Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

	For th	e 2009 calendar year, or tax year beginning 7/01 , 2009, and ending	6/3	30	, 2010						
В	Check i	applicable: C		D Employer Iden	tification Number						
	Ac	Address change Please use CITY OF MUSKOGEE FOUNDATION INC. 26-305725									
	□ _{Na}	me change or type. 2932 NW 122ND STREET, SUITE D	1	E Telephone num	iber						
		See OKLAHOMA CITY, OK 73120-1955		405-755	-5571						
	H	Instruc-	- 1	400 700	7 3371						
	H			C .	- 20 015 054						
	\vdash	nended return	d(a) la ibia s	G Gross receipts group return for al							
	Ap			affiliates included?	⊨ "" ⊨ ""						
		Same As C Above		attach a list. (see ın	structions) Yes No						
		exempt status X 501(c) (3) ◄ (insert no.) 4947(a)(1) or 527									
1				exemption number							
K		of organization: X Corporation Trust Association Other L Year of Formatic	л: <u>20</u> 08	M State of	legal domicile: OK						
Pa	art I	Summary									
	1	Briefly describe the organization's mission or most significant activities: <u>TO_MAKE_A</u>	REAL	DIFFERENC	E IN MUSKOGEE						
0		BY EFFECTIVELY DEVELOPING, SUPPORTING, PROMOTING, AND I	<u>[MPRQV</u>	ING PROGR	AMS AND						
auc		FACILITIES_RELATING_TO_EDUCATION,_ARTSCULTURE,_COMMUN	NITY_R	EVITALIZA:	TION_AND						
Ē		BEAUTIFICATION, SOCIAL SERVICES, HEALTH CARE, ECONOMIC.									
ò		Check this box ▶ ☐ if the organization discontinued its operations or disposed of mor									
ত ক		Number of voting members of the governing body (Part VI, line 1a)			14						
89		Number of independent voting members of the governing body (Part VI, line 1b)			0						
Activities & Governance		Total number of employees (Part V, line 2a)			0						
₹		Total number of volunteers (estimate if necessary)			0.						
		Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34			0.						
-		Net unrelated business taxable income from Form 990-1, line 34									
				rior Year	Current Year						
<u>o</u>		Contributions and grants (Part VIII, line 1h).		,975,000.	12,300, 0 00.						
Revenue		Program service revenue (Part VIII, line 2g)		015 040	0 615 054						
چ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		,815,948.	8,615, 0 54.						
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		700 040	20 015 054						
		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	,790,948.	20,915,054.						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2	<u>,493,938.</u>	6,160,541.						
		Benefits paid to or for members (Part IX, column (A), line 4)									
ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)									
8	Ь	Total fundraising expenses (Part IX, column (D), line 25) ▶	William.	Victoria de la compansión de la compansi	Marca Carlotte						
Ш	l .	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		199,478.	314,072.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2	,693,416.	6,474,613.						
		Revenue less expenses. Subtract line 18 from line 12		,097,532.	14,440,441.						
. 2		revenue less expenses. Oubtract fine to front line 12	 	· · · · · · · · · · · · · · · · · · ·							
Nat Assets or Fund Belancos		Till I Daly Paris		ning of Year , 282, 069.	End of Year 100, 157, 845.						
	20	Total assets (Part X, line 16)		,184,537.	4,619,871.						
4 E	21										
	22	Net assets or fund balances. Subtract line 21 from line 20.	81	,097,532.	95,537 ,9 74.						
12	art II	Signature Block			 						
		Under penalties of penalty of declare that I have examined this return, including accompanying schedules and state true, correct, and complete, declaration of preparer (other than officer) is based on all information of which preparer	ments, and er has any i	lo the best of my kr knowledge.	nowledge and belief, it is						
٠.			1	11/22	190111						
Sig			 Dat	11/22	1010						
He	re	Signal/fe of officer	Dal	ie / /							
		Jan Jacky Chairma									
		Type or print name and title.		15							
_	•	Date	/ Ch	neck if	reparer's identifying number see instructions)						
Pa		Preparer's This de la contraction 1/1/27/		nployed -							
Pro	e- rer's	signature AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA		F	00104605						
υa Us		Firm's name (or Kathy Hewatt CPA Inc PC									
On		yours if self- employed), ► 207 N 3rd St	EII		510745						
		Address, and ZIP+4 Muskogee, OK 74401	Ph	ione no. 🕨 (91							
Ma	v the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No						

Form 990 (2009) CITY OF MUSKOGEE FOUNDATION INC.	26 -30572 50 Page 2
Part III Statement of Program Service Accomplishments	
1 Briefly describe the organization's mission:	
See Schedule O	
2 Did the organization undertake any significant program services during the year which was a service of the control of the co	were not listed on the prior
Form 990 or 990-EZ?	
If 'Yes,' describe these new services on Schedule O.	les K No
	any program services? Yes [X] No
If 'Yes,' describe these changes on Schedule O.	
4 Describe the exempt purpose achievements for each of the organization's three largest and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of the control of the organization.	program services by expenses. Section 501(c)(3)
expenses, and revenue, if any, for each program service reported.	ount of grants and anocations to others, the total
) (Revenue \$)
THE ORGANIZATION APPROVED GRANTS OF \$6,160,541 TO VARI	
RELATED TO ECONOMIC DEVELOPMENT, HEALTH AND WELLNESS, E	DUCATION AND OTHER
OPPORTUNITIES WHICH MET THE MISSION CRITERIA OF THE OR	
USED FOR PROGRAMS AS WELL AS PURCHASES OF MUCH NEEDED	
ACCESSIBLE PLAYGROUND EQUIPMENT.	indular addit tip time tone
41.40	
4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
·	
4c (Code:) (Expenses \$ including grants of \$	\ (Payanua
To looke) (Leveline \$)
	·
4d Other program services. (Describe in Schedule O.)	
(Expenses \$ including grants of \$) (Revenue \$)
4e Total program service expenses ► 6, 160, 541.	

Х

X

Х

Х

X

16

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Form 990 (2009) CITY OF MUSKOGEE FOUNDATION INC 26-3057250 Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 X 2 X 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II X 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III. 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Х 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 X Did the organization report an amount in Part X, line 21; 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 X 10 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X 11 Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part Vi..... • 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...... • Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes, complete Schedule D, Part X............ Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII. 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional..... 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 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II. 15 X

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H......

Form 990 (2009) CITY OF MUSKOGEE FOUNDATION INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
<u>22</u>	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ł	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? 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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	х	

BAA Form 990 (2009) Form 990 (2009) CITY OF MUSKOGEE FOUNDATION INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		ingli	We
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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			
2b	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 this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
Ь	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3Ь		
4 a	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: ►		93	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	3		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6 a	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?	6a		Х
Ь	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	MI		900
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		Х
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7Ь		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	-	X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	_	Λ
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business	X		MD.
	holdings at any time during the year?	8	_	
	Sponsoring organizations maintaining donor advised funds.	1500	-	- 20
	Did the organization make any taxable distributions under section 4966?	9a	-	_
	Did the organization make any distribution to a donor, donor advisor, or related person?	9 b	00-0	
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Initiation fees and capital contributions included on Part VIII, line 12	1963		Mar.
	Section 501(c)(12) organizations. Enter:	200		197
	Gross income from other members or shareholders		, L	181-
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			

BAA Form 990 (2009) Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	ection A. Governing Body and Management		_	
1.		1 4	Yes	No
	b Enter the number of voting members of the governing body	14		
		the second		
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any o officer, director, trustee or key employee?			Х
3	3 Did the organization delegate control over management duties customarily performed by or under the direct super of officers, directors or trustees, or key employees to a management company or other person?. See . Sch . O	vision 3	Х	
4	Did the organization make any significant changes to its organizational documents	4		Х
	since the prior Form 990 was filed?			
5	g			X
6			<u> </u>	X
7:	'a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		х
-	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7L		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following:	ır by		
a	a The governing body?	8a	Х	
	b Each committee with authority to act on behalf of the governing body?			Х
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O			x
	ction B. Policies (This Section B requests information about policies not required by the Ir			Λ
	venue Code.)			
			Yes	No
10 a	a Does the organization have local chapters, branches, or affiliates?	10a		X
ŧ	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliand branches to ensure their operations are consistent with those of the organization?	ates, 10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	? 11	Х	
11/	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedul	.e 0	4())	
	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X	
ŧ	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12Ь	Х	
•	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describ Schedule O how this is done	e in 12c		Х
13	Does the organization have a written whistleblower policy?	13	Х	
	Does the organization have a written document retention and destruction policy?		Х	
15	Did the process for determining compensation of the following persons include a review and approval by independence persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	lent		
	a The organization's CEO, Executive Director, or top management official			Х
	b Other officers of key employees of the organization		-	X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a tentity during the year?		MI = N	X
t	b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its partic in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's ex	ipation		
Sec	status with respect to such arrangements?	16Ь		
-	List the states with which a copy of this Form 990 is required to be filed None	_		
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s inspection. Indicate how you make these available. Check all that apply.	only) availat	le for	– – – public
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interstatements available to the public. See Schedule O	est policy, a	nd fina	ncial
20	State the name, physical address, and telephone number of the person who possesses the books and records of to SHERRIE SCHROEDER 2932 NW 122ND STREET, SUITE D OKLAHOMA CITY OK 73120	he organizat	ion:	

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(c)		(D)	(E)	(F)				
Name and Title	Average hours per week	individual trustee or director	institutional trustee	ched Officer	k Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
JOHN BARTON										
Chairman	0		<u> </u>				_	0.	0.	0.
BOB COBURN										
BOARD MEMBER	0			_	_			0.	0.	0.
MARTHA ALFORD										
Secretary	0							0.	0.	0.
SHARON PARKS	1									
Treasurer	0							0.	0.	0.
FRANK MERRICK										
Executive Direc	0							0.	0.	0.
JANEY_BOYDSTON]									
BOARD MEMBER	0							0.	0.	0.
GREG BUCKLEY										
BOARD MEMBER	0							0.	0.	0.
EARNIE GILDER										
BOARD MEMBER	0							0.	0.	0.
JAMES GULLEY]									
BOARD MEMBER	0						_	0.	0.	0.
DARRELL HAMBY										
BOARD MEMBER	0							0.	0.	0.
JOHN TYLER HAMMONS	J									
BOARD MEMBER	_0							0.	0.	0.
DR. TIMOTHY HOLDER]									
BOARD MEMBER	0				<u> </u>			0.	0.	0.
D'ELBIE WALKER]									
BOARD MEMBER	0							0.	0.	0.
MIKE WEBB										
BOARD MEMBER	0							0.	0.	0.
		\vdash								
	1									
		-						-		
	-									
	1									

Part VII Section A. Officers, Directors, Trus	tees, k	(ey	Εn	ıplo	оуе	es,	an	d Highest Cor	npensated Emp	loyees (cont.)
(A)	(B) (c) Average Position (check all that apply)							(D)	(E)	(F)
Name and Title				_				Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations	Estimated amount of other compensation
		ividua	pprp	Officer	y emp	Highest co employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related
	per week	or Itus	nstrubonal trustee		Key employee	compe				organizations
		8	ıstee			ersated				
						ă				
	_	\vdash				_				
						Н	_			
		Н					-			
		\vdash	_		Н				-	
	_	\Box			\blacksquare		\dashv			
			\dashv	_		_	_		-	
						\neg			-	
							_			
Total number of individuals (including but not limited)							<u> </u>	0.	0.	0.
from the organization • 0	1 10 11103	oc iis	icu	abc	,,,,	WILL	, 160	eived inote (nai)	proo,ooo in reporta	ible compensation
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	ee, k	еу (emp	loye	e, c	r hi	ghest compensate	ed employee	2
										3 X
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater the individual.	an \$15	0,00	0'? <i>I</i>	f 'Ye	es' d	om	olete	Schedule J for s	uch	4 X
5 Did any person listed on line 1a receive or accrue co	ompens	ation	fro	m a	πv ι	ınre	late	d organization for	services	
rendered to the organization? If 'Yes,' complete Sch	edule J	for :	suci	т ре	rsor	7			***************************************	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed indep	end	ent	con	trac	tors	that	received more th	an \$100,000 of	
compensation from the organization.								 -	· ·	
(A) Name and business address	3							(B) Description of	f Services	(C) Compensation
COMMUNITIES FOUNDATION OF OKLAHOMA 2932 NW 1		Т. 8	SUI	TE I	D 0:	KLA	MOH			286,500.
							-			
							-		-	
2. Total number of independent contractors (including	nut mat	line!!	- d 1	a 21-		lie4-	- I	hava\ wh=	d was as the	

\$100,000 in compensation from the organization ► 1

Pa	irt VIII Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 12,300,000. g Noncash contribus included in lns 1a-1f\$ h Total. Add lines 1a-1f	12,300,000.			
PROGRAM SERVICE REVENUE	2a				
PROGRA	f All other program service revenue g Total. Add lines 2a-2f				
	 3 Investment income (including dividends, interest and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalties. 	8,615,054.	8,615,054.		
	6a Gross Rents b Less: rental expenses. c Rental income or (loss)				
	d Net rental income or (loss)				
	c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events				
OTHER REVENUE	(not including: \$ of contributions reported on line 1c). See Part IV, line 18				
Ö	c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expensesb c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances				
	C Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a	on children			mirroga Agor
	b c d All other revenue				
	e Total. Add lines 11a-11d	20,915,054.	8,615,054.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundrais ing expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	6,160,541.	6,160,541.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0,100,541.	0,100,541.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
	Legal	8,009.		8,009.	
c	Accounting	2,900.		2,900.	
	Lobbying.				
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
g	Other				
12	Advertising and promotion	2,145.		2,145.	-
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	12,000.		12,000.	
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped logether and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	MANAGEMENT FEES	286,500.		286,500.	
b	D&O INSURANCE	2,174.		2,174.	
С	BANK FEES & REGISTRATION	344.		344.	
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	6,474,613.	6,160,541.	314,072.	0.
26	Joint costs. Check here Diffollowing SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

		(A) Beginning of year		(B) End of year
	1 Cash – non-interest-bearing		1	
	2 Savings and temporary cash investments	72,372,105.	2	98,961,651
;	3 Pledges and grants receivable, net		3	
- 1	4 Accounts receivable, net	104,605.	4	118,833
!	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
•	6 Receivables from other disqualified persons (as defined under section 4958(f)(1))			
	and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	1,077,363
	8 Inventories for sale or use		8	
11	9 Prepaid expenses and deferred charges		9	
10	Da Land, buildings, and equipment: cost or other basis. 10a			
	Complete Part VI of Schedule D			
	b Less: accumulated depreciation		10 c	
11			11	
12		9,805,358.	12	
13	programme progra		13	
14	3		14	
15		1.	15	
16		82,282,069.	16	100,157,84
17		22,599.	17	25,010
18		1,161,938.	18	4,594,863
19			19	
20	Tax-exempt bond liabilities		20	
21			21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	1.1370		
	of Schedule L		22	
23			23	
24			24	
25			25	
26		1,184,537.	26	4,619,871
	Organizations that follow SFAS 117, check here ► X and complete lines			
1	27 through 29 and lines 33 and 34,			and the same of
	Unrestricted net assets	81,097,532.	27	95,537,974
28	B Temporarily restricted net assets		28	
	Permanently restricted net assets		29	
1	Organizations that do not follow SFAS 117, check here ► and complete			HOW THE SE
30	lines 30 through 34.			
30			30	
31			31	
32			32	
31 32 33		81,097,532.	33	95,537,974
	Total liabilities and net assets/fund balances	82,282,069.	34	100, 157, 845

TEEA0111L 01/30/10

Pai	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		1531)	
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.	8.4		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
ŀ	Were the organization's financial statements audited by an independent accountant?	2b	Х	
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
C	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis	4 3		
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Х
t	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	36		

BAA Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number CITY OF MUSKOGEE FOUNDATION INC. 26-3057250 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 5 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 in section 170(b)(1)(A)(vi). (Complete Part II.) R A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c [Type II Type III — Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?..... 11 g (i) a family member of a person described in (i) above?..... 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organizations h (I) Name of Supported Organization (II) EIN (ill) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) is the rganization in col. (i) listed in your (v) Did you notify the organization in col. (i) of (vi) is the organization in col. (i) organized in the U.S.? (vii) Amount of Support your support? governing document? Yes No Yes No Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Se	ction A. Public Support	d tile box off life	, 5, 7, 61 6 61 1 art	1.)	.				
beg	endar year (or fiscal year inning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').				79975000.	12300000.	92,275,000.		
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.		
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.		
4	Total, Add lines 1-through 3	0.	0.	0.	79975000.	12300000.	92,275,000.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.		
	Public support. Subtract line 5 from line 4	Va v 18					92,275,000.		
Sec	ction B. Total Support								
beg	endar year (or fiscal year inning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
7	Amounts from line 4	0.	0.	0.	79975000.	12300000.	92,275,000.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.				3,815,948.	8,615,054.	12,431,002.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.		
11	Total support, Add lines 7 through 10						104706002.		
12	Gross receipts from related activit	ties, etc. (see ins	tructions)			12	0.		
	First five years. If the Form 990 is organization, check this box and	stop here		d, third, fourth, c	r fifth tax year as	a section 501(c)	(3)		
	tion C. Computation of Pub								
	Public support percentage for 200						%		
	Public support percentage from 26 a 33-1/3 support test — 2009. If the	•	•				heck this box		
	16a 33-1/3 support test — 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17 a	10%-facts-and-circumstances tes or more, and if the organization m the organization meets the 'facts-	neets the 'facts-ar	nd-circumstances'	test, check this	box and stop her	e. Explain in Part	IV how		
	10%-facts-and-circumstances tes or more, and if the organization n organization meets the 'facts-and	neets lhe 'facts-ar •circumstances' i	nd-circumstances' test. The organiza	test, check this : ation qualifie s as	box and stop her a publicly suppor	re. Explain i n Part rted organization	IV how the		
18 3AA	Private foundation. If the organization	ation did not ched	ck a box on line, 1	3, 16a, 16b, 1 7 a		-	structions . > 90 or 990-EZ) 2009		

Schedule A (Form 990 or 990-EZ) 2009	CITY OF	MUSKOGEE FO	OUNDATION II	NC.	26-3057250	Page 3
Part III Support Schedule for	Organization	ns Described i	n Section 509	(a)(2)		
(Complete only if you check	ked the box on I	ine 9 of Part I.)		_		
Section A. Public Support			1	_		
Calendar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						-
8 Public support (Subtract line						-
7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal yr beginning in) 🟲	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
similar sourcesb Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included inline 10b, whether or not the business is						

regularly carried on.....

12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)

13 Total support. (edd ins 9, 10c, 11, and 12.)

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

Sec	ction C. Computation of Public Support Percentage		
15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)	_15	%
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	%
Sec	ction D. Computation of Investment Income Percentage		
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (fi)	17	%

18 Investment income percentage from 2008 Schedule A, Part III, line 17..... 19 a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization......

- 1	σ 33-1/3 support tests $-$ 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 1 σ	8
	is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	•

%

Schedule A	(Form	990 or	990-E	Z) 2009	CITY	OF	MUSE	OGEE	FOU	ITADI	ON	INC.		26	-305	7250		Page 4
Schedule A	Supp Part	lemer II, line	ntal Ir : 17a	or 17b	tion. Ci ; and F	ompl art I	ete th	is par 12. F	t to pr Provid	ovide e any	the othe	explar er addi	nations r t <mark>ional in</mark>	require format	d by lion.	Part I See in	l, line 1 Istructio	0; ons.
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SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

* Attatch to Form 990.

Part | General Information on Grants and Assistance

CITY OF MUSKOGEE FOUNDATION INC.

Department of the Treasury Internal Revenue Service Name of the organization

OMB No. 1545-0047

2009

Open to Public Inspection

Employer Identification number 26-3057250

	rds to substantiate the	amount of the grar	the grants or assistance, the grantees' eligibility for the grants or assistance, and	rantees' eligibility for th	e grants or assistance		X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United Sta	s procedures for monit ince to Governme		use of grant funds in the United States. See Part IV Organizations in the United States. Complete if the organization answered 'Yes' to Form	States. See Part IV ed States. Complete if the	rt IV e if the organizat	ion answered 'Ye	s' to Form
990, Part IV, line 21 for any recipient that received more than \$5,0 Part IV and Schedule I-1 (Form 990) if additional space is needed	ny recipient that re (Form 990) if addii	eceived more the tional space is a	more than \$5,000. Check this box if no one recipient received more than \$5,000. Use ace is needed	this box if no one re	ecipient received	more than \$5,000	0. Use ▼ 💢
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash granl	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
		0					
				,	,		
	X	e al	Lachon	DON	ful		
))	
			_				
2 Enter total number of section 501 (c) (3) and povernment premainsation	1 I	l					
S Enter total number of other productions	din government on	galikations					J.
s Enter total number of other organizations.	lions					•	7
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notice, see	e the Instructions fo	or Form 990,	TEEA3901L 02/10/10	02/10/10	Schedu	Schedule 1 (Form 990) 2009

Schedule I (Form 990) 2009 CITY OF MUSKOGEE FOUNDATION INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Page 2

(f) Description of non-cash assistance					and any other additional information.		1 1 1 1 1 1 1 1 1 1								
(e) Method of valuation (book, FMV, appraisal, other)					rt I, line 2, and any ot		UB_COMMITTEES	LOPMENT. SUB	SULTS		(3)	NIZATIONS	! ! ! ! ! ! ! !		
(d) Amount of non-cash assistance			:		provide the information required in Part I, line 2,	 	BOARD. THESE SI	D ECONOMIC DEVE	DEMONSTRABLE_RE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AR TO 25 501 (C)	VERNMENTAL ORGAL	 		
(c) Amount of cash grant					provide the informa	s are Used	MITTEES OF THE	EDUCATION, AN	TO DETERMING	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE FISCAL YE	EE, 5 OTHER GO	1 1 1		1
(b) Number of recipients						ion of How Grants	BY THE SUB COM	OPPORTUNITIES,	SITE LOCATIONS	ormation	TS MADE DURING	CITY OF MUSKOG			
(a) Type of grant or assistance				5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Part IV Supplemental Information. Complete this part to	<u>Part I, Line 2 Grantmaker's Description of How Grants are Used</u>	GRANT MONITORING IS HANDS-ON BY THE SUB COMMITTEES OF THE BOARD. THESE SUB COMMITTEES	INCLUDE HEALTH AND WELLNESS, OPPORTUNITIES, EDUCATION, AND ECONOMIC DEVELOPMENT. SUB	COMMITTE MEMBERS VISIT GRANT SITE LOCATIONS TO DETERMING DEMONSTRABLE RESULTS.	Part IV - Additional Supplemental Information	THERE WERE A TOTAL OF 50 GRANTS MADE DURING THE FISCAL YEAR TO 25 501 (C) (3)	ORGANIZATIONS AS WELL AS THE CITY OF MUSKOGEE, 5 OTHER GOVERNMENTAL ORGANIZATIONS	AND 2 OTHER ORGANIZATIONS.		

BAA

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Name of the organization	Employer Identification number
	26-3057250
Form 990, Part III, Line 1 - Organization Mission	
TO MAKE A REAL DIFFERENCE IN MUSKOGEE BY EFFECTIVELY DEVELOPING	, SUPPORTING,
PROMOTING, AND IMPROVING PROGRAMS AND FACILITIES RELATING TO ED	UCATION, ARTS,
CULTURE, COMMUNITY REVITALIZATION AND BEAUTIFICATION, SOCIAL SE	RVICES, HEALTH CARE,
ECONOMIC DEVELOPMENT, INFRASTRUCTURE, HOUSING, AND RECREATION FO	OR THE CITY OF
MUSKOGEE AND SURROUNDING AREAS AND TO IMPROVE THE QUALITY OF LI	FE OF RESIDENTS OF
MUSKOGEE.	
Form 990, Part VI, Line 3 - Description of Delegated Duties to Management Comp	pany
THE ORGANIZATION ENTERED INTO A MANGEMENT AGREEMENT WITH THE COM	MUNITIES FOUNDATION
OF OKLAHOMA TO OVERSEE INVESTMENT AND OTHER ACTIVITIES RELATED	TO THE ORGANIZATION
AS WELL AS ASSISTING IN GRANTS PROCESS.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
AUDIT WAS PROVIDED TO THE AUDIT SUB COMMITTEE OF THE FINANCE COM	MITTEE FOR REVIEW
AND PRESENTATION TO THE GOVERNING BODY ALONG WITH ANY RECOMMENDA	ATIONS.
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
UPON REQUEST	

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
CITY OF MUSKOGEE FOUNDATION INC.	26-3057250
	·
	
	·

FOUNDATIOM

Opportunities Committee

Organization Name	Project	Approved Amount	Tax ID #	Street Address	CIE	State	Zlo Code
	Dartiel fundion for the Common Advantuse December						
MCCOYS	which takes al-nek students on a camping adventure	\$5,000	73-0947232	4009 Eufaula Avenue	Muskogee	Š	74403
STAND	Parlial funds for the Summer Program, which provides a safe haven for area youth through supervised recreational activities, educational activities and mentoring programs that promotes character development and training for behavior management	\$10,000	20-0970937	910 South D Street	Muskogee	ok	74403
City of Muskogee	Funds for the Housing Rehabilitation Neighborhood Revitalization Program, which will help up to facilitate the rehabilitation and restoration of borderline derelict structures located within the Original Townsite requiring minimal rehabilitation.	\$200,000	73-6005340	P.O. Box 1927	Muskogee	OK	74402
Friends of Honor Heights Park	Funds for the construction of the Teaching Gardens & Butterfly Sanctuary, as long as FHHP matches with their own fundraising	\$200,000	38-3791166	4211 High Oeks	Muskogee	×	74401
Housing Authorly	Funds for the Deposit Assistance Program, which assists in paying deposits for people to get into housing in Muskogee.	\$20,000	73-6005340	220 North 40th	Muskogee	ŏ	74401
Muskogee Little Theater	Funds to go toward the MLT Capital Project Pledges of \$500,000 promised in 2011 and 2012, as long as MLT matches each year in their own fundraising.	\$1,500,000	73-1077539	4505 Girard	Muskogee	š	74401
Muskogee Nonprofil Resource Center	Funds for the Community Resource Development Project, which includes salary funds for the Grant Whiter, PR/Marketing, and intern staff	\$59.500	73-1600003	207 N 2nd St	Muskogee	OK.	74401
Muskogee Public Library	Funding for the comprehensive building proposal for the future of the Muskogee Public Library. An additional \$145,000 is pledged for 2011	\$290,000	\$290,000 73-6005340	801 W. Okmulgee	Muskogee	ě	74401
Muskogee Round Up Club	Funds for their Improvement Plan, which includes renovations of the Concession Stand, new bleachers for safety reasons, etc.	\$15,000		P O Box 3094	Muskogee	¥	74402
OK Music Hall of Fame	Funds to pay partial salanes for the Administrative Staff Expansion, to include the Executive Director, Facilities Coordinator, Associate, PR/Marketing staff	\$50,000	\$50,000 52-2111948	401 S. 3rd Street	Muskogee	ОК	74402
Robison Park Community Assoc.	Funds for the Robison Park Development Project, to include picnic sheller, gazebo, and basketball courts	\$100,000	\$100,000 73-1600003	207 N 2nd St	Muskogee	OK	74401
Three Rivers Museum	Funds for operational support for 2010	\$15,000	73-6005340	220 Elgin	Muskogee	OK	74401
Volunteers of America	Salary for the project coordinator of We Care Transportation, a program that utilizes the tools available through RSVP to help the elderly clizens of Muskogee access medical services	\$25,000	13-1692595	3300 East Shawnee	Muskogee	×	74403

TOTAL OPPORTUNITIES: (9)

Health and Wellness Committee

FOURDATION

Organization Name	Project	Amount Approved Tax ID#	Tax ID#	Street Address	City	State	Zip Code
Muskogee Parks and Recreation	Centennial Trail Phase IV (Approved in 2009)	\$50,000	73-6005340	837 E Okmulgee	Muskopee	ð	74403
Kelly B Todd Cerebral Palsy & Neuro Muscular Fou 2009)	Contrustion of a Therapeutic Fitness Track (Approved 2009)	\$32,000	51-0163643	1111 N 36th Street	Muskogee	š	74401
Muskogee Parks and Recreation	Beckman Park improvements, pending a State grant	\$15,000	73-6005340	837 E Okmulgee	Muskogee	Š	74403
Muskogee Public Schools	Personal costs for the School Based Health Clinic to stay open during the summer months of 2010.	\$50.473	73-1325400	202 W. Broadway	Muskogee	ě	74401
Muskogee Swim and Filness	Funds for the Summer day camp "Wase Kids Youth Camp" which includes lessons on Energy Balance. The Cood Pyramid, Calones, Food Labels, The Heart, The Body, Activity, Wase Kid Graduation and Balance in Action.	\$2,000	73-6005340	566 N. 6th Street	Muskogee	OK	74401
CASA	Salary for one Case Worker, who helps to provide more direct supervision and better training for CASAs, therefore growing the program and helping more children		15,000 73-1497371	215 State St, Ste. 815	Muskogee	ÖK	74401
Frist Baptist Church of Muskogee	Funds will go towards the Free Clinic which is open to the public on Monday evenings Funds will assist with the rent, utilities, medical equipment, office equipment.	62,200	62,200; 73-0579253	532 N 13th St	Muskogee	OK	74401
Good Shepherd Medical Clinic	Funds to support the Diabellc needs at the clinic, to include purchasing diabelic test strips to give to patients as well as diabelic shoes.		16,200 73-1591613	P. O. Box 3044	Muskogee	χ	74402
Hilldale Public Schools	Funds for their program "Fighting the Good Fight of Falt, which will include purchasing gym class equipment such as a tricycles, dumbell sets, exercise games, etc.		45.000 73-1037746	315 E. Peak Blvd	Muskogee		74403
Muskogee Civilan Club	Funds for the Handicap Accessible Playground Phase II, purchases to include playground equipment	94,000	94,000 73-6096901	5219 Oklahoma Street	Muskogee	OK V	74401
Muskogee Kids Space	Operational expenses for 2010, due to an legislative vote which changed funding.	40.000	40,000 73-1424859	400 Court Street	Muskogee	OK YO	74401
Muskogee Co. Community Action Fdn	Funds to support the Elderfy and Low Income Feeding Program, to include the Beck Pack program for kids, Meals on Wheels, etc.	100.000	00.000 73-0754419	1313 North Main Street	Muskogee	š	74401
Muskagee Health Dept	Partial funding for the Muskogee Wellness Initiative, to include salary for a Wellness Coordinator, Marketing budget, training, speakers, educational materials etc.	. 000'09	60,000 73-149-7371	530 South 34th	Muskogee	Š	74401
Muskogee Housing Authority		26.500	26.500 73-6005340	220 N 40th Street	Muskogee	ok	74401
Muskogee Parks and Rec	Love Hatbox Skate Park renovations, Including converting the wood-framed ramp to steet, which will handle the weather better, and stay safe for the kids	120,000	20,000 73-6005340	837 E Okmulgee	Muskogee	ŏ	74403
WASH	Funds for the Children's Recreational Program, which will give children a safe place to play outside, while staying at WISH (includes privacy fence, play ground equipment)	21.500	21,500 73-1233396	514 Martin Luther King	Muskogee	OK	74401

TOTAL HEALTH & WELLNESS: (10)

FOUNDATION

Education Committee

Organization Name	Project	Amount Approved	Tax ID #	Street Address	City	State	Zlo Code
	Partial funding for Bacone's Summer Bridge Program, which gives American Indian students who may not have been accepted to college, a chance to take classes in						
Bacone College	the summer, and go on to Bacone College in the falt.	\$10,000	\$10,000 73-0590036	2299 Old Bacone Road	Muskogee	oK S	74403
God's Desire Learning Center	Purchasing computers, listening stations, headsets, and other related material for the literacy program "ABC Jump Start"	\$7,750	\$7,750 73-1446760	410 Girard	Muskogee	š	74401
Muskogee Day Nursery	Funding for salaries, art supplies, and musical equipment for their Summer Camp.	\$8,500	73-6005340	323 Callhan	Muskogee	š	74403
Muskogee Parks and Recreation	Youth Volunteer Corps Summer of Service, including paying Student Team Leaders, and other related materials	\$10,000	73-6005340	837 E. Okmulgee	Muskogee	ě	74403
Muskogee Public Schools	Partial funding for coordinators, instructors and studentaides, for Rougher Summer Pride, a summer day camp open to ALL MPS youth, where academics and sports are both areas of emphasis.	000'08\$	\$80,000 73-1325400	202 W Broadway	Muskogee	, š	
Girl Scouls	Funding for "Powered Up!" which is a program at the Alternative School, with a focus on 7th-12th grade girts, that emphasizes anti-bullying, self-esteem, goal setting, etc.	009'9\$	73-0579240	2432 E. 51sl St.	Tulsa	ě	74105
Girl Scouts	Public Housing Outreach Program, partial funding for salaries and related expenses for Girl Scouts in Public Housing areas	\$20,000	\$20,000 73-0579240	2432 E. 51sl Sl.	Tulsa	, ж	74105
Muskogee Day Nursery	Funding for equipment and curriculum for the Reading, Math, and Science Lab	\$8,000	73-6005340	323 Ceilhen	Muskogee	š	74403
Muskogee Kids Space	Protective Parenting Class, funding facilitators, materials, mileage, etc.	\$13,743	73-1424859	400 Court Street	Muskogee) o	74401
Muskogee Public Schools	Partial funding for student fees, teacher fees, and other related materials for the 7th Grade Rougher Outdoor Camp	\$49,575	\$49,575 73-1325400	202 W Broadway	Muskogee	X	
Muskogee Public Schools	Funds for the Covey Leadership Program for teachers at MPS, to include professional development sessions, student materials, etc.	\$22,000	\$22,000 73-1325400	202 W Broadway	Muskogee	OK	
Muskogee Public Schools	Activies for students and teachers to participate in together, as part of the Student/Teacher Advocacy Program, which has proven to decrease drop-out rates, improve student/Reacher relations etc.	\$10,000	\$10,000 73-1325400	202 W Broadway	Muskogee	OK	
Muskogee Public Schools	Project CAST is a program that emphasizes on decision making, problem sloving and relationship skills. Funding goes towards Second Step, Operation Aware and Botvin Life Skills curroulum.	\$61,000	\$61,000 73-1325400	202 W Broadway	Muskogee	Ŏ,	

	A. Shine	andy.	FOUN	FOUNDATION			
Muskogee Public Schools	Project COARS (Creating Opportunities for Al Risk Students) provides an al risk counsefor for the 7th and 8th Grade Center who will work with an intervention leam which will focus on students at risk.		\$63,000 73-1325400	202 W Broadway	Muskogee	Š	
Muskogee Public Schools	Funding for all 5th graders in MPS to attend Junior Achievement's BizTown, as well as have accass to all the corresponding cumculum.	\$16,000	\$16,000 73-1325400	202 W Broadway	Muskogee	š	
Muskogee Teen Center	Funding for the MuskogeeTeen Center, which will be focusing on Education, Health and Recreetion and the Arts.	\$160,000	\$160,000 73-6005340	837 E. Okmulgee	Muskogee	УĆ	74401
Oklahoma School for the Blind	Funding for OSB students to participate in various Student Activities, such as Space Camp, National Brailie Challenge, and sports competitions		\$10,000 73-6017987	3300 Gibson St.	Muskogee	š	74403
St. Joseph Schools	Funds will go to help the school continue to accept students, and offer scholarships to help pay for tuition.	\$50,000	\$50,000 73-9774814	321 N. Virginia	Muskogee	, X	74403
Venae. Inc.	Prized Princesses is a program that leaches young girls in MPS Self-Estern, Etiquette, Resume Writing, Interviewing, and Financial Literacy.	\$30,000	\$30,000 73-1616356	1301 So. 36th	Muskogee	X	74401
Muskogee Public Schools	Provide Ien \$1,000 scholarships to Muskogee students, through the Muskogee Parent Teacher Association	\$10,000	\$10,000 73-1325400	202 W Broadway	Muskogee	OK	
Muskogee Public Schools	MPS is applying for a \$8 million grant to become a S.T.E.M. school, and needed a 20% local match. The Foundation has agreed to pay \$2 million over 5 years if the grant is made.	\$2.000,000 73-1325400	73-1325400	202 W Broadway	Muskogea	OK	

TOTAL EDUCATION: (20)

Economic Development Committee

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Organization Name	Project	Amount Approved	Tax ID#	Street Address	City	Slate	ZIp Code
						Ī	
	Funds for reconstruction/expansion of the Daws Field						
City of Muskogee	Airport (erminel	\$275 000 73	-6005340	PO Box 1027	Mishone	è	74400
		2000		י מייטי ושלו	maskegee	5	704+7

\$749,873 \$2,489,500 2,646,158 275,000 Total Health and Wellness (10)
Total Opportunities (9)
Total Education: (20)
Total Economic Development. (1)

\$6,160,531 TOTAL CoMF Recommendations (39)