Extended to November 16, 2020

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public.

Open to Public

		of the Treasury	Go to www.irs.gov/Form990 for instru				Open to Public Inspection	
A For the 2019 calendar year, or tax year beginning and ending								
В	Check i	f C Name o	forganization	<u> </u>		D Employer identifica	ation number	
	Addi	ess Okla	homa Speaker's Ball, Inc.					
늗	Nam Char	a V	usiness as			20-201808	ว	
F	Initia		and street (or P 0 box if mail is not delivered to street address	e)	Room/suite	E Telephone number		
F	Final	ם חם ו	ox 1524	>)	inouni/suite	405-795-0	588 Sa	
	term	ın-	own, state or province, country, and ZIP or foreign postal	code	L	G Gross receipts \$	597,050.	
	Ame	nded No. 70 m	an, OK 73070-1524	0000		H(a) Is this a group retu		
	Appl	F Name a	nd address of principal officer Robert G. McCa	ampbe:	11	for subordinates?	Yes X No	
	pend	same	as C above	_		H(p) Are all subordinates incli	uded? Yes No	
		xempt status	501(c)(3) X 501(c) (4) ◀ (insert no.)	4947(a)(1)	or 527]) $m{4}^{'}$ If "No," attach a lis	st (see instructions)	
			okspeakersball.com		1	H(c) Group exemption	number 🕨	
		of organization	X Corporation Trust Association Othe	r 🕨	L Year	of formation: 2004 M	State of legal domicile OK	
Pa	art I	Summary			<u> </u>			
ø	1		e the organization's mission or most significant activities					
Governance			rganize and execute an annual					
ern	2		if the organization discontinued its operations	s or dispos	sed of more	1 1		
Š	3		ing members of the governing body (Part VI, line 1a)			3	<u> </u>	
≪	i '		ependent voting members of the governing body (Part VI,	•		4	5	
Activities &	5		of individuals employed in calendar year 2019 (Part V, line	•		5	0	
₹	6		of volunteers (estimate if necessary)	nervad r 141 - 117	U. rank	P1410	5	
Ac	1				826		0.	
_	D	ivet urirelated	business taxable income from Form 990-T, line 39		131	7b		
	8	Contributions	and grants (Part VIII, line 1h)	NOV	(11) 2521	Prior Year 2 154,200.	Current Year 597,050.	
Revenue	9		ce revenue (Part VIII, line 2g)	1147	W SPE	- 134,200.	0.	
ž.	10	=	ome (Part VIII, column (A), lines 3, 4, and 7d)			0.	0.	
æ	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Ogd	en, UI	0.	0.	
	12		add lines 8 through 11 (must equal Part VIII, column (A),		, ,	154,200.	597,050.	
_	13		nilar amounts paid (Part IX, column (A), lines 1-3)	inie (Z)		0.	50,000.	
	14		o or for members (Part IX, column (A), line 4)			0.	0.	
S	15		compensation, employee benefits (Part IX, column (A), lin	nes 5-10)		17,500.	18,750.	
Expenses	16a		ndraising fees (Part IX column (A), line 11e)			0.	0.	
per			ng expenses (Part IX, column (D), line 25)		0.			
ũ	17	Other expense	s (Part IX, column (A), lines 11a-11d, 11f-24e)			101,868.	236,642.	
	18		Add lines 13-17 (must equal Part IX, column (A), line 25))		119,368.	305,392.	
	19	Revenue less e	expenses Subtract line 18 from line 12			34,832.	291,658.	
io S					Beg	jinning of Current Year	End of Year	
sets	20	Total assets (P	art X line 16)			223,102.	514,760.	
Net Assets or Eund Balances	21	Total liabilities	(Part X line 26)			0.	0.	
칊	22	Net assets or f	und balances Subtract line 21 from line 20			223,102.	514,760.	
	rt II	Signature						
			declare that I have examined this return, including accompanying				nowledge and belief, it is	
true,	corre	ct, and complete	Declaration of preparer (other than officer) is based on all inform	ation of wh	ich preparer l	nas any knowledge		
the stell / hum								
Sign Vignature of officer Voate						7-		
Here Chuck Thompson, Treasurer Type or print name and title								
		 			10	ate Check	T PTIN	
Paid		Print/Type prepared	arer's name Frace, CPA Preparer's signature	α	.	The Check Check Lift self employed	J	
Prep.	2101		Eide Bailly LLP	<u>~ { } \(\nu \) </u>	<u>υψ. μ</u> .		<u> </u> 1200841870 5-0250958	
						rimstiN ▶ 4:	7 0430330	
Use Only Firm's address ► 2402 Westport Dr. Norman, OK 73069-6336 Phone no 405-292-2900							-292-2900	
May	the II	RS discuss this	return with the preparer shown above? (see instructions)			Lenone no # 0.2		
ay	3.6 11	.c diacuss tills	recom was the biebaser anown above. (see instructions)			 .	X Yes No	

Forr.	m 990 (2019) Oklahoma Speaker's Ball, Inc	0-2018083	Page 2					
Pa	art 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							
•		an annual						
	The purpose of the corporation is to organize and execute a							
	Ball to inaugurate the current Oklahoma Speaker of the House							
	celebrate the commencement of the Oklahoma Legislative sess		to					
	benefit a worthy Oklahoma 501(c)(3) charitable organization	n						
2	Did the organization undertake any significant program services during the year which were not listed on the							
_	prior Form 990 or 990-EZ?	r √vos	X No					
	•	1 e2	<u> </u>					
	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	X 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 to the organization of the	sured 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								
		e total expenses, al	iu					
	revenue, if any, for each program service reported							
4a)					
	Organized and executed a gala event for approximately 1,000) people t	<u> </u>					
	celebrate the upcoming legislative session. As part of the	event,						
	raised \$50,000 for an Oklahoma charitable organization. Beg	ian						
	preparations for a similar event for 2021.							
	preparacions for a similar event for 2021.							
	· · · · · · · · · · · · · · · · · · ·							
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$))					
		<u></u>						
	·							
		·						
4-								
4c	(Code) (Expenses \$) (Revenue S))					
								
								
	_							
	Other program services (Describe on Schedule O)							
		\						
_	(Expenses S including grants of S) (Revenue S							
46	Total program service expenses > 296 689.							

Form **990** (2019)



20-2018083

Yes No

Form 990 (2019) Oklahoma Speaker's Ball, Inc.

Part IV Checklist of Required Schedules

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?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_		
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		Х
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		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in 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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
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		Х
С	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 167 If "Yes," complete Schedule D, Part IX	11 <u>d</u>		X_
е	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		Х
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			_V
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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			, v
	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			х
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			х
	column (A), lines 6 and 11e ⁹ If "Yes," complete Schedule G, Part I	17		┢ᢚ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		х
40	1c and 8a? If "Yes," complete Schedule G, Part II	_18		- ^``
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		х
00	complete Schedule G, Part III	20a		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		-^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX. column (A). line 12. If "Yes." complete Schedule I. Parts I and II.	21	х	
	QUINESUL QUVENIMENT UN FALLIA, CUIQUIN IAI, INECL. IL TES COMOIERE SCHEOUET FAUSTANOTI	ایما		

Page 4

	COMMINEU			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		X
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22	├─-	<u> </u>
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		T	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		.,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	-	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1	l	l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1	(April	Mid
20	instructions, for applicable filing thresholds, conditions, and exceptions)	335		
а	taring the second of the secon	2,445	1751 82 82 EX	*13 56
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	L	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	L	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			ι,,
0-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30		36		
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI lines 11b and 19?	<u> </u>		
•	Note. All Form 990 filers are required to complete Schedule O	38	х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
		لـــــا	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 11	ļ !		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	↓ !		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 1~ '	ı x l	

Page 5

			Yes	No				
2a	Enter the number of employees reported on Form W-3 Transmittal of Wage and Tax Statements,			.,,,				
	filed for the calendar year ending with or within the year covered by this return 2a 0		٠.	:				
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
~	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х				
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)	l	· ·	l				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
	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 chantable contributions?	6a	Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b	Х					
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7с						
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u> 7h						
h								
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	-					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter							
а	Initiation fees and capital contributions included on Part VIII, line 12	┨	1	'				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	┨						
11	Section 501(c)(12) organizations. Enter		-	.				
a	Gross income from members or shareholders 11a	┨						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		•					
40-	,	12a						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	 	,				
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		·				
a	Note: See the instructions for additional information the organization must report on Schedule O		<u> </u>					
h	Enter the amount of reserves the organization is required to maintain by the states in which the			[
b	organization is licensed to issue qualified health plans		ŀ					
	Enter the amount of reserves on hand	1						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000 000 in remuneration or							
	excess parachute payment(s) during the year?	15		х				
	If "Yes," see instructions and file Form 4720 Schedule N							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	-	Х "				
-	If "Yes," complete Form 4720, Schedule O							

Form 990 (2019) Oklahoma Speaker's Ball, Inc. 20-2018083 Pag
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 on Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI									
Sec	tion A. Governing Body and Management									
	•		Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5	,	,							
	If there are material differences in voting rights among members of the governing body, or if the governing	1								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	٠,								
b		-	ľ	, ,						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		١,							
_	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	<u> </u>								
·	of officers, directors, trustees, or key employees to a management company or other person?	3		х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5		-	<u> </u>	X						
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	Did the organization have members or stockholders?	6								
7a	, , , , , , , , , , , , , , , , , , ,	_		3.7						
	more members of the governing body?	7a		X						
b	, 5									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b		Х						
9	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 on Schedule O	9		<u> </u>						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
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?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		4							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	х							
13	Did the organization have a written whistleblower policy?	13	Х	-						
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	X							
	Other officers or key employees of the organization	15b		X						
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	100	-	 -						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1						
	taxable entity during the year?	16a	~~	X						
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104	··	 -						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16h								
Sect	tion C. Disclosure	16b								
17	List the states with which a copy of this Form 990 is required to be filed OK Section 6104 requires an erganization to make its Forms 1033 (1034 or 1034 A. if controlle), 000, and 000 T. (Section 501(a)(3))									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s	only)	avallat	иe						
	for public inspection. Indicate how you made these available. Check all that apply									
46	Own website Another's website Y Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinano	ial							
	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									
	Sarah Smith - 405-795-0588									
_	1725 Greenbriar Drive, Norman, OK 73072									

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orm 990 (2019)	OKIAHOMA	Speaker	5	ратт,	THC.

20-2018083

Page 7

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

Chack if Schedule C) contains a response o	r note to any line in	this Part VII
Check ii Schedule C) contains a response o	r note to any line in	uns 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

 See instructions for the order in which to list the persons above

Check this box if neither the organization ne	or any related	orga	nıza	tion	con	nper	ısat	ed any current officer, d	rector, or trustee	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(40	not c	Pos	ition	l than	one.	Reportable	Reportable	Estimated
	hours per	box	unle cer ar	ss pe	rson ı	s both	h an	compensation	compensation	amount of
	week	_	T ar	I	1 6010	T	100,	from	from related	other
	(list any hours for	Individual trustee or director				_	İ	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	0 00	stee			Highest compensated employee		(W-2/1099-MISC)	(** 2) 1000 111100)	organization
	organizations	truste	Institutional trustee) Aee	iad in		`		and related
	below	ıdual	tution	72	Key employee	est co	ě			organizations
	line)	ğ	as a	Officer	Key	돌	Former			
(1) Marian Free	10.00			ŀ					_	
Executive Director				X		L	L	11,750.	0.	7,000.
(2) Robert G. McCampbell	1.00									
Chair		Х		X		L		0.	0.	0.
(3) Mark Liotta	0.50]			l					
Vice Chair		X		Х		L	_	0.	0.	0.
(4) Chuck Thompson	1.00							_	_ :	_
Treasurer		X	L_	Х				0.	0.	0.
(5) Seigel Heffington	0.50]	_	_
Member		X	<u> </u>	<u> </u>		_	_	0.	0.	0.
(6) Casey Killblane	0.50							_		_
Member		Х	_		<u> </u>		ㄴ	0.	0.	0.
		_								
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16	Subtotal	▶ ∟	11,/50.	<u> </u>	•.	1,0	<u> </u>
С	Total from continuation sheets to Part VII, Section A	>	0.	0	•		0
d	Total (add lines 1b and 1c)	▶	11,750.	0	•	7,0	00
2	Total number of individuals (including but not limited to those listed	above) who recei	ived more than \$100,	000 of reportable			
	compensation from the organization						(
						Yes	No
3	Did the organization list any former officer, director, trustee, key em	ployee, or highes	st compensated empl	oyee on	<u>. </u>		
	line 1a? If "Yes," complete Schedule J for such individual				3		X
4	For any individual listed on line 1a, is the sum of reportable compensations.	sation and other	compensation from th	ne organization			
	and related organizations greater than \$150,000? If "Yes," complete	e Schedule J for s	such individual		4		X
5	Did any person listed on line 1a receive or accrue compensation from			ual for services			
	rendered to the organization? If "Yes," complete Schedule J for such	h person			5		Х
Sec	tion B. Independent Contractors	•					
1	Complete this table for your five highest compensated independent	contractors that	received more than \$	100.000 of compens	ation fr	om	

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	NONE	(B) Description of services	(C) Compensation
Total number of independent contractors (including by	out not limited to those li	sted above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

Oklahoma Speaker's Ball, Inc. 20-2018083 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Unrelated Revenue excluded Related or exempt Total revenue from tax under business revenue function revenue sections 512 - 514 1 a Federated campaigns Membership dues 16 Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 597,050 similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 597,050. Total. Add lines 1a-1f f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (i) Real 6 a Gross rents 6a b Less rental expenses 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a b Less cost or other basis and sales expenses Revenue c Gain or (loss) 7с d Net gain or (loss) Other 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c) See Part IV, line 18 8b **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV line 19 9a b Less direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code**

Part of the Control of the Control

0.

597,050.

d Áll other revenue

e Total. Add lines 11a-11d

Total revenue. See instructions

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									
	not include amounts reported on lines 6b, 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	1							
	and domestic governments. See Part IV, line 21	50,000.	50,000.	STREET OF THE STATE					
2	Grants and other assistance to domestic								
	individuals See Part IV, line 22				求的数别是被外类				
3	Grants and other assistance to foreign		1						
	organizations, foreign governments, and foreign								
	individuals See Part IV, lines 15 and 16			HARRISED WAR	of safe in wealth and a safe				
4	Benefits paid to or for members		<u>'</u>	的一种,但是一种的一种。	的现在分词是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个				
5	Compensation of current officers, directors,								
	trustees, and key employees	18,750.	18,750.						
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages								
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (nonemployees)								
а	Management	5,544.		5,544.					
b	Legal								
С	Accounting	1,280.		1,280.					
d	Lobbying		W. J. A. J. Wash To-Time Innerson, 1. 21411 Nov.	I S Manager of 643 of the wall of the Arms & which the					
е	Professional fundraising services See Part IV, line 17		SENTENCE THE	PAR MARKET					
f	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O.)								
12	Advertising and promotion								
13	Office expenses	846.		* 846.					
14	Information technology	1,033.		1,033.					
15	Royalties								
16	Occupancy	ļ			<u></u>				
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		· · · · · · · · · · · · · · · · · · ·						
23	Insurance	10 M T 20 H 11 W W 1 W 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A WAS TEXN A STORY	7.9864.2.7.992.5 5 5 4.47.W				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If	the second of the second second							
	line 24e amount exceeds 10% of line 25, column (A)								
	amount list line 24e expenses on Schedule 0) Event Consulting Fees	87,596.	87,596.	2 012 " 4 25 4 1 2 2 5	The state of the state of				
a	Q = 1 =	85,417.	85,417.						
b	Entertainment/Audio Vis	23,500.	23,500.						
C	Decorations	19,689.	19,689.	·	 				
đ		11,737.	11,737.		_				
	All other expensesAdd lights 1 through 24a	305,392.	296,689.	8,703.	0.				
25_ 26	Total functional expenses Add lines 1 through 24e	303,332.	220,003.	0,703.					
26	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.				-				
	Check here it following SOP 98-2 (ASC 958-720)				. , •				
					i i				

Cash - non-interest-bearing	شنا		Check if Schedule O contains a response or not	e to ar	ny line in this Part X	•		
Pleages and grants receivable, net Accounts receivable, etel Loans and other receivables from any current or former officer, director, trustees, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(i)(3)(8) 7 Notes and loans receivables from other disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(i)(3)(8) 7 Notes and loans receivables from other disqualified persons (as defined under section 4958(i)(1)), and persons described in section 4958(i)(3)(8) 7 Notes and loans receivables from other disqualified persons (as defined under section 4958(i)(3)(8) 7 Notes and loans receivables from other disqualified persons (as defined under section 4958(i)(3)(8) 8 Inventiores for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and deupment cost or other basis Complete Part Vi of Schedule D 11a Investments - problept traded securities 11a Interments - publicy traded securities 11b Interments - publicy traded securities 11c Investments - other securities See Part IV, line 11 11a Interments - publicy traded securities 11b Interments - publicy traded securities 11c Investments - other securities See Part IV, line 11 11a Investments - other securities See Part IV, line 11 11b Total assets, Add lines 11 through 15 (must equal line 33) 12a June 1 1		•	One of the control of	<u> </u>				
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	Vet Assets or Fund Balanc	27			223,102.	27	514,760.	
		28					28	
			Organizations that do not follow FASB ASC 95	eck here 🕨 🔲	127 6 1 W 128 5		"我们就还然们的 "	
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			Paid-in or capital surplus, or land, building, or equ		30			
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			Total net assets or fund balances	223,102.	32			
			Total liabilities and net assets/fund balances				33	

Form	1990 (2019) Oklahoma Speaker's Ball, Inc.	<u> </u>	2018083	Page	12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	_ 1		,05	
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 39	
3	Revenue less expenses Subtract line 2 from line 1	3		,65	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	223	,10	<u>2.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	.8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			<u>0.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	514	<u>,76</u>	<u>o.</u>
Pa	rt XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes i	No .
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		.	`_	. 1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	<u> </u>	· <u>·</u>	لغي
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X_</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		` <i>`</i>	٠. ا
	separate basis, consolidated basis, or both		. .	٠,١	٠. [
	Separate basis Consolidated basis Both consolidated and separate basis			<i>:</i>	ليد
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	-	: ' " ,,	it:
	consolidated basis, or both		1.1		I
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>	<u>`</u> -	
С	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?		2c	-, -	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch		-	-	لـــا
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi			37
	Act and OMB Circular A-133?	_	3a		<u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	1 1		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	200 -	
			Form 9	99U (20	U19)

SCHEDULE (Form 990) Internal Revenue Service

Department of the Treasury

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes'

▶ Go to www.irs.gov/Form990 for the latest information. ► Attach to For

390
rm 990.

Inspection

OMB No 1545-0047

Open to Public

% X Schedule I (Form 990) (2019) Employer identification number 20-2018083 (h) Purpose of grant or assistance Seneral Operating Yes 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 Expenses Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed .000 (d) Amount of cash grant 20 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Inc (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 46-5034403 501(c)(3) Oklahoma Speaker's Ball, Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government 720 W Wilshire Blvd #117 Oklahoma City, OK 73116 Name of the organization Fenaciously Teal Part I Part II

Page 2 Schedule I (Form 990) (2019) (f) Description of noncash assistance 20-2018083 (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, columi (b), and any other additional information 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 (d) Amount of non-cash assistance (c) Amount of cash grant Oklahoma Speaker's Ball, Inc. (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2019) 932102 10-26-19 Part III

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2019
Open to Public Inspection

Name of the organization Employer identification number 20-2018083 Oklahoma Speaker's Ball, Inc. Form 990, Part I, Line 1, Description of Organization Mission: Oklahoma Speaker of the House; to celebrate the commencement of the Oklahoma Legislative session; and to benefit a worthy Oklahoma 501(c)(3) charitable organization. Form 990, Part VI, Section A, line 8b: There are currently no committee able to act on behalf of the board. Form 990, Part VI, Section B, line 11b: The Form 990 is prepared by an independent accounting firm and reviewed by the Treasurer and Chair. Form 990, Part VI, Section B, Line 12c: The policy covers all Board members and Executive directors. Conflicts are reviewed and determined by the Chair of the Board. If the Chair has a conflict, it is reviewed and determined by the remaining board members. A person with a conflict has to recuse him/herself from any involvement with that particular matter. Form 990, Part VI, Section B, Line 15a: Executive Director is the only position listed above for which compensation is received. The Executive Director's compensation is reviewed and approved each year by the Board of Directors. The review includes the Chair of the Board comparing the Executive Director's compensation to other similar organizations in Oklahoma.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization Oklahoma Speaker's Ball, Inc.	Employer identification number 20-2018083
Form 990, Part VI, Section C, Line 19:	
The governing documents and conflict of interest policy ar	e publicly
available upon request to Oklahoma Speakers Ball, Inc. Fin	ancial statements
are publicly filed with the Oklahoma Ethics Commission and	are made
available online by the Commission.	