Form	qqn
Form	330

Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

TIIN 30

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



Α	For the	e 2021 calendar year, or tax year beginning JUL 1, 2021 and e	ending J	JN 30, 2022									
В	Check if applicabl	e: C Name of organization		D Employer identif	cation number								
	Addre	e THE FOUNDATION FOR TULSA SCHOOLS											
	Name chang	e Doing business as		73-1612027									
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	er								
	Final return/	918-746-6600)										
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,318,664.								
	Ameno	10LSA, OK /4114-0131		H(a) Is this a group r	eturn								
	Applic tion pendir	F Name and address of principal officer: refore repert		for subordinates	s? Yes X No								
		SAME AS C ABOVE		H(b) Are all subordinates i									
		empt status: $X = 501(c)(3) = 501(c) () = 4947(a)(1) o$	r 527	1 '	list. See instructions								
		te: WWW.FOUNDATIONFORTULSASCHOOLS.ORG		H(c) Group exemption									
	Form of art I	organization: Corporation Trust _x Association Other ► Summary	L Year	of formation: 2001	V State of legal domicile: OK								
			TN 2001										
e	1	Briefly describe the organization's mission or most significant activities: FOUNDED FOR TULSA SCHOOLS WAS ESTABLISHED TO BUILD A BETTER COMMUNITY		, THE FOUNDATION									
an	2	Check this box \blacktriangleright if the organization discontinued its operations or dispose		than 25% of its not as	aata								
/err	2				28								
Ő	4	3 Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4											
~	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	·····	28									
ities	6	Total number of volunteers (estimate if necessary)			30								
Activities & Governance	7a				0.								
Ă	b			7b	0.								
				Prior Year	Current Year								
đ	8	Contributions and grants (Part VIII, line 1h)		11,337,863.	7,805,062.								
nu	9	Program service revenue (Part VIII, line 2g)		35,410.	10,871.								
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		193,774.	139,692.								
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.								
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		11,567,047.	7,955,625.								
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		8,922,789.	7,233,291.								
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.								
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		218,773.	310,840.								
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.								
adx	b	Total fundraising expenses (Part IX, column (D), line 25)											
ш	1 "	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		195,210.	233,370.								
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,336,772.	7,777,501.								
		Revenue less expenses. Subtract line 18 from line 12		2,230,275.	178,124.								
ts or				ginning of Current Year	End of Year								
Assets	20	Total assets (Part X, line 16)		13,402,243.	13,405,760.								
Net A	1 2 1	Total liabilities (Part X, line 26)		3,491.	81,541.								
		Net assets or fund balances. Subtract line 21 from line 20		13,398,752.	13,324,219.								

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

Sign	Signature of officer			Date
Here	MARY SPEARS, BOARD OF DIRECTORS,	TREASURER		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	ASHLEY M. FOGLE	ASHLEY M. FOGLE	05/12/23	self-employed P01258800
Preparer	Firm's name HOGANTAYLOR LLP			Firm's EIN 🕨 73-1413977
Use Only	Firm's address 🕒 2222 SOUTH UTICA PL, SUI	TE 200		
	TULSA, OK 74114			Phone no.918-745-2333
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
132001 12-0	9-21 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2021) THE FOUNDATION FOR TULSA SCHOOLS	73-1612027	Page
a			v
	Check if Schedule O contains a response or note to any line in this Part III		X
	Briefly describe the organization's mission: FOUNDATION FOR TULSA SCHOOLS WAS ESTABLISHED TO BUILD A BETTER		
	COMMUNITY THROUGH THE SUPPORT OF TULSA PUBLIC SCHOOLS.		
	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	s X N
	If "Yes," describe these new services on Schedule O.		s X N
	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.		5 <u>~</u> N
	Describe the organization's program service accomplishments for each of its three largest program services, as me	asured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, t		
	revenue, if any, for each program service reported.		
а	(Code:) (Expenses \$5,627,092. including grants of \$5,627,092.) (Revenue \$		
a	SUPPORT TPS - PROVIDE FUNDING FOR TPS PRIORITIES AND STRATEGIES		
b	(Code:) (Expenses \$969,083. including grants of \$969,083.) (Revenue \$		
U	SUPPORT TPS - PROVIDE FUNDING FOR INNOVATIVE PARTNERS PROGRAMS		
c	(Code:) (Expenses \$611,644. including grants of \$611,644.) (Revenue \$		
c	(Code:) (Expenses \$611,644including grants of \$611,644) (Revenue \$ SUPPORT TPS - PROVIDE FUNDING FOR TPS HIGH SCHOOL REDESIGN		
0			
c			
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	SUPPORT TPS - PROVIDE FUNDING FOR TPS HIGH SCHOOL REDESIGN	10,871.)	
4	SUPPORT TPS - PROVIDE FUNDING FOR TPS HIGH SCHOOL REDESIGN		

 Form 990 (2021)
 THE FOUNDATION FOR TULSA SCHOOLS

 Part IV
 Checklist of Required Schedules

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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? See instructions	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, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	х	
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Dart IV	Checklist o	f Requir	ed Schedul	20	 . 1
					a

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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
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 lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Par	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pal				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 27 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Litter the number of Forms w-2d included of the Ta. Effer -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4	х	
10000	(gambling) winnings to prize winners?	1c	<u> </u>	(2004)
132004	- 12-09-21 5	Form	550	2021)
	5			

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Form	990 (2021) THE FOUNDATION FOR TULSA SCHOOLS 73-161202	7	P	age 5				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 8							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
4a	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		X				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X X				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v				
_	any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
-	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	-		х				
	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 7b						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		x				
А		70						
d e		7e		х				
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		x				
g								
-								
8								
•	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а								
b								
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders 11a							
	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>				
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v				
	excess parachute payment(s) during the year?	15		X				
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		х				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Λ				
17	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	47						
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17						
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102000				(-ULI)				

	rt VI Governance, Management, and Disclosure. For each "Ves" response to lines 2 through 7h below, and for a	5 "Mr"		age
	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.	a "No" r	respor	ise
				X
Sac	Check if Schedule O contains a response or note to any line in this Part VI			Δ
	Alon A. Governing body and Management		Vee	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 28	8	Yes	
Ia				
	If there are material differences in voting rights among members of the governing body, or if the governing			
L	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	2		
b		-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
-	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		-
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a				
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	· · · · · · · · · · · · · · · · · · ·	<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b				
		12b	Х	
с		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b 12c	x x	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done			
13	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe on Schedule O how this was done</i>	12c	x	
13 14	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	12c 13	x x	
13 14	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	12c 13	x x	
13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	12c 13	x x	
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	12c 13 14 15a	x x x	x
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Form 990 (2	2021) THE FOUNDATION FOR TULSA SCHOOLS	73-1612027	Page 7							
Part VII	Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated									
	Employees, and Independent Contractors									
	Check if Schedule O contains a response or note to any line in this Part VII									
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
1a Comple	te this table for all persons required to be listed. Report compensation for the calendar year ending with	or within the organization	's tax year.							
● List a	Il of the organization's current officers, directors, trustees (whether individuals or organizations), regardle	ess of amount of compension	sation.							

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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(8) DWAYNE RURY 1.00 x 0.	(7) LAUREN SHERRY	1.00									
SECRETARY x x 0. <t< td=""><td>PROGRAMS</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	PROGRAMS		Х						0.	0.	0.
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(10) TEIL BLACKSHARE 1.00 x 0. </td <td>(9) MOLLY ASPEN</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(9) MOLLY ASPEN	1.00									
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(11) TIFFANI BRUTON 1.00 x 0. 0. 0. DIRECTOR x 0. 0. 0. 0. 0. (12) PETE BURGESS 1.00 x 0. 0. 0. 0. DIRECTOR x 0. 0. 0. 0. 0. 0. DIRECTOR x 0. 0. 0. 0. 0. 0. (13) CHUCK CHASTAIN 1.00 x 0. 0. 0. 0. 0. DIRECTOR x 0. 0. 0. 0. 0. 0. 0. DIRECTOR x 0. 0. 0. 0. 0. 0. 0. (14) JEFF COUCH 1.00 X 0.	(10) TEIL BLACKSHARE	1.00									
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(12) PETE BURGESS 1.00 x 0 0.	(11) TIFFANI BRUTON	1.00									
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(13) CHUCK CHASTAIN 1.00 x 0 0.		1.00									
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(14) JEFF COUCH 1.00 1.00 0.	(13) CHUCK CHASTAIN	1.00									
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(15) AARON FULKERSON 1.00 0 0. <t< td=""><td>(14) JEFF COUCH</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(14) JEFF COUCH	1.00									
DIRECTOR X 0 0. <th< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х						0.	0.	0.
(16) JUDIE HACKEROTT 1.00 x 0. 0. 0. DIRECTOR X 1.00 0. 0. 0. (17) KAREN KIRCHMAN 1.00 X 0. 0. 0. DIRECTOR X 0. 0. 0. 0.		1.00									
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(17) KAREN KIRCHMAN 1.00 X 0. <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
DIRECTOR X 0. 0. 0.			Х						0.	0.	0.
		1.00									
	DIRECTOR		Х						0.	0.	

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Form 990 (2021)

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Form 990 (2021) THE FOUNDATIC	N FOR TULS	A S	СНО	OLS					73-1612	027		Page 8
Part VII Section A. Officers, Directors, Trust	ees, Key Em	oloy	ees,	anc	l Hig	ghes	st C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	(do box	not c , unle:	(C Pos heck i ss per nd a d	C) itior more rson i	۱ than s botl	one n an	(D) Reportable compensation	(E) Reportable compensation		Estin amo	F) nated unt of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)		compe fron organ and r	her insation ithe ization elated zations
(18) GARRETT MILLS DIRECTOR	1.00	x						0.	().		0.
(19) STEVE MITCHELL	1.00											
DIRECTOR		Х						0.	().		0.
(20) MONROE NICHOLS	1.00											
DIRECTOR (21) SHANNON O'DOHERTY	1 00	х						0.	().		0.
(21) SHANNON O DOHERTY DIRECTOR	1.00							0				0
(22) MARK PLANK	1.00	X						0.	().		0.
DIRECTOR	1.00	x						0.	(0.
(23) DANIEL REGAN	1.00											0.
DIRECTOR	1,00	x						0.	(Ο.
(24) SHANESE SLATON	1.00									+		
DIRECTOR		x						0.	(».		Ο.
(25) WHITNEY STAUFFER	1.00											
DIRECTOR		х						0.	().		0.
(26) ANNIE TOMECEK	1.00											
DIRECTOR		Х						0.	().		٥.
1b Subtotal								100,000.	().	:	17,800.
c Total from continuation sheets to Part VII	, Section A							0.).		0.
d Total (add lines 1b and 1c)								100,000.).		17,800.
2 Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove	e) wh	io re	eceived more than \$100,	000 of reportable			0
3 Did the organization list any former officer,	-		•	•	•		Ŭ	• • •	•			es No
line 1a? If "Yes," complete Schedule J for su										-	3	X
4 For any individual listed on line 1a, is the su												v
and related organizations greater than \$150			•								4	X
5 Did any person listed on line 1a receive or a								•			5	x
rendered to the organization? <i>If</i> "Yes," <i>com</i>	blete Schedule	<u>ə J 1</u> 0	or sl	icn į	<u>oers</u>	on					5	
 Complete this table for your five highest cor the organization. Report compensation for t 										satior	n from	
(A)			- Tan	<u>ig 11</u>				(B)			(C)	
Name and business	address	NO	NE					Description of s	ervices	Con	npens	ation
2 Total number of independent contractors (ir	ncluding but n	ot lin	nited	d to t	thos	se lis	ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz SEE PART VII, SECTION A CONTINU		TS			(0				Fc	orm 9 9	0 (2021)
, 132008 12-09-21											-	(- -)

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Form 990 THE FOUNDATION FOR TULSA SCHOOLS					CHOOLS 73-1612027						
	nplo	yee			ligh	est (Compensated Employees (continued)				
(A) Name and title	(B) Average hours	(C) Position (check all that apply)					ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(27) BRAD WHITE DIRECTOR	1.00	x						0.	0.	0.	
(28) JOEY WIGNARAJAH	1.00										
DIRECTOR		х						0.	0.	0	
(29) MAGGIE HILLE YAR DIRECTOR	1.00	x						0.	0.	0.	
Total to Part VII, Section A, line 1c											

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					ON FOR	TULSA SCHOOLS	3		73-161202	7 Page 9
Pa	rt V		Statement of Rev	venue						
			Check if Schedule O c	contains a r	response	or note to any lin	<u>e in this Part VIII</u> (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	b d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contri All other contributions, gifts, similar amounts not included Noncash contributions included in I	ibutions) grants, and above	1a 1b 1c 1d 1e 1f 1g \$	510,961.				
an		h	Total. Add lines 1a-1f			7,805,062.				
Service nue	2	a b c	BOOK SALES			Business Code 900099	10,871.	10,871.		
Program Service Revenue			All other program service	revenue			10,871.			
	3	g	Total. Add lines 2a-2f Investment income (includ				10,071.			
	3 4 5		other similar amounts) Income from investment o Royalties	of tax-exem	pt bond p	roceeds	54,389.			54,389.
	6	b c	Gross rents Less: rental expenses Rental income or (loss)	(i) 6a 6b 6c	Real	(ii) Personal				
	7	a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Se	ecurities 48,342.	(ii) Other				
Revenue			and sales expenses Gain or (loss) Net gain or (loss)	7c	63,039. 85,303.		85,303.			85,303.
Other R	8		Gross income from fundraisin including \$ contributions reported on Part IV, line 18	line 1c). Se	of ee 8a					
			Less: direct expenses							
			Net income or (loss) from t Gross income from gamin Part IV, line 19	g activities	. See	····· •				
			Less: direct expenses							
			Net income or (loss) from a Gross sales of inventory, la and allowances	ess returns	;	▶				
			Less: cost of goods sold		10b					
		С	Net income or (loss) from	sales of inv	entory					
SL		_				Business Code				
Miscellaneous Revenue	11									
llan		b								
sce Bev		Ч С	All other revenue							
Ĭ			All other revenue							
	12	6	Total revenue. See instructio				7,955,625.	10,871.	0.	139,692.
13200		09-:					,,,,,,,,,,,,,-			Form 990 (2021)

132009 12-09-21

11

THE FOUNDATION FOR TULSA SCHOOLS Part IX Statement of Functional Expenses

 7b, 8b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9	Sude amounts reported on lines 6b, and 10b of Part VIII. s and other assistance to domestic organizations omestic governments. See Part IV, line 21 ts and other assistance to domestic iduals. See Part IV, line 22 ts and other assistance to foreign nizations, foreign governments, and foreign iduals. See Part IV, lines 15 and 16 effits paid to or for members pensation of current officers, directors, ees, and key employees bensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits ooll taxes	(A) Total expenses 7,233,291. 176,700. 98,377. 4,231.	(B) Program service expenses 7,233,291. 53,619. 29,852.	Management and general expenses	(D) Fundraising expenses 93, 398
 and de Grant indivi Grant orgar indivi Grant orgar indivi Bene Comp truste Comp person person Other Pensite section Other Person Person Fees 	omestic governments. See Part IV, line 21 ts and other assistance to domestic iduals. See Part IV, line 22 ts and other assistance to foreign nizations, foreign governments, and foreign iduals. See Part IV, lines 15 and 16 offits paid to or for members pensation of current officers, directors, ees, and key employees pensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	176,700. 98,377.	53,619.		
 2 Grant indivi 3 Grant orgar indivi 4 Bene 5 Comp truste 6 Comp persol persol 7 Other 8 Pensic sectio 9 Other 10 Payro 11 Fees 	ts and other assistance to domestic iduals. See Part IV, line 22 ts and other assistance to foreign nizations, foreign governments, and foreign iduals. See Part IV, lines 15 and 16 set is paid to or for members pensation of current officers, directors, ees, and key employees pensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	176,700. 98,377.	53,619.		
 indivi Grant orgar indivi Bene Comp truste Comp persoi persoi persoi Pensie sectio Other Payro Fees 	iduals. See Part IV, line 22 ts and other assistance to foreign nizations, foreign governments, and foreign iduals. See Part IV, lines 15 and 16 set to or for members pensation of current officers, directors, ees, and key employees pensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
 3 Grant orgar indivi 4 Bene 5 Comp truste 6 Comp person 7 Other 8 Pensie sectio 9 Other 10 Payro 11 Fees 	ts and other assistance to foreign nizations, foreign governments, and foreign iduals. See Part IV, lines 15 and 16 person of corrent officers, directors, ees, and key employees nensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
 orgarindivi Bene Comperson Comport Person Pension Section Other Payro Fees 	nizations, foreign governments, and foreign iduals. See Part IV, lines 15 and 16 pensation of current officers, directors, ees, and key employees pensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
 indivi 4 Bene 5 Comp truste 6 Comp person 7 Othen 8 Pension section 9 Othen 10 Payro 11 Fees 	iduals. See Part IV, lines 15 and 16 pensation of current officers, directors, ees, and key employees bensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
 4 Bener 5 Comp truster 6 Comp person 7 Othen 8 Pension section 9 Othen 10 Payro 11 Fees 	efits paid to or for members	98,377.			
 5 Comp truste 6 Comp persoi persoi 7 Other 8 Pensie sectio 9 Other 10 Payro 11 Fees 	pensation of current officers, directors, ees, and key employees bensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
 truste Comp persoi persoi persoi Pensie sectio Other Other Other Payro Fees 	ees, and key employees bensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
 6 Comp person person 7 Othen 8 Pensin sectio 9 Othen 10 Payro 11 Fees 	vensation not included above to disqualified ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	98,377.			
persol persol 7 Other 8 Pensie sectio 9 Other 10 Payro 11 Fees	ns (as defined under section 4958(f)(1)) and ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits		29,852.	16,526.	
7 Other 8 Pensic sectio 9 Other 10 Payro	ns described in section 4958(c)(3)(B) r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits		29,852.	16,526.	F1_00/
 7 Other 8 Pension section 9 Other 10 Payro 11 Fees 	r salaries and wages on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits		29,852.	16,526.	E1 00/
 8 Pension section 9 Other 10 Payro 11 Fees 	on plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits		· · · · · · · · · · · · · · · · · · ·		51,99S
sectio 9 Other 10 Payro 11 Fees	n 401(k) and 403(b) employer contributions) r employee benefits	4,231.		,	,
9 Other 10 Payro 11 Fees	r employee benefits		1,284.	711.	2,23
10 Payro 11 Fees		10,250.	3,110.	1,722.	5,418
11 Fees		21,282.	6,458.	3,575.	11,249
	for services (nonemployees):	,	-,	-,	
	agement	36,714.		36,714.	
	l	31,878.		31,878.	
		,		,	
	ying				
	stment management fees	6,987.		6,987.	
	r. (If line 11g amount exceeds 10% of line 25,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
-	nn (A), amount, list line 11g expenses on Sch O.)				
	ertising and promotion	16,641.		16,641.	
	e expenses	9,736.		9,736.	
	mation technology	35.		35.	
	Ities				
	ipancy	8,035.		8,035.	
10 0000 17 Trave		2,486.		2,486.	
	nents of travel or entertainment expenses	_,			
•	ny federal, state, or local public officials				
	erences, conventions, and meetings	1,371.		1,371.	
20 Intere	· · · · · · · · · · · · · · · · · · ·	_,			
	est				
	eciation, depletion, and amortization	648.		648.	
22 Depre 23 Insura		3,124.	948.	525.	1,65
	expenses, Itemize expenses not covered	,	•	•	
above line 24	4e amount exceeds 10% of line 25, column (A), nt, list line 24e expenses on Schedule 0.)				
	EBRATE TULSA	84,553.	84,553.		
	THER OF THE YEAR	18,303.	18,303.		
	DNIGHT TULSA	4,263.	4,263.		
	C CHARGES	3,288.		3,288.	
	her expenses	5,308.		5,266.	4
	functional expenses. Add lines 1 through 24e	7,777,501.	7,435,681.	175,827.	165,993
	costs. Complete this line only if the organization	. ,		,	<i>.</i>
	ted in column (B) joint costs from a combined				
-	ational campaign and fundraising solicitation.				

132010 12-09-21

Check here

if following SOP 98-2 (ASC 958-720)

Form 990 (2021)

Form 99	90 (2021
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THE FOUNDATION FOR TULSA SCHOOLS

		2021) THE FOUNDATION FOR TU	ILSA SCHOOI	JS		73-16	12027 Page
ar	tΧ	Balance Sheet					
		Check if Schedule O contains a response or not	e to any line ir	n this Part X		·····	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,056,159.	1	4,123,66
	2	Savings and temporary cash investments			5,232,998.	2	5,236,893
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	5,447,759.	4	2,504,45		
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disgualif	•	as defined			
		under section 4958(f)(1)), and persons described	•			6	
s	7	Notes and loans receivable, net			3,320.	7	3,32
Assets	8	Inventories for sale or use				8	·
As	9	B			1,681.	9	2,04
		Land, buildings, and equipment: cost or other				-	·
		basis. Complete Part VI of Schedule D	10a	14,224.			
	b	Less: accumulated depreciation		13,148.	1,724.	10c	1,07
	11	Investments - publicly traded securities		· · · · · ·	1,649,138.	11	1,520,97
	12	Investments - other securities. See Part IV, line 1			9,464.	12	13,34
	13	Investments - program-related. See Part IV, line -		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equa			13,402,243.	16	13,405,76
	17	Accounts payable and accrued expenses			3,491.	17	81,54
	18	Grants payable				18	,
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				22	
LIa	23	Secured mortgages and notes payable to unrela		F		23	
	24	Unsecured notes and loans payable to unrelated		·····		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		of Schedule D			25		
	26	Total liabilities. Add lines 17 through 25			3,491.	26	81,54
		Organizations that follow FASB ASC 958, che					
es		and complete lines 27, 28, 32, and 33.					
Net Assets or Fund Balances	27	Net assets without donor restrictions			2,301,565.	27	2,225,27
Sal	28	Net assets with donor restrictions			11,097,187.	28	11,098,940
		Organizations that do not follow FASB ASC 9					
5		and complete lines 29 through 33.					
2	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
ا تہ	32	Total net assets or fund balances			13,398,752.	32	13,324,219
<u>o</u>							

Form 990 (2021)

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Form	990 (2021) THE FOUNDATION FOR TULSA SCHOOLS	73-161202	7	Pa	_{ge} 12
	rt XI Reconciliation of Net Assets				4
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,	955,	625.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,	777,	501.
3	Revenue less expenses. Subtract line 2 from line 1	3		178,	124.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13,	398,	752.
5	Net unrealized gains (losses) on investments	5	-	252,	657.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	13,	324,	219.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	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 on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	L

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(Form 990)

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.

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

OMB No. 1545-0047 ∕

	Open to Public Inspection							
mployer identification number								

Name of the organization

Name of the organization Employer identification n									identification number				
THE FOUNDATION FOR TULSA SCHOOLS									73-1612027				
Par	Image: style="text-align: center;">Reason for Public Charity Status. (All organizations must complete this part.) See instructions.												
The o	rgan	zation is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only o	one box.)							
1 [A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2 [A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)											
3 [A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
		city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)(iv). (Complete Part II.)											
6 [A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7 [X	An organization that norma	-	ntial part of its support fi	rom a gove	ernmental	unit or from th	ne general p	public described in				
г		section 170(b)(1)(A)(vi). (C											
8 [A community trust describe			-								
9 [An agricultural research org				-		-	-				
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or				
10		university:		than 00 1/00/ of its sum	art from a	ontribution	o momborob	in face and	d areas reasints from				
10 [An organization that norma activities related to its exem											
		income and unrelated busir		•	. ,				•				
		See section 509(a)(2). (Cor				ses acqui	ied by the org	anization a					
11 [An organization organized a		vely to test for public sa	fetv See	section 50)9(a)(4)						
12		An organization organized a	•	· ·	•			rrv out the	purposes of one or				
		more publicly supported or	•		•		-	•					
		lines 12a through 12d that	-										
а		Type I. A supporting orga						-	giving				
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	ipporting				
		organization. You must o	complete Part IV, Se	ctions A and B.									
b] Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hav	ing				
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manaç	ge the supp	ported				
		organization(s). You mus	t complete Part IV,	Sections A and C.									
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functional	ly integrate	d with,				
		its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	ith its suppor/	ted organiz	zation(s)				
		that is not functionally int			•		-	an attentiv	reness				
		requirement (see instructi	,	•									
е		Check this box if the orga					Type I, Type I	II, Type III					
	-	functionally integrated, or		hally integrated supporting	ng organiz	ation.							
		r the number of supported c ide the following informatior	•	d arganization(a)									
<u> g</u>		Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetary	(vi) Amount of other				
		organization		(described on lines 1-10 above (see instructions))	in your governi Yes	ng document?	support (see in	structions)	support (see instructions)				
				above (see instructions))									
Total													

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	12,122,303.	11,432,526.	14,462,146.	11,337,863.	7,805,062.	57,159,900.
2	Tax revenues levied for the organ-						
	ization'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 through 3	12,122,303.	11,432,526.	14,462,146.	11,337,863.	7,805,062.	57,159,900.
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)						15,673,401.
	Public support. Subtract line 5 from line 4.						41,486,499.
	ction B. Total Support	()	(1) 00 (0	() 00 (0	()) 00000	() 000 ((2) =
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018 11,432,526.	(c) 2019	(d) 2020	(e) 2021	(f) Total 57,159,900.
	Amounts from line 4	12,122,303.	11,452,520.	14,462,146.	11,337,863.	7,805,062.	57,159,900.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	00 000	125 150	102 016	50 510	54,389.	122 002
~	and income from similar sources	88,008.	135,158.	103,916.	52,512.	54,305.	433,983.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
44	assets (Explain in Part VI.) Total support. Add lines 7 through 10						57,593,883.
12						12	54,476.
	First 5 years. If the Form 990 is for th		,				
10	organization, check this box and stor	0					
Sec	ction C. Computation of Publi						
	Public support percentage for 2021 (I			olumn (f))		14	72.03 %
	Public support percentage from 2020			(77)		15	66.85 %
	33 1/3% support test - 2021. If the o					ore, check this box	
	stop here. The organization qualifies					,	X
b	33 1/3% support test - 2020. If the o		-				s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not c				
	and if the organization meets the fact						
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	blicly supported or	ganization	-	▶□
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	ne facts-and-circum	nstances test, chec	k this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	i, 16b, 17a, or 17b	, check this box a	nd see instructions	
						Schedule A	(Form 990) 2021

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 202	1 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	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 \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 202	1 (f) Total
9	Amounts from line 6						
	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						
	Net income from unrelated business activities not included on 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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) orga	nization,
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2020					16	%
Sec	ction D. Computation of Invest	stment Income	e Percentage				
	Investment income percentage for 20			ine 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2021. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	3 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a						▶∟
b	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						ation
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins		>
13202	3 01-04-22		17	,		Sche	dule A (Form 990) 2021

1

2

3a

Yes No

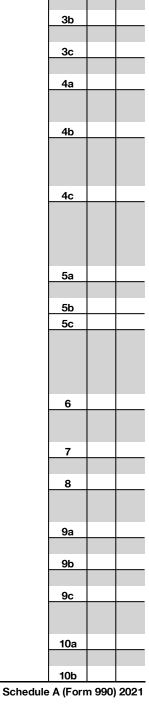
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

132024 01-04-21



18

THE FOUNDATION FOR TULSA SCHOOLS

Yes No

Yes No

1

2

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

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i> <i>supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1
~		
2	Did the organization operate for the benefit of any supported organization other than the supported	

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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

<u>the supported organization(s).</u> Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	1	1	1	Check the box next to the metho	od that the organization use	d to satisfy the Integral Par	t Test during the year	r (see instructior
--	---	---	---	---------------------------------	------------------------------	-------------------------------	------------------------	--------------------

- The organization satisfied the Activities Test. Complete line 2 below. а
- h The organization is the parent of each of its supported organizations. Complete line 3 below.

c 🗌] The organization supported a governmental entity	Describe in Part VI how	you supported a g	overnmental entity	(see instruction <u>s).</u>
-----	--	-------------------------	-------------------	--------------------	-----------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 132025 01-04-22

2a 2b 3a 3b

Yes No

Schedule A (Form 990) 2021

13490512 795132 FOU002

19

che	dule A (Form 990) 2021 THE FOUNDATION FOR TULSA SCHOOLS			73-1612027 Pag
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi			Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations must	st complete S	Sections A through E.	
ect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1	2		

3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 Enter greater of line 2 or line 3. 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions). 7

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

Schedule A (Form 990) 2021

Page **6**

132026 01-04-22

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sect	ion D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	;	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5			
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.		7			
8	Distributions to attentive supported organizations to which the					
	(provide details in Part VI). See instructions.		8			
9	Distributable amount for 2021 from Section C, line 6		9			
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	5	(iii) Distributable Amount for 2021	
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.			_		
3	Excess distributions carryover, if any, to 2021					
	From 2016					
	From 2017					
	From 2018					
	From 2019					
	From 2020					
	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2021 distributable amount					
<u> i</u>	Carryover from 2016 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
	Applied to underdistributions of prior years					
	Applied to 2021 distributable amount Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2021. Subtract lines 3h					
U	and 4b from line 1. For result greater than zero, <i>explain in</i>					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
•	and 4c.					
8	Breakdown of line 7:					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					

Schedule A (Form 990) 2021

132027 01-04-22

Schedule A	(Form 990) 2021	THE FOUNDATION FOR TULS.	A SCHOOLS	73-1612027	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9 lines 2 and 3; Part IV, Section E, I	ns required by Part II, line 10; Part II, lin tc, 11a, 11b, and 11c; Part IV, Section ines 1c, 2a, 2b, 3a, and 3b; Part V, line 5, and 6. Also complete this part for an	ne 17a or 17b; Part III, line 12; B, lines 1 and 2; Part IV, Section (3 1; Part V, Section B, line 1e; Part	С,
	(See instructions.)				
132028 01-04-2	2		1 1	Schedule A (Form 99	0) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

	THE FOUNDATION FOR TULSA SCHOOLS	73-1612027
Organization type (cheo	sk one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \dots \blacktriangleright \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$4,612,673.	Person X Payroll Image: Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$800,600.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$510,961.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$222,000.	Person X Payroll Image: Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5		\$200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

(b)

Name, address, and ZIP + 4

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Schedule B (Form 990) (2021) Name of organization

Part I

THE FOUNDATION FOR TULSA SCHOOLS

73-1612027

Employer identification number

Schedule B (Form 990) (2021)

(d)

Type of contribution

Person Payroll

Noncash

(Complete Part II for noncash contributions.)

X

Page 2

25 2021.05080 THE FOUNDATION FOR TULSA FOU002_1

\$

(c)

Total contributions

180,000.

123452 11-11-21

13490512 795132 FOU002

6

(a) No.

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
123453 11-11-	-21		Schedule B (Form 990) (202	

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Schedule B (Form 990) (2021)

THE FOUNDATION FOR TULSA SCHOOLS

Name of organization

Employer identification number

73-1612027

13490512 795132 FOU002

lame of or	ganization		Employer identification numb
HE FOUNI	DATION FOR TULSA SCHOOLS		73-1612027
Part III	Exclusively religious, charitable, etc., contribut	a) through (e) and the following line er charitable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the y
a) No.			
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—			
		(e) Transfer of gi	ift
	Transferee's name, address, a 	nd ZIP + 4	Relationship of transferor to transferee
a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			<u> </u>
		ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—			
	Transformalis and additional	(e) Transfer of git	
F	Transferee's name, address, a	na ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gi	 ift
F	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
454 11-11-	21		Schedule B (Form 990) (

13490512 795132 FOU002

	HEDULE D n 990)	Complete if the organ Part IV, line 6, 7, 8, 9, 10,	I Financial Statements nization answered "Yes" on Form 990, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		OMB No. 1545-0047
	ment of the Treasury I Revenue Service		ttach to Form 990.) for instructions and the latest information		Open to Public Inspection
-	e of the organizat				ployer identification number
	· · · · · · · · · · · · · · · · · ·	THE FOUNDATION FOR TULSA SCH	OOLS		73-1612027
Pa	rt I Organiz	ations Maintaining Donor Advised	Funds or Other Similar Funds or A	ccour	Its. Complete if the
	organizatio	on answered "Yes" on Form 990, Part IV, line	6.		
			(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at e	nd of year			
2	Aggregate value of	of contributions to (during year)			
3	Aggregate value of	of grants from (during year)			
4	Aggregate value a	t end of year			
5	-		riting that the assets held in donor advised fu		
			clusive legal control?		Yes No
6	•	c	visors in writing that grant funds can be used	-	
			donor advisor, or for any other purpose confe	0	
Pa	impermissible priv	rate benefit?	· · · · · · · · · · · · · · · · · · ·		Yes No
			nization answered "Yes" on Form 990, Part I	/, line /	
1		servation easements held by the organization			Second and the state of the second
		n of land for public use (for example, recreation	, <u> </u>	-	important land area
		of natural habitat n of open space	Preservation of a cer	unea m	storic structure
2		• •	d conservation contribution in the form of a c	onconvo	tion assemant on the last
2	day of the tax yea	o o .	a conservation contribution in the form of a c		Held at the End of the Tax Year
а				2a	
b					
c	•		ture included in (a)		
d		vation easements included in (c) acquired aft			
		nal Register		2d	
3			ased, extinguished, or terminated by the orga	·	during the tax
	year 🕨		, , , , ,		5
4	Number of states	where property subject to conservation ease	ment is located ►		
5	Does the organiza	tion have a written policy regarding the perio	dic monitoring, inspection, handling of		
		forcement of the conservation easements it h			Yes No
6	Staff and voluntee	er hours devoted to monitoring, inspecting, ha	andling of violations, and enforcing conservat	ion ease	ements during the year
	▶				
7	Amount of expense	ses incurred in monitoring, inspecting, handlir	ng of violations, and enforcing conservation e	asemen	ts during the year
	▶\$				
8	Does each conser	vation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)(E	3)(i)	
	and section 170(h				
9	In Part XIII, descri	be how the organization reports conservation	easements in its revenue and expense state	ment an	ıd
	balance sheet, an	d include, if applicable, the text of the footno	te to the organization's financial statements t	nat desc	cribes the
De		counting for conservation easements.	Aut Historiaal Trassuras or Other	Cine II -	Acceto
Pa		-	Art, Historical Treasures, or Other	Simila	r Assets.
		f the organization answered "Yes" on Form 9			
1a	•	· ·	, not to report in its revenue statement and ba		
			c exhibition, education, or research in furthera	ance of	public
_	· •	Part XIII the text of the footnote to its financ			
b	-		to report in its revenue statement and balance		
	art, historical treas	sures, or other similar assets held for public e	exhibition, education, or research in furtherand	e of pu	DIIC Service,

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	S	Schedule D (Form 990) 2021
b	Assets included in Form 990, Part X	▶ \$	
а	Revenue included on Form 990, Part VIII, line 1	▶ \$	
	the following amounts required to be reported under FASB ASC 958 relating to these items:		
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, prov	vide	
	(ii) Assets included in Form 990, Part X	▶ \$	
	(i) Revenue included on Form 990, Part VIII, line 1	▶ \$	
	provide the following amounts relating to these items:		
			,

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13490512 795132 FOU002

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1	05000	mur	

Sche		TION FOR TULSA S				73-161		P	age 2
Pa	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Similar	Assets	contii	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	significant u	se of its			
	collection items (check all that apply):		•	C C	U U				
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е		0 1 0					
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's exe	empt purpos	se in Part	XIII.		
5	During the year, did the organization solicit o		-	-					
•	to be sold to raise funds rather than to be ma		•				Yes		No
Pa	t IV Escrow and Custodial Arran					Part IV. I			
	reported an amount on Form 990, Pai		ie ii tile elgamiatio			,,.			
1a	Is the organization an agent, trustee, custodi		ary for contribution	s or other assets not	tincluded				
	on Form 990, Part X?						Yes		No
h	If "Yes," explain the arrangement in Part XIII					∟		L	
D D			owing table.				Amoun	t	
с	Beginning balance				1c			-	
	Additions during the year								
	Did the organization include an amount on Fe				···· •		Yes		No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • • • • • • • • • • • • •	····· ــــ			
	t V Endowment Funds. Complete i					<u></u>			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Fou	r vears	back
19	Beginning of year balance	38,252.	30,081.	29,208.		27,573.	(0) + 00	,	611.
b	Contributions		,	,		.,		,	
0	Net investment earnings, gains, and losses	-5,755.	8,284.	970.		1,723.		2	051.
с А			•,2•2•					,	
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	124.	113.	97.		88.			89.
	Administrative expenses	32,373.	38,252.	30,081.		29,208.		27	573.
g	End of year balance		,		4	200.		,	575.
2	Provide the estimated percentage of the curr	rent year end balance) held as:					
a	Board designated or quasi-endowment		_%						
b		%							
с		%							
•	The percentages on lines 2a, 2b, and 2c show	•							
3a	Are there endowment funds not in the posse	ssion of the organizat	tion that are held ar	administered for t	ine organiza	tion		Yes	No
	by:							X	
	(i) Unrelated organizations						3a(i)		x
	(ii) Related organizations						3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza						3b		
	Describe in Part XIII the intended uses of the total Land, Buildings, and Equipm		ment funds.						
Fai	Complete if the organization answere		Dout IV line 110 C	an Farm 000 Dart Y	(line 10				
	Description of property	(a) Cost or ot			Accumulate	d	(d) Boo	k valu	е
		basis (investm	Dasis	(other) d	epreciation				
	Land								
	Buildings								0
	Leasehold improvements			14,224.	13,2	148.		1,	076.
d	Equipment								
	Other								
Tota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990, Part λ	(, column (B), line 1	0c.)					076.
					:	Schedule	D (Forn	n 990)) 2021

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part	t X, line 25.
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

►

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

Schedule D (Form 990) 2021

(8) (9)

Sche	dule D (Form 990) 2021 THE FOUNDATION FOR TULSA SCHOOLS			73-1612027	Page 4
	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With R	evenue per Re	turn.	5
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.			
1	Total revenue, gains, and other support per audited financial statements			1	7,695,981.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	-252,657.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	-252,657.
3	Subtract line 2e from line 1			3	7,948,638.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	6,987.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	6,987.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	7,955,625.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With I	Expenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.			
1	Total expenses and losses per audited financial statements			1	7,770,514.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a			
b	Prior year adjustments	. 2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	7,770,514.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4 a	6,987.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	6,987.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	7,777,501.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			; Part X, line 2; F	Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	litional informa	ation.		
PAR	V, LINE 4:				
THE	FOUNDATION IS THE BENEFICIARY OF CERTAIN ENDOWMENT FUNDS BY T	HE TULSA			
0.010		DOVIDES			
	UNITY FOUNDATION (TCF). TCF IS A NOT-FOR-PROFIT ENTITY THAT P	ROVIDES			
FOR	ENDOWED COMMUTIZITIONS TO BE DOLLED TO MANTATE DEMITAN ON THREE	CUMENUC			
FOR	ENDOWED CONTRIBUTIONS TO BE POOLED TO MAXIMIZE RETURN ON INVE	SIMENIS			
FOR	THE BENEFIT OF AREA NOT-FOR-PROFIT ORGANIZATIONS. CONTRIBUTIO	NC TO THE			
FOR	THE BENEFIT OF AREA NOT-FOR-FROFIT ORGANIZATIONS. CONTRIBUTIO	NS IO INE			
END	איאראיש ביוארט אסב הבטאדווויים עי אסש בסט הסטבים באוווידים אכי אביי	20			
ENDC	WMENT FUNDS ARE PERMITTED BY NOT-FOR-PROFIT ENTITIES, AS WELL	AD			
тмрт	VIDUAL DONORS IN THE COMMUNITY WHO DESIGNATE THE FOUNDATION A	< ਜਸਦ			
	VIDONE DONORS IN THE COMMONITY WHO DESIGNATE THE FOUNDATION A				
BENT	FICIARY OF THEIR CONTRIBUTIONS. THE FOUNDATION MADE NO CONTRI	BIITTONG			
ואנים	ITCHART OF THEIR CONTRIBUTIONS, THE FOUNDATION MADE NO CONTRI	2011010			
т О л	CF FOR THE YEARS ENDED JUNE 30, 2022 OR 2021. EARNINGS ON THE	SE			
	or row rul reads bone 50, 2022 or 2021. ERMINGS ON THE				

ENDOWED FUNDS ARE DISTRIBUTED IN ACCORDANCE WITH THE TERMS OF THE

ENDOWMENT, TCF'S SPENDING POLICIES AND UPON THE FOUNDATION'S DIRECTION TO

TCF.

132054 10-28-21

Part XIII Supplemental Information (continued)

ENDOWED FUNDS CONTRIBUTED BY THE FOUNDATION AND THE REINVESTED EARNINGS

THEREON, NET OF DISTRIBUTIONS RECEIVED, ARE REFLECTED IN THE STATEMENTS OF

FINANCIAL POSITION AS BENEFICIAL INTEREST IN ASSETS HELD BY COMMUNITY

FOUNDATION. THE FAIR VALUE OF ENDOWED FUNDS CONTRIBUTED BY THIRD-PARTY

DONORS THAT ARE HELD BY TCF DESIGNATED FOR THE BENEFIT OF THE FOUNDATION

WAS \$19,058 AND \$22,513 AT JUNE 30, 2022 AND 2021, RESPECTIVELY. TCF HAS

VARIANCE POWER OVER CONTRIBUTIONS IT HAS RECEIVED FROM THIRD PARTIES ON

BEHALF OF THE FOUNDATION. ACCORDINGLY, SUCH ENDOWED FUNDS ARE NOT

REFLECTED IN THE FOUNDATION'S STATEMENTS OF FINANCIAL POSITION.

Schedule D (Form 990) 2021

132055 10-28-21

SCHEDULE I (Form 990)	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury			Attach to For				Open to Public		
Internal Revenue Service		Go to www.i	rs.gov/Form990 fo	or the latest inform	nation.		Inspection		
Name of the organization THE FOUNDATI	ON FOR TULSA SO	CHOOLS					Employer identification number 73-1612027		
Part I General Information on Grants	and Assistance								
 Does the organization maintain record criteria used to award the grants or as Describe in Part IV the organization's part IV the organization's part IV the organization or an advance of the organization organization of the organization of the organization organiza	sistance?		·		•				
Part II Grants and Other Assistance t recipient that received more that	-				anization answered "	/es" on Form 990, Parl	t IV, line 21, for any		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
TULSA PUBLIC SCHOOLS 3027 SOUTH NEW HAVEN TULSA, OK 74114	73-6021242	TULSA PUBLIC SCHOOLS	7,233,291.	0.			TO SUPPORT TULSA PUBLIC SCHOOLS		
2 Enter total number of section 501(c)(3)			l le line 1 table			I	↓ 		
3 Enter total number of other organization									

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

Schedule I (Form 990) 2021

THE FOUNDATION FOR TULSA SCHOOLS

73-1612027

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	(b) Number of recipients	(b) Number of recipients (c) Amount of cash grant Image: Constraint of the second s	(b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance Image: Image	(b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Image:

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.	OHB No. 1545-0047
Name of the organizatio		Employer identification number 73-1612027
FORM 990 PART I	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
<u> </u>	T OF TULSA PUBLIC SCHOOLS.	
	JIEVES THAT EVERY CHILD SHOULD HAVE ACCESS TO A	
QUALITY EDUCATION,	THE RESOURCES THEY NEED TO LEARN, AND A SUPPORTIVE	
ENVIRONMENT IN WHI	CH TO LEARN.	
THE FOUNDATION FOR	TULSA SCHOOLS IS HONORED TO BE A CHAMPION FOR TPS	
STUDENTS, TEACHERS	, AND STAFF. WE SERVE AS A BRIDGE BETWEEN THOSE WHO	
ARE PASSIONATE ABO	UT PUBLIC EDUCATION AND THOSE WHO LEARN IN, TEACH AT,	
AND SUPPORT OUR SC	HOOLS.	
FORM 990, PART III	, LINE 4D, OTHER PROGRAM SERVICES:	
THE ORGANIZATION F	UBLISHED A CHILDREN'S BOOK THAT IS CURRENTLY FOR SALE	
AT A HANDFUL OF LC	CAL PARTNER RETAIL LOCATIONS AS WELL AS THROUGH THE	
FOUNDATION'S WEBSI	TE. FOR EVERY BOOK SOLD, THE FOUNDATION PLANS TO	
PROVIDE A BOOK TO	INCOMING PRE-K FAMILIES. THE FOUNDATION BEGAN THE	
CREATION OF ITS 2N	D CHILDREN'S BOOK. THE BOOK WAS FINALIZED AND	
PUBLISHED IN DECEM	BER 2021 AND IS CURRENTLY FOR SALE AT RETAIL	
LOCATIONS AND THRO	UGH THE FOUNDATION'S WEBSITE.	
EXPENSES \$ 88,817.	INCLUDING GRANTS OF \$ 0. REVENUE \$ 10,871.	
	· · · · · · · · · · · · · · · · · · ·	
DISCRETIONARY, EXF	LORE OK, GRANTS FOR GREAT IDEAS	
EXPENSES \$ 139,045	. INCLUDING GRANTS OF \$ 25,472. REVENUE \$ 0.	
,,		
דיז התרגם ۵۵ אפרס	SECTION R LINE 11R.	
·	SECTION B, LINE 11B:	
THE TREASURER HAS	DE FACTO DELEGATED AUTHORITY OF THE BOARD OF DIRECTORS.	
	EWS THE 990 RETURN AND COMPARES IT TO THE AUDITED eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2021
132211 11-11-21		

13490512 795132 FOU002

Schedule O (Form 990) 2021				Page
Name of the organization THE FOUNDATION FOR TULSA SCHO	DOLS		Employer identification 73-1612027	on number
FINANCIAL STATEMENTS TO ENSURE REASONABLENESS.				
FORM 990, PART VI, SECTION B, LINE 12C:				
STAFF CONSISTENTLY MONITORED DECISIONS MADE BY BO	ARD TO ENSURE COME	PLIANCE		
WITH COI POLICY.				
FORM 990, PART VI, SECTION B, LINE 15A:				
THE EXECUTIVE COMMITTEE DELIBERATED THE COMPENSAT:		TEC DACED		
	ION OF ALL EMPLOYE			
ON STRUCTURED OUTCOMES OF WORK.				
FORM 990, PART VI, SECTION C, LINE 19:				
THE 990 IS AVAILABLE TO THE PUBLIC UPON REQUEST.				
132212 11-11-21	36		Schedule O (Form	n 990) 202 [.]

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Schedule O (Form 990) 2021