THE O.D. MAYOR FDN.

ADDRESS:

C/O BANK OF TX 307 W. WASHINGTON

SHERMAN, TX 75090

RECIPIENT'S PHONE NUMBER: 903-813-5118

FORM, INFORMATION AND MATERIALS:

WRITTEN APPLICATION DESCRIBING THE SPECIFIC NEEDS OF THE APPLICANT

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

GRANTS ARE PROVIDED TO QUALIFIED ORGANIZATIONS WITHIN MAYES COUNTY, OKLAHOMA OR GRAYSON COUNTY, TEXAS FOR CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID . \_\_\_\_\_\_ RECIPIENT NAME: MAYES COUNTY SHERIFF'S OFFICE ADDRESS: 1 COURT PL #150 PRYOR, OK 74361 AMOUNT OF GRANT PAID ..... 20,000. RECIPIENT NAME: ADAIR COMMUNITY FOR EXCELLENCE IN EDUCATION FOUNDATION ADDRESS: PO BOX 731 ADAIR, OK 74330 15,474. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: GRAND CENTRAL STATION CENTER ADDRESS: 2610 SHENANDOAH CIRCLE SHERMAN, TX 75092 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOR STATION FOUNDATION STATUS OF RECIPIENT: 501 (C) (3) RECIPIENT NAME: MAYES COUNTY HOPE FIT KIDS

AMOUNT OF GRANT PAID .....

ADDRESS:

PO BOX 1346 PRYOR, OK 74362

15

12,145.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHOUTEAU LIBRARY ADDRESS: PO BO 1270 CHOUTEAU, OK 74337 38,168. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: WOMEN ROCK ADDRESS: 225 E. HOUSTON ST. SHERMAN, TX 75090 RECIPIENT NAME: DENISON MAIN STREET INC ADDRESS: 500 W CHESTNUT DENISON, TX 75021 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: HELPING HANDS POTTERY INC ADDRESS: 2610 SHENANDOAH CIR SHERMAN, TX 75092 AMOUNT OF GRANT PAID ...... 5,000. RECIPIENT NAME: HOUSE OF ELI, INC ADDRESS: 123 S RICKETTS SHERMAN, TX 75092

AMOUNT OF GRANT PAID .....

20,000.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: AMERICAN RED CROSS TEXOMA CHAPTER ADDRESS: 2427 FM 691 DENISON, TX 75020 10,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: INDIAN NATIONS COUNCIL BOY SCOUTS OF AMERICA ADDRESS: 4295 SOUTH GARNETT TULSA, OK 74146 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT ORGANIZATION FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: GRAND GATEWAY EDA/PELIVAN TRANSIT P.O. DRAWER B ADDRESS: 333 S. OAK BIG CABIN, OK 74332 RELATIONSHIP: NONE

PURPOSE OF GRANT: SUPPORT TRANSIT

501(C)(3)

FOUNDATION STATUS OF RECIPIENT:

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SALINA PUBLIC SCHOOL ADDRESS: P.O. BOX 98 SALINA, OK 74365 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOR SCHOOL FOUNDATION STATUS OF RECIPIENT: NON PROFIT RECIPIENT NAME: SOUTHWESTERN OKLAHOMA STATE UNIVERSITY ADDRESS: 100 CAMPUS DR WEATHERFORD, OK 73096 AMOUNT OF GRANT PAID ..... 4,845. RECIPIENT NAME: PRYOR RESCUE MISSION, INC. P.O. BOX 142 ADDRESS: 640 W. GRAHAM PRYOR, OK 74362 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID .....

15,000.

PURPOSE OF GRANT:

501(C)(3)

SUPPORT FOR GENERAL OPERATIONS FOUNDATION STATUS OF RECIPIENT:

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHILD ADVOCATES OF NORTHEAST OK ADDRESS: 200 S LYNN RIGGS BLVD CLAREMORE, OK 74017 AMOUNT OF GRANT PAID ..... 6,000. RECIPIENT NAME: BOYS & GIRLS CLUB OF GREEN COUNTRY ADDRESS: PO BOX 354 PRYOR, OK 74362 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT AFTER-SCHOOL AND NUTRITION PROGRAMS FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID ...... 40,000. RECIPIENT NAME: PRYOR AREA FOUNDATION ADDRESS: P.O. BOX 367 PRYOR, OK 74362-0367 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT OF FARMER'S MARKET FOUNDATION STATUS OF RECIPIENT: 501(C)(3) AMOUNT OF GRANT PAID ..... 35,000. RECIPIENT NAME: WILLIAM W. BARNES CHILDRENS ADVOCACY CENTER ADDRESS: PO BOX 1889 CLAREMORE, OK 74018

AMOUNT OF GRANT PAID .....

6,785.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OSAGE SCHOOL CO43 PROJECT C.A.L.M ADDRESS: 7960 W 490 RD 79 PRYOR, OK 74361 AMOUNT OF GRANT PAID ..... 6,450. RECIPIENT NAME: PRYOR PUBLIC SCHOOLS ADDRESS: P.O. BOX 548 PRYOR, OK 74361 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT FOR SCHOOL PROGRAM FOUNDATION STATUS OF RECIPIENT: NON PROFIT RECIPIENT NAME: INDEPENDENT ORDER OF ODD FELLOWS ADDRESS: 219 N E 1ST ST PRYOR, OK 74362 AMOUNT OF GRANT PAID ..... 5,000. RECIPIENT NAME: MAYES CO OSU COOP EDUCATION ADDRESS: POB 39

PRYOR, OK 74362

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BOYS & GIRLS CLUB OF SHERMAN ADDRESS: 1500 N LUCKETT ST SHERMAN, TX 75090 RECIPIENT NAME: THE SHERMAN MUSEUM ADDRESS: 301 S. WALNUT SHERMAN, TX 75090 AMOUNT OF GRANT PAID ..... 5,000. RECIPIENT NAME: THE SHERWOOD SHORES VOLUNTARY FIRE DEPARTMENT ADDRESS: PO BOX 602 GORDONVILLE, TX 76245 RECIPIENT NAME: DENISON HELPING HANDS ADDRESS: 418 WEST CHESTNUT DENISON, TX 75020 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FEEDING THE HUNGRY PROGRAM FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID .....

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501(C)(3)

15,000.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GORDONVILLE VOLUNTEER FIRE DEPARTMENT ADDRESS: PO BOX 451 GORDONVILLE, TX 76245 RECIPIENT NAME: TEXOMA AREA PARATRANSIT SYSTEMS ADDRESS: 6104 TEXOMA PARKWAY SHERMAN, TX 75090 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT FOR GENERAL EXPENSES FOUNDATION STATUS OF RECIPIENT: 501 (C) (3) AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: GRAYSON COUNTY SHELTER ADDRESS: 331 W MORTON ST SHERMAN, TX 75020 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID .....

SUPPORT

NONPROFIT

FOUNDATION STATUS OF RECIPIENT:

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40,000.

75-1864630 THE OLIVER DEWEY MAYOR FOUNDATION 477006019 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID 

RECIPIENT NAME:

GRAYSON COUNTY COLLEGE FOUNDATION

ADDRESS:

6101 GRAYSON DR DENISON, TX 75020

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

501 (C) (3)

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:

PROJECT TRANSFORMATION EDUCATIONAL

ADDRESS:

4024 CARUTH BLVD

DALLAS, TX 75225

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

DENISON ISD EDUCATION FOUNDATION

ADDRESS:

1201 S RUSK

DENISON, TX 75020

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

SUPPORT DUAL CREDIT COURSES

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:

SHERMAN COMMUNITY PLAYERS INC

ADDRESS:

500 N ELM

SHERMAN, TX 75090

5,000. AMOUNT OF GRANT PAID ......

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SHERMAN SYMPHONY ORCHESTRA ADDRESS: PO BOX 651 SHERMAN, TX 75091 AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: BOYS & GIRLS CLUB OF DENISON ADDRESS: 2100 S MIRICK DENISON, TX 75020 **RELATIONSHIP:** NONE PURPOSE OF GRANT: SUPPORT REMODELING PROJECT & SNACK PROGRAM FOUNDATION STATUS OF RECIPIENT: 501 (C) (3) AMOUNT OF GRANT PAID ..... 50,000. RECIPIENT NAME: THE CHILD AND FAMILY GUIDANCE ADDRESS: 804 E. PECAN GROVE ROAD SHERMAN, TX 75090 AMOUNT OF GRANT PAID ..... 20,000. RECIPIENT NAME: DENISON PUBLIC LIBRARY ADDRESS: 300 WEST GANDY DENISON, TX 75020 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID ......

SUPPORT FOR LIBRARY BUILDING PROGRAM

FOUNDATION STATUS OF RECIPIENT:

501(C)(3)

7,500.

THE OLIVER DEWEY MAYOR FOUNDATION 477006019 75-1864630 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PRYOR MINISTRIES CENTER ADDRESS: 5 NORTH VANN STREET PRYOR, OK 74361 RELATIONSHIP: NONE PURPOSE OF GRANT: SUPPORT FOR SUPPLIES/DIAPERS FOUNDATION STATUS OF RECIPIENT: 501 (C) (3) 66,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: GREATER TEXOMA HEALTH CLINIC ADDRESS: 900 N ARMSTRONG AVE DENISON, TX 75020 AMOUNT OF GRANT PAID ...... 24,000. RECIPIENT NAME: **MCROBO** ADDRESS: 1012 SE 14TH ST PRYOR, OK 74361

AMOUNT OF GRANT PAID ......

TOTAL GRANTS PAID:

25

11,000.

769,220.