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)

OMB No 1545-0047

2008

Department of the Treasury

The organization may have to use a conv of this return to satisfy state reporting requirements

Open to Public Inspection

Form 990 (2008)

		2008 calend	dar voar d	or tax year hadinning		nd endir			, 20	
_				or tax year beginning			ig	—т		
_		applicable	Please use IRS	C Name of organization Oklahoma Inst for C	niid Advocacy	<u>, </u>			D Employer identification no.	
∐ ′	Address o	change	label or	Doing Business As					73-1192768	
ן י	lame cha	ange	print or type	Number and street (or P O box if mail is not delivered to street	et address)		Room/suite		E Telephone number	
ַ י	nitial retu	m	See Specific	3909 N Classen Blvd Suite 101					(405) 236-5437	
ַ וַ	eminatio	on	Instruc-	City or town, state or country, and ZIP + 4				1	G Gross receipts \$	
	\mended	return	tions	Oklahoma City, OK 73118					1,243,237	
	Applicatio	n pending	F Name	and address of principal officer ANNE ROBERTS			11/=> to the -			
			3909	N Classen Blvd Suite 101, OK 73	118		H(a) Is this a gardinates	group reli	Yes 💹 No	
1 7	ax-exem	pt status	X 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			H(b) Are all af			
J V	Vebsite.	▶ www	oica.	org			If "No " a H(c) Group ex	ttach a lis cemption	st (see instructions) number	
K 1	ype of or	rganization X	Corporation	Trust Association Other	L Year of Iormatic	on 1983	3 M State	of legal	domicile OK	
Pa	rt I	Summar								
L.:				ganization's mission or most significant activities	TO CREATE	AWAREI	NESS. TA	KE A	CTION, AND CHANGE	
	•	_		·	ISE AWARENESS					
A C G				POLICIES, PROGRAMS AND PREVENTA						
t o		THEIR FU			IIVB BIRRIBGI.	20 10	DIVOUE 1.	iini .	IIIBI KBACII	
l y V e	,				nacad of mare than C	CO/ of its	ananta			
ŗ				the organization discontinued its operations or displaced the continued its operations or displaced to the continued its operations.				1 2		
t n Ia	1 -		•	bers of the governing body (Part VI, line 1a)				ļ	14	
9 n	4		•	t voting members of the governing body (Part VI, Iii	•			-	14	
S C	5			yees (Part V, line 2a)					21	
&	6	Total numbe	r of volunt	eers (estimate if necessary)				6		
	7a	Total gross u	unrelated b	ousiness revenue from Part VIII, line 12, column (C)				7a	0	
		Net unrelated	d business	taxable income from Form 990-T, line 34				7b	0	
- C				/ -			Prior Yea	r	Current Year	
R ;	*\^\'8	Contributions	s and gran	ts (Part VIII, line 1h)			1,213	3,543	1,091,050	
v B	9	Program sen	vice reven	ue (Part VIII, line 2g) /					0	
'n (10	Investment in	ncome (Pa	irt VIII, column (A), lines 3, 4 and 7d)	<u> </u>		10	5,462	10,292	
U (II, column (A), lines 5, 6d, 8c, 9c/1/9c, and 11e)	1877			1,694		
ì	TI.			es 8 through 11 (must equal Part VIII, column (A), li			1,231			
				ounts paid (Part IX, column (A), lines 1-3)	\frac{1}{2}				0	
Q.				nembers (Part IX, column (A), line 4)		·			0	
E				isation, employee benefits (Part IX, solumn (A), line	/O./	•	674	5,761	745,118	
p				g fees (Part IX, column (A), line 11e)		·		-		
e (13					·		,463	8,052	
s (JV .			nses (Part IX, column (D), line 25)	8,052	_			10- 66	
S				X, column (A), lines 11a-11d, 11f-24f)		•		,430		
	1			nes 13-17 (must equal Part IX, column (A), line 25)		•	1,076			
	19	Revenue les	s expense	s. Subtract line 18 from line 12	• • • • • • • • • •			5,045	 	
Net Assets						Be	ginning of		End of Year	
or	20	Total assets	(Part X, III	ne 16)		٠	596	5,548	600,027	
Fund Bal-	21	Total liabilitie	s (Part X,	line 26)		•	28	3,552	19,687	
ances	22			ances Subtract line 21 from line 20	· · · · · · · · · · ·		567	7,996	580,340	
Pai	rt	Signatu	re Bloc	K						
				I declare that I have examined this return, including accompanying						
		and belief, it is	The, conect	and complete Declaration of preparer (other than officer) is base	on an information of write	en preparer i	nas any knowle	luge	/	
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	lnn	e Miller					11/9/09	
Sigi	า	Signatur	e of officer					Dat	е	
Her	е	ANNE	ROBERT	S, EXECUTIVE DIRECTOR						
			print name ar					-		
		Branciada	7	7	Date	Check if	Prepa	arer's ide	ntifying number	
Paid		Preparer's signature	• (and C Oliva	11/2/20	self-	्राह्य (see	instructio		
	arer's			Carol A. Oliver, CPA	7-101	employed EIN				
	Only	Firm's name (or yours								
	~,	address, and		1217 Sovereign Row, Suite 103						
		<u> </u>		Oklahoma City, OK 73108		Pho	one no ▶40	5-60		
мау	tne IRS	discuss this	return with	n the preparer shown above? (see instructions)					🗓 Yes 🗌 No	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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1	<u></u>	
•	·	
	STRATEGIES TO ENSUE THAT THEY REACH THEIR FULL POTENTIAL.	
2		
	·	
	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	
	Briefly describe the organization's mission TO CREATE AWARENESS, TAKE ACTION, AND CHANGE POLICY ON BEHALF OF CHILDREN AND YOUTH. TO RAISE AWARENESS OF CHILDREN'S NEEDS, AND PROMOTE PUBLIC POLICIES, PROGRAMS AND PREVENTATIVE STRATEGIES TO ENSUE THAT THEY REACH THEIR FULL POTENTIAL. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4	Bigely describe the organizations's missers of the comparishments (see instructions) Bigely describe the organizations's missers. Take a CTION, AND CHAIDE POLICY ON BEHALF OF CHILDREN AND YOUTH. TO CREATE AMARENESS OF CHILDREN'S NEEDS, AND PROMOTE PUBLIC POLICIES, PROGRAMS AND PREVENTATIVE STRATEGISS TO ENSUE THAT THEY REACH THEIR FULL POTENTIAL. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If Yes, 'describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how 4 conducts, any program services? If Yes, 'describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by expenses section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revoruse, if any, for each program services program services by expenses (Code) (Expenses \$ 204, 200 including grants of \$) (Revenue \$) ADVOCACY-TO ENSURE THAT THE NEEDS OF CHILDREN AND YOUTH ARE A PRIORITY IN LOCAL AND STATE POLICY AND BUDGETARY DECISION MAXING. (Code) (Expenses \$ 263,843 including grants of \$) (Revenue \$) MATERINAL AND CHILD HEALTH-TO ADDRESS THE NEEDS OF CHILDREN AND FAMILIES THROUGH EDUCATION, OUTREACH, AND ACCESS TO HEALTH COVERAGE.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 204,200 including grants of \$) (Revenue \$)	
4Ь		
	OUTREACH, AND ACCESS TO HEALTH COVERAGE.	
lc	(Code) (Expenses \$ 330.632 including grants of \$) (Revenue \$)	
łc	• •	
łc	YOUTH INITIATIVES-TO PROMOTE KEY DATA, RESEARCH, "BEST PRACTICE" STRATEGIES, PROGRAM	
lc	YOUTH INITIATIVES-TO PROMOTE KEY DATA, RESEARCH, "BEST PRACTICE" STRATEGIES, PROGRAM RESOURCES AND COLLABORATIVE EFFORTS THAT WILL HELP EXPAND PROGRAMS AND POLICIES TO ADDRESS	
łc	YOUTH INITIATIVES-TO PROMOTE KEY DATA, RESEARCH, "BEST PRACTICE" STRATEGIES, PROGRAM RESOURCES AND COLLABORATIVE EFFORTS THAT WILL HELP EXPAND PROGRAMS AND POLICIES TO ADDRESS THE NEEDS OF YOUTH MORE EFFECTIVELY AND LINK PREVENTION WITH POSITIVE YOUTH DEVELOPMENT FROM	
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ld	YOUTH INITIATIVES-TO PROMOTE KEY DATA, RESEARCH, "BEST PRACTICE" STRATEGIES, PROGRAM RESOURCES AND COLLABORATIVE EFFORTS THAT WILL HELP EXPAND PROGRAMS AND POLICIES TO ADDRESS THE NEEDS OF YOUTH MORE EFFECTIVELY AND LINK PREVENTION WITH POSITIVE YOUTH DEVELOPMENT FROM AN ASSET-BASED APPROACH. Other program services (Describe in Schedule O)	

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	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
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		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4	X	
5	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		
6	Did the organization maintain any donor advised funds or any 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, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u>X</u>
9	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
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	_X_	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	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 US?	14a		X
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
15	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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Χ
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	_X_	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		X
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X

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Part IV Checklist of Required Schedules (continued) Yes Nο 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, X_{-} 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," Χ 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, Χ 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Χ 35 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ 36 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

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Part V Statements Regarding Other IRS Filings and Tax Compliance 73-1192768

	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
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 2a 21			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	***************************************		
	instructions)	:		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
-	this return?	3a	1	Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?account in a foreign country (such as a bank account, securities account, or other inflaticial	4a		х
L	•	4d		
b	If "Yes," enter the name of the foreign country	:		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
_	and Financial Accounts	_		7,
5a	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		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		ļ <u>.</u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X	
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	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?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		Х
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12			
_	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
ь 11				
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders		-	
a				
Ь	(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
40	amounts due or received from them.)	4.5		
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Oklahoma Inst for Child Advocacy 73-1192768 Page 6 Part VI Governance, Management, and Disclosure (Sections A. B. and C request information about policies not required by the Internal Revenue Code) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members of the governing body 14 1a 14 Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members, stockholders, or other persons who may elect one or more members 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? ь Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X Χ 8ь 9a X If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 9ь affiliates, and branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Х 11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Χ Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b Х rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Х 12c X 13 Does the organization have a written whistleblower policy? X 14 Does the organization have a written document retention and destruction policy? 14 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 15a Other officers or key employees of the organization? 15b Describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ OK

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

Another's website X Upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Anne Roberts (405)236-5437

3909 N Classen Suite 101 Oklahoma City, OK 73118

Oklahoma Inst for Child Advocacy

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

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

1a Complete this table for all persons required to be listed. 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, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week		I t n r u t s t t e u t t e t i o n	Office		H c e c o m p l e e o s n y t s e t e d	F	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
ANNE ROBERTS			a							
EXECUTIVE DIRECTOR	40	ļ		X	_		<u> </u>	73,650	0	0
SHARON RODINE										
PROJECT DIRECTOR	40				<u></u>	X		64,440		
DARRYL SCHMIDT										
PRESIDENT	1	X	<u> </u>	X		\perp	ļ	0		0
TERRY HARRYMAN										
VP DIRECTOR	1	X		X	_	<u> </u>	<u> </u>	0		0
TIFFINI LYDA										
VP PUBLIC POLICY	1	X		X	_			0		0
LAURIE FULLER										İ
VP DEVELOPMENT	1	X		X	<u> </u>		<u> </u>	0		0
LYN HESTER										
VP DEVELOPMENT	1	X	_	X	<u> </u>		<u> </u>	0		0
ANN CALVERT		1								
SECRETARY	1	X	<u> </u>	X	L_	ļ		0		0
BILL DOENGES										
MEMBER	1	X	ļ	ļ	L_	ļ	<u> </u>	0		0
GEORGE FOSTER										
MEMBER	1	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0		0
REGGIE IVEY										
MEMBER	1_	X	<u> </u>		_		<u> </u>	0		0
FRANK MEDEARIS						1				
MEMBER	1	X	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>	0		0
DANNY NIXON										
MEMBER	1	X	<u> </u>	ļ				0	-	0
ROGER SHELDON		1								
MEMBER	1	X			<u> </u>		<u> </u>	0		0
VIONETT TORRES DUNN				l						
MEMBER	1	X	 	<u> </u>	_	ļ	<u> </u>	0		0
		+			-					
		1	<u> </u>			<u> </u>	<u> </u>	1		Form 990 (200

Part VII Section A. Officers, Directors, Trustees, I	(B)			(C)				(D)	(E)		(F)	
Name and title	Average Position (check all that							Reportable	Reportable	E	stimated	t
	hours	apply)					,	compensation	compensation	a	mount o	f
	per	l t d	l t	0	e m	H C e	F o	from	from		other	
	week	1. "	s r t u	'	уp	19 p P	I' I	the	petalet	coi	npensat	
		' se	l s	۱.	ا ا	h e l e n o	e e	organization	organizations		from th	0
		d et	U e	e	y e	s s y t a e	r	(W-2/1099-MISC)	(W-2/1099-MISC)		organiza	
		u r a o	0 0		е	e e					and rela	
		l ř	a			Ĭ					rganizati	ons
	+										-	
		-	_	-	ļ				<u>-</u>	_		
				<u> </u>					-	_		
			_	ļ	ļ. <u>.</u>							
					ļ					_	_	
				-	<u> </u>							
				<u> </u>							-	
				L								
Total				• •	<u> </u>		•	138,090	0			-
Total number of individuals (including those in 1a) who	o received mo	re thai	n \$1	00,0	00 ir	repo	rtable	e compensation fro	m the			
organization •											Yes	N
Did the organization list any former officer, director or	trustee, key	employ	yee,	or h	ııghe	st con	npen	sated				
employee on line 1a? If "Yes," complete Schedule J fo	or such individ	dual								3		X
For any individual listed on line 1a, is the sum of repor												
the organization and related organizations greater than							ıle J	for such				
individual							· ·			4		X
services rendered to the organization? If "Yes," compl	•									5		Х
ection B. Independent Contractors												
Complete this table for your five highest compensated compensation from the organization	I independent	contra	ctor	's tha	at re	ceived	mor	e than \$100,000 of				
(A)	-							(B)			(C)	
Name and business address	<u> </u>							Description of s	ervices	Compe	ensation	
							_					
	<u> </u>											

Part \	/ 111	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
C g o a o i t m n f h o t t e u r s, r n i t b g s s u r i	1a b c d	Federated campaigns	. 1b . 1c . 1d	452,452				
tam Inioti nsa s, r a n	e f g h	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in line Total. Add lines 1a-1f	. 1f	638,598 16,060	1,091,050			
		Total Add lines to 11 1 1 1 1 1 1 1		Business Code	1,031,030			
PSR ree orv gve rin acu mee	2a b c d e f	All other program service revenue						
	q	Total. Add lines 2a-2f						
	3	Investment income (including dividence other similar amounts) Income from investment of tax-exemp	s, interest, bond proc	and	10,292	10,292		
		Royalties	ı) Real	(II) Personal		•••••		
	b c	Less rental expenses Rental income or (loss) Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	ecunties	(II) Other				
O t h e r	c d	Net gain or (loss)				····		
R e v e n u		events (not including \$ of contributions reported on line 1c) See Part IV, line 18	b	136,320 70,062	66,258	66,258		
e	ь	Gross income from gaming activities See Part IV, line 19	b					
	ь	Gross sales of inventory, less returns and allowances	ь					
		Miscellaneous Revenue SUBSCRIPTION REVENUE		Business Code 9 0 0 0 9 9	5,575	5,575		
	b c							
		All other revenue			5,575			
	12	Total Revenue . Add lines 1h, 2g, 3, 4 9c, 10c, and 11e			1,173,175	82,125	0	c

Part IX Statement of Functional Expenses

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

	Section 501(c)(3) and 50	•	•		١
	All other organizations must complete column	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service	Management and	Fundraising
1	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and		expenses	general expenses	expenses
'	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				·····
_	the U.S. See Part IV, line 22 · · · · · · · · ·				
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	73,650	69,968	3,682	
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	563,670	531,323	32,347	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	16,769	15,789	980	
9	Other employee benefits	45,210	41,046	4,164	
10	Payroll taxes	45,819	43,505	2,314	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	8,099	7,855	244	
d	Lobbying	13,236	8,041	5,195	
е	Professional fundraising services See Part IV, line 17 .	8,052			8,052
f	Investment management fees				
g	Other	62,446	61,509	937	··-
12	Advertising and promotion	4,912	3,292	1,620	
13	Office expenses	48,316	42,506	5,810	<u> </u>
14	Information technology	6,541	6,016	525	
15	Royalties				
16	Occupancy	61,821	41,520	20,301	
17	Travel	44,696	43,402	1,294	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	24,369	24,369		
20	Interest				
21	Payments to affiliates			20.010	
22	Depreciation, depletion, and amortization	22,219		22,219	
23	Insurance	2,858		2,858	
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together and labeled miscellaneous may not exceed		1		
	5% of total expenses shown on line 25 below)				
	DATA BOOK	35,196	35,196		,
a b	EDUCATIONAL MATERIALS	17,548	16,560	988	- 1
c	PRINTING & PERIODICALS	21,770	18,631	3,139	
d	STUDENT INTERN	12,464	12,464	3,133	
e	OTHER EXPENSES	21,170	14,160	7,010	
í	All other expenses	22/2/0	11,100	,,,,,,	
25	Total functional expenses. Add lines 1 through 24f	1,160,831	1,037,152	115,627	8,052
26	Joint Costs. Check here ▶ ☐ if following \	_,			
	SOP 98-2 Complete this line only if the organization				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				

+ 441										
					(A)			(E	3)	
					Beginning of year		Ε	End of	year	
	1	Cash - non-interest-bearing			113,236	1			82,	383
	2	Savings and temporary cash investments			290,924	2		2	69,	076
	3	Pledges and grants receivable, net			161,901	3		2	14,0	004
	4	Accounts receivable, net				4				
	5	Receivables from current and former officers, directors, ti		I						
		employees, or other related parties. Complete Part II of S	ched	ule L		5				
	6	Receivables from other disqualified persons (as defined it						······		
	1	4958(f)(1)) and persons described in section 4958(c)(3)(l								
_	ŀ	Part II of Schedule L		·		6				
A S	7	Notes and loans receivable, net			40	7		_		18
5	8	Inventories for sale or use				8				
e	9	Prepaid expenses and deferred charges		ł		9	'			
t s	10a	Land, buildings, and equipment cost basis		i l						
•	Ь	Less accumulated depreciation Complete								
		Part VI of Schedule D	10b	110,174	29,665	10c			29,3	338
	11	Investments - publicly traded securities		·		11				
	12	Investments - other securities See Part IV, line 11) ·		12				
	13	Investments - program-related See Part IV, line 11				13				
	14	Intangible assets		ŀ		14				
	15	Other assets See Part IV, line 11			782	15			5 3	208
	16	Total assets. Add lines 1 through 15 (must equal line 34)			596,548	16			00,0	
	17	Accounts payable and accrued expenses			27,202	17			17,4	
	18	Grants payable		}	21,202	18			1 /,-	102
	19	Deferred revenue			1,350	19			2 .	225
i a	20	Tax-exempt bond liabilities			1,350	20			4,4	125
	21	Escrow account liability. Complete Part IV of Schedule D				21				
b i	22	Payables to current and former officers, directors, trustee		h h		61				
1	**	-								
i t	ļ	employees, highest compensated employees, and disquare persons. Complete Part II of Schedule L		1		22				
ì	23			h h		22				
e s	24	Secured mortgages and notes payable to unrelated third	•	- F		24				
3	25	Unsecured notes and loans payable				25				
	26	Other liabilities. Complete Part X of Schedule D				26				
	-20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ ∑			28,552	20			19,6	387
		complete lines 27 through 29, and lines 33 and 34.	Я чис							
N F	27	•			475 000	37				
n	28	Unrestricted net assets		1-	175,098	27			21,2	
, d	29	Temporarily restricted net assets			392,898	28	· · · · · · · · · · · · · · · · · · ·	3	59,0	176
B	23	Permanently restricted net assets		L	······································	29				
a	i		re P							
∌ I ∶a	30	and complete lines 30 through 34. Capital stock or trust principal, or current funds				30				
s n	31			+		-				
c o e	32	Paid-in or capital surplus, or land, building, or equipment i				31				
S	33	Retained earnings, endowment, accumulated income, or		· · · · · · · · · · · · · · · · · · ·						
	34			· · · · · · · · · · ·	567,996	33			80,3	
Dar	XI	Total liabilities and net assets/fund balances Financial Statements and Reporting	• •	• • • • • • • • • • • • • • • • • • • •	596,548	34			00,0	127
Fai	1 (1)	Tinancial Statements and Reporting			<u> </u>					Γ
1	Δοσοιισ	ating method used to prepare the Form 000	f	V Approx D Out-	-		Γ		Yes	No
ı 2a		nting method used to prepare the Form 990		X Accrual Othe			}	2-	v	1
		he organization's financial statements compiled or reviewed	-	•			<u> </u>	2a	X	 -
Ь		he organization's financial statements audited by an indepe			· · · · · · · · · · · · · · · · · · ·		⊦	2b	X	
С		" to lines 2a or 2b, does the organization have a committee			-			2-	~	ı
3a		dit, review, or compilation of its financial statements and sel		•			⊢	2c	X	 -
Ja		esult of a federal award, was the organization required to un	_					a		v
h		gle Audit Act and OMB Circular A-133?					-	3a		X
_	162	, are are organization undergo the required addit of addits (!	3Ь		1

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Employer identification number

2008

Open to Public Inspection

		ma Inst for Ch								192768			
Pa				y Status (All organiza				see instru	ictions)				
The	orgar	nization is not a private	e foundation becau	se it is (Please check or	nly one org	anization))						
1				sociation of churches de		section 1	70(b)(1)(A)	(i).					
2)(A)(ii). (Attach Schedule									
3				vice organization describ									
4		A medical research of	organization operat	ed in conjunction with a h	nospital des	scribed in s	section 17	0(ь)(1)(А)	(iii). Enter	the hospita	al's name	∍,	
		city, and state.											
5		•		of a college or university	y owned or	operated I	by a goverr	nmental ui	nit describe	ed in			
		section 170(b)(1)(A)											
6		A federal, state, or lo	cal government or	governmental unit descri	ibed in sec	tion 170(b)(1)(A)(v).						
7	X	_	•	a substantial part of its si	upport from	a governr	mental unit	or from th	e general p	oublic			
		described in section											
8		A community trust de	escribed in section	170(b)(1)(A)(vi). (Comp	olete Part II)							
9		•	-	(1) more than 33 1/3% o						=			
		•		mpt functions - subject to									
		• •		and unrelated business t		-		tax) from	businesse	S			
	_			30, 1975 See section 5									
10	Ц	-	•	d exclusively to test for p	-					s)			
11	Ш	-	•	d exclusively for the bene					-	_			
		* '		rted organizations descr						ection			
		_		the type of supporting o		-		-	gh 11h •	- -			
		a ∐ TypeI	b ∐ Typ				lly integrate		a	∐ Type⊤	III-Other		
е	Ш	•	· •	rganization is not control	-								
				s and other than one or r	nore public	sy support	ed organiza	ations des	scribed in s	ection			
		509(a)(1) or section		torresponding from the IDC	that it is a	Tuna I Tu	no II or Tu	na III auni	notina				
f		-		termination from the IRS			-		porting				Г
~		organization, check t		ation accepted any gift o									
g		following persons?	Jo, nas une organiz	allori accepted arry gift o	Commodi	on nom a	ly Of the						
			lirectly or indirectly	controls, either alone or	together w	ith nersons	s described	Lin (ii)				Yes	No
		•	•	of the supported organiz	_						11g(i)		
		, , , , , , , , , , , , , , , , , , ,		ribed in (i) above?							11g(iı)		
				n described in (i) or (ii) at							11g(in)		
h				the organizations the org									
	- · · ·			<u> </u>		-	AN District		(v1)	ls the	4-0	Amount	
	(I) Na	me of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) is the o	-	(v) Did yo		1 -	tion in col		upport	O1
				above or IRC section	governing d	ocument?	(i) of your	support?	(i) organize	S?			
				(see instructions)	Yes	No	Yes	No	Yes	No			
	_												
	_												
							ļ						
					<u> </u>	ļ				ļ			_
				Ŧ	1		1		-				
Tota	1		Į.	F	F	1	i	1	1	1	I		

Sched	dule A (Form 990 or 990-EZ) 2008 Oklahoma	Inst for Chi	ld Advocacy	,		73-1192768	
	rt II Support Schedule for Organiz	ations Descri	bed in Secti	ons 170(b)(1)(A)(iv) and	70(b)(1)(A)(v	
<u></u>	(Complete only if you checked the box of						
Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	977,067	1,021,042	1,141,520	1,213,543	1,227,370	5,580,542
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3	977,067	1,021,042	1,141,520	1,213,543	1,227,370	5,580,542
5	The portion of total contributions by each						
	person (other than a governmental unit or						
	publicly supported organization) included					1	
	on line 1 that exceeds 2% of the amount	1			ļ	,	
	shown on line 11, column (f)			:			1,138,793
6	Public support. Subtract line 5 from line 4						4,441,749
Sec	tion B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	977,067	1,021,042	1,141,520	1,213,543	1,227,370	5,580,542
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10					<u></u>	5,580,542
12	Gross receipts from related activities, etc. (see ins	tructions)			[12	
13	First five years. If the Form 990 is for the organiz check this box and stop here	ation's first, second	d, third, fourth, or	fifth tax year as	a section 501(c)	(3) organization,	▶ □
Sec	ction C. Computation of Public Support	rt Percentage			-		
14	Public support percentage for 2008 (line 6, column	(f) divided by line	11, column (f))		[14	79.59 %
15	Public support percentage from 2007 Schedule A,	Part IV-A, line 26f			[15	71.52 %
16a	33 1/3% support test - 2008. If the organization	did not check the b	ox on line 13, and	d line 14 is 33 1/3	3% or more, chec	k this box	
	and stop here. The organization qualifies as a pul	blicly supported org	ganization .				▶ 🏻
ь	33 1/3% support test - 2007. If the organization	did not check a box	on line 13 or 16	a, and line 15 is 3	33 1/3% or more,	check this	
	box and stop here. The organization qualifies as	a publicly supported	d organization				▶ [
17a	10%-facts-and-circumstances test - 2008. If the			on line 13, 16a, d	or 16b, and line 1	4 is 10% or	
	more, and if the organization meets the "facts-and	•					
	organization meets the "facts-and-circumstances"	test. The organization	tion qualifies as a	publicly support	ed organization		▶ [

b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support	ine 9 or Fart 1)						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 20	08	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	(4) 200	(2) 2000	(3,2000	(3, 255.			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513 .							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge		! :					
6	Total. Add lines 1-5							
7a	Amounts included on lines 1, 2, and 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 total of lines 9, 10c, 11, and 12 for the year or \$5,000							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6.)	<u> </u>	<u> </u>	!	<u> </u>			
	tion B. Total Support		T, ·					
	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 20	08	(f) Total
9	Amounts from line 6					ļ		
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				:			
С	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	· ·	
14	First five years. If the Form 990 is for the organization check this box and stop here	<u> </u>	· · · · · · · · · · · · · · · · · · ·	•	, ,			▶ 🛚
	tion C. Computation of Public Support	-				1 4- 1		
15	Public support percentage for 2008 (line 8, column (•				15		%
16	Public support percentage from 2007 Schedule A, F			· · · · · · · · ·		16		%
	tion D. Computation of Investment Inc			-	· · · · · · · · · · · · · · · · · · ·	47		
17	Investment income percentage for 2008 (line 10c, c		-			17		<u>%</u>
18 192	Investment income percentage from 2007 Schedule					18	7.10	<u>%</u>
I9a	33 1/3% support tests - 2008. If the organization of					and line L	15	▶ □
ь	not more than 33 1/3%, check this box and stop he 33 1/3% support tests - 2007. If the organization of	-						18
	is not more than 33 1/3%, check this box and stop	here. The organi	zation qualifies a	s a publicly supp	orted organization	n · ·		=
20	Private Foundation: If the organization did not che	ck a box on line	14, 19a, or 19b,	check this box ar	nd see instruction	s • •	· · · ·	· · · · > [

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

2008

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organizations	s: Complete Part III	_						
Na	me of organization			Employer id	entification number				
01	klahoma Inst for Child Advo	cacy		73-119	2768				
Pa	To be completed by a See the instructions for Sche	all organizations exempt und dule C for details	er section 501	(c) and section 527	organizations.				
1	Provide a description of the organization	's direct and indirect political campaign	activities in Part IV						
2	Political expenditures								
3	Volunteer hours								
Pa		all organizations exempt und	er section 501	I(c)(3).					
	See the instructions for Sche	dule C for details							
1									
2	Enter the amount of any excise tax incur	red by organization managers under se	ction 4955	▶ \$					
3	If the organization incurred a section 495								
4a	Was a correction made?			• • • • • • • • • • • • • • • • • • • •	. Yes No				
b									
Ра	To be completed by a See the instructions for Sche	all organizations exempt und dule C for details	er section 501	(c), except section	501(c)(3).				
1	Enter the amount directly expended by the								
	activities			▶ \$					
2	Enter the amount of the filing organization								
	527 exempt function activities			· · · · · · · ▶ \$					
3	Total of direct and indirect exempt function								
	on Form 1120-POL, line 17b								
4	Did the filing organization file Form 1120								
5	State the names, addresses and employ				nts				
	were made Enter the amount paid and in								
	contributions received and promptly and		-						
	fund or a political action committee (PAC) If additional space is needed, provide	information in Part	i IV	1				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-				
									

Sche	dule C (Form 990 or 990-EZ) 2008 Oklahoma Inst fo		73-1192	768 Page 2
Pa		ations exempt under section 501(c)(3) that t	iled Form 5768	
		See the instructions for Schedule C for details		
	Check ▶ ☐ If the filing organization belongs to a	• .		
3	Check If the filing organization checked box	A and "limited control" provisions apply.		
	Limits on Lobby	ing Expenditures	(a) Filing organization's	(b) Affiliated group totals
	(The term "expenditures" me	eans amounts paid or incurred.)	totals	group totals
1a	Total lobbying expenditures to influence public opin	ion (grass roots lobbying)	5,630	
b	Total lobbying expenditures to influence a legislative	e body (direct lobbying)	30,408	
C	Total lobbying expenditures (add lines 1a and 1b)		36,038	
d	Other exempt purpose expenditures	1,194,855		
е	Total exempt purpose expenditures (add lines 1c a	nd 1d)	1,230,893	
f	Lobbying nontaxable amount Enter the amount fro			
	columns.	198,089		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is : 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Ī	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of line 1	f)	49,522	
h	Subtract line 1g from line 1a. Enter -0- if line g is m	ore than line a		
i	Subtract line 1f from line 1c Enter -0- if line f is mo	re than line c		
j	If there is an amount other than zero on either line	1h or line 1i, did the organization file Form 4720 reporting		
	section 4911 tax for this year?	<u></u>	<u> </u>	Yes X No
	(Some organizations that m	Year Averaging Period Under Section 501(h) ade a section 501(h) election do not have to complete e the instructions for lines 2a through 2f of the instruc		

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total			
2a	Lobbying non-taxable amount	169,354	197,620	182,665	198,089	747,728			
ь —	Lobbying ceiling amount (150% of line 2a, column (e))				:	1,121,592			
с —	Total lobbying expenditures	23,117	51,128	30,382	36,038	140,665			
d	Grassroot non-taxable amount	42,339	49,405	45,666	49,522	186,932			
е	Grassroots ceiling amount (150% of line 2d, column (e))					280,398			
f	Grassroots lobbying expenditures	5,779	12,782	4,079	5,630	28,270			

legislation, including any attempt to influen referendum, through the use of a Volunteers?	sation in expenses reported on lines 1c through 1i)?	No	Ar	mount
legislation, including any attempt to influen referendum, through the use of a Volunteers?	se public opinion on a legislative matter or sation in expenses reported on lines 1c through 1i)? blic? tements?			·
referendum, through the use of a Volunteers?	sation in expenses reported on lines 1c through 1i)?			·
 Paid staff or management (include comper Media advertisements? Mailings to members, legislators, or the pu Publications, or published or broadcast staff Grants to other organizations for lobbying 	sation in expenses reported on lines 1c through 1i)?			
 d Mailings to members, legislators, or the pu e Publications, or published or broadcast state f Grants to other organizations for lobbying in 	blic?		-	
 Mailings to members, legislators, or the pu Publications, or published or broadcast state Grants to other organizations for lobbying in 	plic?			
e Publications, or published or broadcast statef Grants to other organizations for lobbying	tements?			
f Grants to other organizations for lobbying		- 1		
 Direct contact with legislators, their staffs. 				
-	government officials, or a legislative body?			
	tions, speeches, lectures, or any other means?			
	V			
•	••••••	1		
-	ration to be not described in section 501(c)(3)?			
	ed under section 4912	1		
	ed by organization managers under section 4912	1		
	912 tax, did it file Form 4720 for this year?			
	Il organizations exempt under section 501(c)(4), section 501	(C)(5)	, or	
Section 501(c)(b). See the	e instructions for Schedule C for details		·	
• • • • • • • • • • • • • • • • • • • •				Yes
-	received nondeductible by members?		1	
2 Did the organization make only in-house lo			2	\longrightarrow
	bying and political expenditures from the prior year?		3	
	organizations exempt under section 501(c)(4), section 501(
	TH Part III-A, questions 1 and 2 are answered "No" OR if P	art II	II−A,	
· · · · · · · · · · · · · · · · · · ·	d "Yes." See Schedule C instructions for details		-	
	om members	1		
· · · · · · · · · · · · · · · · · · ·	I political expenditures (do not include amounts of			
political expenses for which the sectio	· ·	.		
•	• • • • • • • • • • • • • • • • • • • •	2a		
•		2b		
		2c		
	(e)(1)(A) notices of nondeductible section 162(e) dues	3		
	2c exceeds the amount on line 3, what portion of the excess	1		
,	the reasonable estimate of nondeductible lobbying and political			
•		4		
	penditures (line 2c total minus 3 and 4)	5		
Part IV Supplemental Information	n uired for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i		_	

SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

answered "Yes," to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Inspection Employer identification number

<u>0k.</u>	Lahoma Inst for Child Advocacy	73-1192768
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
		
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
_	funds are the organization's property, subject to the organization's exclusive legal control?	[] Tes [] NO
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be	
	used only for charitable purposes and not for the benefit of the donor or donor advisor or other	
	Impermissible private benefit?	
Pai	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	7, line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g , recreation or pleasure)	ımportant land area
	Protection of natural habitat Preservation of certified history	ric structure
	Preservation of open space	
2	Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation	easement
	on the last day of the tax year.	
		Held at the End of the Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	
3		ation daining
	the taxable year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and	
	enforcement of the conservation easements it holds?	
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	O., O.,
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that of	describes
	the organization's accounting for conservation easements	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sh	neet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
ь	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet	works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pu	ublic service,
	provide the following amounts relating to these items.	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pi	
-	-	TOTIGO LITO
_	following amounts required to be reported under SFAS 116 relating to these items	. ¢
a	Revenues included in Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	▶ \$

,	Oblohana Tash fam	atild barr					73-11	9276	Ω	Page 2
	ule D (Form 990) 2008 Oklahoma Inst for III Organizations Maintaining Co			orical Tu	easures	or Ot				
3	Using the organization's accession and other record								(00/11.	
3	items (check all that apply)	s, crieck arry or i	uie ioliowii i	y wat are c	i sigi ililotarit i	436 01 113	Collection			
_		مما 🗀 ام	n or exchan	ao progras	me					
a	Public exhibition	_		ige prograi	115					
b	Scholarly research	e ∐ Oth	eı	-						
c	Preservation for future generations		41							
4	Provide a description of the organization's collection	s and explain no	w they lurtr	ier ine orga	anization's e	exempt p	ubose u			
_	Part XIV				. 49					
5	During the year, did the organization solicit or receiv								□ v	
	assets to be sold to raise funds rather than to be ma								Yes	<u> </u>
Pai	Trust, Escrow and Custodial	=		ete if orgar	nization ansv	wered "Y	es" to Form 990	,		
	Part IV, line 9, or reported an amount on				.					
1a	Is the organization an agent, trustee, custodian or ot								—	
	ıncluded on Form 990, Part X?				• • • • •	• • • • •			∐ Yes	∐ No
Ь	If "Yes," explain the arrangement in Part XIV and co	mplete the follow	ing table							
							F	Moun	t	
C	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance					<u>1f</u>				
2a	Did the organization include an amount on Form 990	, Part X, line 211	?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV.									
Pai	TENDOWMENT Funds. Complete if org	anization answe	ered "Yes" t	o Form 99	0, Part IV, lır	ne 10				
		a) Current Year	(b) Pno	r Year	(c) Two Year	s Back	(d) Three Years Ba	ıck	(e) Four Yea	rs Back
1a	Beginning of year balance					,		1		
b	Contributions									
С	Investment earnings or losses									***************************************
d	Grants or scholarships		<u> </u>		***************************************					
е	Other expenditures for facilities			1 1				• •		
-	and programs			j						
f	Administrative expenses									
	End of year balance		 							
g 2	Provide the estimated percentage of the year end be	lance held as	1	. ,	· · · · · · · · · · · · · · · · · · ·			!		
	Board designated or quasi-endowment	%								
a	<u> </u>									
b										
C O-	Term endowment ▶ %		- 45-4 0-0 50		mintarad fa	ur tha				
3a	Are there endowment funds not in the possession of	the organization	i that are ne	eiu anu aui	ministerea io	n uie			Ye	s No
	organization by:								3a(i)	5 110
	(i) unrelated organizations							• •		
	(ii) related organizations							• •	3a(ii)	
b	If "Yes" to 3a(II), are the related organizations listed							• •	3b	
4	Describe in Part XIV the intended uses of the organi				·					
Pa	rt VI Investments - Land, Building	s, and Equir	oment. Se	e Form 99	0, Part X, Im	ne 10		T.		
	Description of investment	(a) Cost or oth	er basis	(b) Cost	or other	(c)	Depreciation		(d) Book va	ue
		(investm	ent)	basis	(other)	ļ		ļ		
1a	Land	•						L		
b	Buildings							ļ <u>.</u>		
С	Leasehold improvements	.						l		

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))

139,512

29,338

29,338

(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)	(2) 2001 (200	Cost or end-of-year market va	ilue
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			-
			· · · · · · · · · · · · · · · · · · ·
			**
Total (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market va	lue
		, , , , , , , , , , , , , , , , , , , ,	······································

· · · · · · · · · · · · · · · · · · ·			
· ··· =			
	<u> </u>	,	
			 -
			
Table (Oders (A) should and Free COO Day Visit (Oders (O))			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line	15	L	
	Description		(b) Book value
SECURITY DEPOSITS			5,208
	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·		
	 	···	
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)			5,208
(a) Description of liability	(b) Amount	4	
Federal income taxes		4	
		4	
		_	
		_	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)			
In Part XIV, provide the text of the footnote to the organization's	financial statements that reports	the organization's liability for	
uncertain tax positions under FIN 48.	•	·	

Pai	art XI Reconciliation of Change in Net Assets from Form 990 to Financial S	tatements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	1,173,175
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1,160,831
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	12,344
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net). Add lines 4-8		9	
0	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	12,344
	art XII Reconciliation of Revenue per Audited Financial Statements With Re			
1	Total revenue, gains, and other support per audited financial statements		1	1,243,237
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a				
b			ļ	
С				
d		70,062		
е	• • • • • • • • • • • • • • • • • • • •		2e	70,062
3	Subtract line 2e from line 1		3	1,173,175
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а				
Ь				
¢			4c	
5 ****	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		5	1,173,175
	art XIII Reconciliation of Expenses per Audited Financial Statements With			
1	Total expenses and losses per audited financial statements		1	1,230,893
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а				
Ь				
С				
d		70,062		50.000
e			2e	70,062
3	Subtract line 2e from line 1		3	1,160,831
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		-	
a				
b			4.	
- C	Add lines 4a and 4b	• • • • •	4c	1 160 021
5 1000	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	• • • • • •	5	1,160,831
	art XIV Supplemental Information			
	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV	v, lines 10		
ang 2	d 2b, Part V, line 4; Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b			
				-
1 +1	ther revenues non included on Form 990 (Part XII, lin	ne 2d)		
<i>J</i> (1	mer levendes non included on rolm 990 (raid All, lin	16 207		· · · ·
. T D 1	DROW EVERYORD DELAMED TO COROTAL EVENTO			
)TK	RECT EXPENSES RELATED TO SPECIAL EVENTS.	-		
		· - ·		
				-

Oklahoma Inst for Child Advocacy

Schedule D (Form 990) 2008

73-1192768

Page 4

Schedu	le D (Form 990) 2	2008 Oklahoma	Inst	for Child Ac	dvoc	acy					73-119276	8	Page 5
Par	t XIV	Supplemental	Inform	nation (continued	i)						_		
											<u>-</u>	•	
	•												
		· · · · · · · · · · · · · · · · · · ·	·		-				_				
						_	000	/		7	0.41		
<u> </u>	<u>Other</u>	expenses	not	included	on	Form	990	(Part	XIII,	line	2a)		
OIRE	CT EXPEN	SES RELATED	TO SP	ECIAL EVENTS									
		 											
											· · · · · · · · · · · · · · · · · · ·		
							•						
		•											
-	-									-		-	
													
		-		•				<u> </u>					
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								_	<u>.</u>				
		·						·-·					
			_				_		•				
													

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV,

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

Name of the organization		Employer identification number													
Oklahoma Inst for Chi		73-1	192768												
Part 1 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17															
Indicate whether the organization raised funds through any of the following activities. Check all that apply a															
(i) Name of individual or entity (fundraiser)	(ii) Activity	custody or c	custody or control of from activity (or reta contributions? fundraise		(v) Amount paid to (or retained by) fundraiser listed in col. (i)		(or retained by) fundraiser listed in		(or retained by)		(or retained by) fundraiser listed in		(or retained fundraiser lis		(n) Amount paid to (or retained by) organization
		Yes	No												
Total				or has been notified it is e	xempt fr	om									
															
	 														
	·														
	 -	· 		······································											
					_										

	# 1 11	more than \$15,000 on Form 99	•					
	•		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total I	Events	
			FALL FORUM	FOC BANQUET		Add col (a)) through	
R			(event type)	(event type)	(total number)	col	(c))	
e v e	1	Gross receipts	67,926	68,394		13	6,32	0
n i	2					-		
u		contributions						
е	3							
		minus line 2)	67,926	68,394		13	6,32	0
D								
ı r	4	Cash prizes						
r e	-							
c t	5	Non-cash prizes						
t		The state of the s						
Ε	6	Rent/facility costs	22,541	10,000		3	2,54	1
E x		, , , , , , , , , , , , , , , , , , , ,		•				
e e	7	Other direct expenses	13,918	23,603		3	7,52	1
n				1				
s e	8	Direct expenses summary Add line	es 4 through 7, column (d)			(7	0,06	2)
s	9	Net income summary Combine line	-				6,25	<u>-</u> -
Pa	rt II							
		than \$15,000 on Form 990-EZ	=		,			
R			_	(b) Pull tabs/Instant		(d) Total gam	ing (Add	
e v			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) throug	gh col	(c))
Revenue								
u e	1	Gross revenue						
p	_							
ľ.	2	Cash prizes						
Direct								
	3	Non-cash prizes						
Expenses				·				
p e	4	Rent/facility costs						
n S								
8 \$	5	Other direct expenses						
			☐ Yes %	Yes %	☐ Yes %	:		
	6	Volunteer labor	☐ No	□ No	□ No			
			<u> </u>					
	7	Direct expense summary. Add lines	2 through 5 in column (d)			()
	8	Net gaming income summary Com	bine lines 1 and 7 in colum	n (d) <u></u>	<u>.</u>			
							Yes	No
9	En	ter the state(s) in which the organizat	tion operates gaming activi	ties				
а	ls '	the organization licensed to operate \emptyset	gaming activities in each of	these states?		9a	<u> </u>	
b	lf "	No," Explain				ļ ,		
	_		·					
	_							
10a	We	ere any of the organization's gaming I	icenses revoked, suspende	ed or terminated during the	tax year? \dots	10a		
b	If "	Yes," Explain				į į		
	_	<u>,,</u>						
	_							
11		es the organization operate gaming a				11	ļl	
12		the organization a grantor, beneficiar						
	for	med to administer charitable gaming				12	1	

SCHEDULE O (Form 990)

Department of the Treasury

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Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

internal revenue Service	<u></u>
Name of the organization	Employer identification number
Oklahoma Inst for Child Advocacy	73-1192768
01. Form 990 governing body review (Part VI, line 10)	
THE FORM 990 IS REVIEWED BY THE CFO AND SIGNED BY THE EXECUTIVE DIRECTOR.	IS AVAILABLE TO
THE BOARD OF DIRECTORS AT THEIR NEXT REGULARLY SCHEDULED MEETING.	
02. Conflict of interest policy compliance (Part VI, line 12c)	
THE BOARD PRESIDENT MONITORS COMPLIANCE WITH THE CONFLICT OF INTEREST POLI	CY.
03. Governing documents, etc, available to public (Part VI, line 19)	
FINANCIAL STATEMENTS ARE AUDITED ANNUALLY AND INCLUDED IN THE ORGANIZATION	I'S ANNUAL REPORT
AVAILABLE UPON REQUEST. THE GOVERNING DOCUMENTS AND OTHER POLICIES ARE MA	DE AVAILABLE TO
THE PUBLIC UPON REQUEST.	
Inditional Colon Regulati	-