

Return of Organization Exempt From Income Tax

2005

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning 7/01, 2005, and ending 6/30, 2006

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type. See specific instructions. Tulsa Opera, Inc. 1610 South Boulder Tulsa, OK 74119

D Employer Identification Number 73-0643311 E Telephone number 918-582-4035 F Accounting method: Cash, Accrual, Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

- H and I are not applicable to section 527 organizations. H (a) Is this a group return for affiliates? H (b) If 'Yes,' enter number of affiliates. H (c) Are all affiliates included? H (d) Is this a separate return filed by an organization covered by a group ruling?

G Web site: N/A

J Organization type (check only one): 501(c) 3 (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 3,191,823.

I Group Exemption Number M Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

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Table with 21 rows and multiple columns for revenue and expenses. Includes sub-rows for contributions, program service revenue, membership dues, interest, dividends, gross rents, investment income, sales of assets, special events, inventory, and other revenue/expenses. Total revenue is 2,834,069 and total expenses is 2,697,514.

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**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23	Specific assistance to individuals (att sch)	23			
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc	25	0.	0.	0.
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33			
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42	32,522.	32,522.	
43	Other expenses not covered above (itemize)				
a	See Statement 4	43a	2,664,992.	1,452,360.	485,845.
b	-----	43b			
c	-----	43c			
d	-----	43d			
e	-----	43e			
f	-----	43f			
g	-----	43g			
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	2,697,514.	1,452,360.	518,367.

**Joint Costs.** Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III** Statement of Program Service Accomplishments

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

What is the organization's primary exempt purpose? ▶ <u>See Statement 5</u> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
<b>a</b> OPERAS INCLUDED FAUST, ARIADNE AUF NAXOS, MARRIAGE OF FIGARO AND A CONCERT VERSION OF MESSIAH. ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	1,452,360.
<b>b</b> ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>c</b> ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>d</b> ----- ----- ----- (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>e</b> Other program services (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	1,452,360.

**Part IV Balance Sheets** (See Instructions)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash – non-interest-bearing	34,116.	45	164,587.
	46 Savings and temporary cash investments		46	
	47a Accounts receivable		47a	
	b Less: allowance for doubtful accounts		47b	47c
	48a Pledges receivable		48a	
	b Less: allowance for doubtful accounts		48b	48c
	49 Grants receivable	200,215.	49	218,684.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes & loans receivable (attach sch)		51a	
	b Less: allowance for doubtful accounts		51b	51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	132,727.	53	204,107.
	54 Investments – securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,346.	54	
	55a Investments – land, buildings, & equipment basis		55a	
	b Less: accumulated depreciation (attach schedule)		55b	55c
56 Investments – other (attach schedule)		56		
57a Land, buildings, and equipment basis	692,281.	57a		
b Less: accumulated depreciation (attach schedule) <b>Statement 6</b>	417,153.	57b	57c	
58 Other assets (describe <input type="checkbox"/> _____)		58		
59 <b>Total assets</b> (must equal line 74) Add lines 45 through 58	674,801.	59	862,506.	
LIABILITIES	60 Accounts payable and accrued expenses	169,352.	60	63,732.
	61 Grants payable		61	
	62 Deferred revenue	360,897.	62	357,667.
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe <input type="checkbox"/> <b>See Statement 7</b> _____)	175,000.	65	335,000.
66 <b>Total liabilities.</b> Add lines 60 through 65	705,249.	66	756,399.	
NET ASSETS OR FUND BALANCES	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	67 Unrestricted	-149,692.	67	-208,027.
	68 Temporarily restricted	117,136.	68	312,026.
	69 Permanently restricted	2,108.	69	2,108.
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	-30,448.	73	106,107.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	674,801.	74	862,506.

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**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements		<b>a</b>	3,025,294.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12:			
	1 Net unrealized gains on investments	<b>b1</b>		
	2 Donated services and use of facilities	<b>b2</b>		
	3 Recoveries of prior year grants	<b>b3</b>		
	4 Other (specify) _____	<b>b4</b>	191,225.	
	See Stmt 8			
	Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	191,225.
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	2,834,069.
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :			
	1 Investment expenses not included on Part I, line 6b	<b>d1</b>		
	2 Other (specify) _____	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	
<b>e</b>	<b>Total revenue</b> (Part I, line 12) Add lines <b>c</b> and <b>d</b>		<b>e</b>	2,834,069.

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements		<b>a</b>	2,436,399.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17:			
	1 Donated services and use of facilities	<b>b1</b>		
	2 Prior year adjustments reported on Part I, line 20	<b>b2</b>		
	3 Losses reported on Part I, line 20	<b>b3</b>		
	4 Other (specify): _____	<b>b4</b>	-261,115.	
	See Stmt 9			
	Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	-261,115.
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	2,697,514.
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :			
	1 Investment expenses not included on Part I, line 6b	<b>d1</b>		
	2 Other (specify) _____	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	
<b>e</b>	<b>Total expenses</b> (Part I, line 17) Add lines <b>c</b> and <b>d</b>		<b>e</b>	2,697,514.

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT ATTACHED	0	0.	0.	0.
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Part VI Other Information (continued)	Yes	No
<b>82 a</b> Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
<b>b</b> If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
<b>83 a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
<b>84 a</b> Did the organization solicit any contributions or gifts that were not tax deductible?		X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
<b>85 501(c)(4), (5), or (6) organizations a</b> Were substantially all dues nondeductible by members?	N/A	
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
<b>c</b> Dues, assessments, and similar amounts from members	85c	N/A
<b>d</b> Section 162(e) lobbying and political expenditures	85d	N/A
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
<b>86 501(c)(7) organizations.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12	86a	N/A
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	86b	N/A
<b>87 501(c)(12) organizations</b> Enter: <b>a</b> Gross income from members or shareholders	87a	N/A
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
<b>88</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.		X
<b>89 a 501(c)(3) organizations</b> Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.		
<b>b 501(c)(3) and 501(c)(4) organizations</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b	X
<b>c</b> Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
<b>d</b> Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
<b>90 a</b> List the states with which a copy of this return is filed ▶ <u>OK</u>		
<b>b</b> Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	15
<b>91 a</b> The books are in care of ▶ <u>TULSA OPERA, INC.</u> Telephone number ▶ <u>918-582-4035</u> Located at ▶ <u>1610 South Boulder, Tulsa OK</u> ZIP + 4 ▶ <u>74119</u>		
<b>b</b> 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)? If 'Yes,' enter the name of the foreign country ▶ _____	91b	X
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Statements		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the United States? If 'Yes,' enter the name of the foreign country ▶ _____	91c	X
<b>92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041</b> - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

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**Part VII Analysis of Income-Producing Activities** (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

- 93 Program service revenue:
  - a TICKET SALES
  - b \_\_\_\_\_
  - c \_\_\_\_\_
  - d \_\_\_\_\_
  - e \_\_\_\_\_
  - f Medicare/Medicaid payments
  - g Fees & contracts from government agencies
- 94 Membership dues and assessments
- 95 Interest on savings & temporary cash invmnts
- 96 Dividends & interest from securities
- 97 Net rental income or (loss) from real estate
  - a debt-financed property
  - b not debt-financed property
- 98 Net rental income or (loss) from pers prop
- 99 Other investment income
- 100 Gain or (loss) from sales of assets other than inventory
- 101 Net income or (loss) from special events
- 102 Gross profit or (loss) from sales of inventory
- 103 Other revenue. a \_\_\_\_\_
  - b \_\_\_\_\_
  - c \_\_\_\_\_
  - d \_\_\_\_\_
  - e \_\_\_\_\_
- 104 Subtotal (add columns (B), (D), and (E))
- 105 Total (add line 104, columns (B), (D), and (E))

Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
				633,795.
		14	314.	
		18	544.	17.
				260,716.
		3	-317.	
		3	23,292.	
			23,833.	894,528.
				918,361.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes):
N/A	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

- a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
  - b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No
- Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

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.

Signature of officer: H. G. Will Date: May 15, 2007

Type or print name and title: HENRY G. WILL, PRESIDENT OF THE BOARD OF DIRECTORS

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 5/15/07 Check if self-employed:  Preparer's SSN or PTIN (See General Instruction W): N/A P00000954

Firm's name (or yours if self-employed), address, and ZIP + 4: MORSE & CO. 6950 S. UTICA AVENUE TULSA, OK 74136-3903 EIN: N/A 20-4091940 Phone no: (918) 749-1040

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Organization Exempt Under  
Section 501(c)(3)**

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**2005**

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

Name of the organization: **Tulsa Opera, Inc.** Employer identification number: **73-0643311**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
See Statement 11		174,079.	13,322.	0.
Total number of other employees paid over \$50,000 ▶	0			

**Part II – A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part II – B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None' See instructions)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

**Part III** Statements About Activities (See instructions)

	Yes	No
<p><b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>N/A</u></p> <p>(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B).</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>		X
<p><b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)</p> <p style="text-align: center;">See Statement 12</p> <p><b>a</b> Sale, exchange, or leasing of property?</p>		X
<p><b>b</b> Lending of money or other extension of credit?</p>		X
<p><b>c</b> Furnishing of goods, services, or facilities?</p> <p style="text-align: right;">See Form 990, Part V</p>	X	
<p><b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	X	
<p><b>e</b> Transfer of any part of its income or assets?</p>		X
<p><b>3a</b> Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)</p>		X
<p><b>b</b> Do you have a section 403(b) annuity plan for your employees?</p>	X	
<p><b>c</b> During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?</p>		X
<p><b>4a</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p>		X
<p><b>b</b> Do you provide credit counseling, debt management, credit repair, or debt negotiation services?</p>		X

**Part IV** Reason for Non-Private Foundation Status (See instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11 a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11 b  A community trust. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12  An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc, functions - subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization ▶  Type 1  Type 2  Type 3

Provide the following information about the supported organizations (See instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4). (See instructions)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	981,495.	853,255.	882,302.	1,335,848.	4,052,900.
<b>16</b> Membership fees received					0.
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose	903,129.	800,951.	766,711.	730,382.	3,201,173.
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	377.	1,386.	2,741.	5,071.	9,575.
<b>19</b> Net income from unrelated business activities not included in line 18					0.
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0.
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					0.
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. See Stmt 13	216,997.	196,783.	249,547.	274,370.	937,697.
<b>23</b> Total of lines 15 through 22	2,101,998.	1,852,375.	1,901,301.	2,345,671.	8,201,345.
<b>24</b> Line 23 minus line 17	1,198,869.	1,051,424.	1,134,590.	1,615,289.	5,000,172.
<b>25</b> Enter 1% of line 23	21,020.	18,524.	19,013.	23,457.	
<b>26 Organizations described on lines 10 or 11:</b>	a Enter 2% of amount in column (e), line 24				<b>26a</b> 100,003.
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					<b>26b</b> 1,042,467.
<b>c</b> Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> 5,000,172.
<b>d</b> Add: Amounts from column (e) for lines	<b>18</b> 9,575.	<b>19</b>	<b>20</b> 937,697.	<b>21</b> 1,042,467.	<b>26d</b> 1,989,739.
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> 3,010,433.
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 60.21 %

**27 Organizations described on line 12:** N/A

**a** For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year:  
 (2004) \_\_\_\_\_ (2003) \_\_\_\_\_ (2002) \_\_\_\_\_ (2001) \_\_\_\_\_

**b** For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:  
 (2004) \_\_\_\_\_ (2003) \_\_\_\_\_ (2002) \_\_\_\_\_ (2001) \_\_\_\_\_

<b>c</b> Add: Amounts from column (e) for lines.	<b>15</b> _____	<b>16</b> _____	<b>17</b> _____	<b>20</b> _____	<b>21</b> _____	<b>27c</b> _____
<b>d</b> Add: Line 27a total _____ and line 27b total _____						<b>27d</b> _____
<b>e</b> Public support (line 27c total minus line 27d total)						<b>27e</b> _____
<b>f</b> Total support for section 509(a)(2) test: Enter amount from line 23, column (e)						<b>27f</b> _____
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))						<b>27g</b> _____ %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))						<b>27h</b> _____ %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See instructions.)  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A  
 Yes No

<p><b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</p>	<p>29</p>		
<p><b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?</p>	<p>30</p>		
<p><b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?                  If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement.)</p> <p>-----</p> <p>-----</p> <p>-----</p>	<p>31</p>		
<p><b>32</b> Does the organization maintain the following:</p>			
<p><b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?</p>	<p>32 a</p>		
<p><b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</p>	<p>32 b</p>		
<p><b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</p>	<p>32 c</p>		
<p><b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?</p>	<p>32 d</p>		
<p>If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement )</p> <p>-----</p> <p>-----</p>			
<p><b>33</b> Does the organization discriminate by race in any way with respect to:</p>			
<p><b>a</b> Students' rights or privileges?</p>	<p>33 a</p>		
<p><b>b</b> Admissions policies?</p>	<p>33 b</p>		
<p><b>c</b> Employment of faculty or administrative staff?</p>	<p>33 c</p>		
<p><b>d</b> Scholarships or other financial assistance?</p>	<p>33 d</p>		
<p><b>e</b> Educational policies?</p>	<p>33 e</p>		
<p><b>f</b> Use of facilities?</p>	<p>33 f</p>		
<p><b>g</b> Athletic programs?</p>	<p>33 g</p>		
<p><b>h</b> Other extracurricular activities?</p>	<p>33 h</p>		
<p>If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement )</p> <p>-----</p> <p>-----</p>			
<p><b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency?</p>	<p>34 a</p>		
<p><b>b</b> Has the organization's right to such aid ever been revoked or suspended?</p>	<p>34 b</p>		
<p>If you answered 'Yes' to either 34a or b, please explain using an attached statement</p>			
<p><b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.</p>	<p>35</p>		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See instructions )  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked 'a' and 'limited control' provisions apply.

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term 'expenditures' means amounts paid or incurred )			
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37).	<b>38</b>		
<b>39</b> Other exempt purpose expenditures	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>		
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table --			
<b>If the amount on line 40 is --</b>	<b>The lobbying nontaxable amount is --</b>		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	<b>41</b>	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>		
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>		
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>		
<b>Caution:</b> If there is an amount on either line 43 or line 44, you must file Form 4720			

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots non-taxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See instructions )

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.

Yes	No	Amount

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h.)

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities



Tulsa Opera, Inc.

73-0643311

**Statement 1**  
**Form 990, Part I, Line 8**  
**Net Gain (Loss) from Noninventory Sales**

Publicly Traded Securities

Gross Sales Price: 97,200.  
 Cost or Other Basis: 96,639.

Total Gain (Loss) Publicly Traded Securities \$ 561.

Total Net Gain (Loss) From Noninventory Sales \$ 561.

**Statement 2**  
**Form 990, Part I, Line 9**  
**Net Income (Loss) from Special Events**

<u>Special Events</u>	<u>Gross Receipts</u>	<u>Less Contributions</u>	<u>Gross Revenue</u>	<u>Less Direct Expenses</u>	<u>Net Income (Loss)</u>
OPERA BALL	282,450.	0.	282,450.	143,815.	138,635.
ANTIQUÉ SHOW	127,288.	0.	127,288.	73,645.	53,643.
OTHER	92,786.	0.	92,786.	36,417.	56,369.
SYMPHONY SET	18,325.	0.	18,325.	6,256.	12,069.
Total	\$ <u>520,849.</u>	\$ <u>0.</u>	\$ <u>520,849.</u>	\$ <u>260,133.</u>	\$ <u>260,716.</u>

**Statement 3**  
**Form 990, Part I, Line 10**  
**Gross Profit (Loss) From Sales Of Inventory**

MERCHANDISE INCOME	\$ 665.
Gross Sales	\$ <u>665.</u>
Less Returns & Allowances	<u>0.</u>
Net Sales	\$ <u>665.</u>
Less Cost Of Goods Sold	<u>982.</u>
Gross Profit From Sales Of Inventory	\$ <u>-317.</u>

**Statement 4**  
**Form 990, Part II, Line 43**  
**Other Expenses**

	<u>(A)</u> <u>Total</u>	<u>(B)</u> <u>Program Services</u>	<u>(C)</u> <u>Management &amp; General</u>	<u>(D)</u> <u>Fundraising</u>
ADMINISTRATIVE EXPENSES	190,435.		190,435.	
ARTIST EXPENSE	465,400.	465,400.		
COSTUMES, SCENERY, & OTHER	250,942.	250,942.		
FUND DEVELOPMENT	26,321.			26,321.
MARKETING EXPENSES	406,727.			406,727.
ORCHESTRA EXPENSE	199,240.	199,240.		
PERSONNEL EXPENSES	786,851.	224,311.	268,801.	293,739.

Tulsa Opera, Inc.

73-0643311

**Statement 4 (continued)**  
**Form 990, Part II, Line 43**  
**Other Expenses**

	(A)	(B)	(C)	(D)
	Total	Program Services	Management & General	Fundraising
PLANT EXPENSES	51,008.	24,399.	26,609.	
TECH, STAGE MGMT & BKSTG PERS	288,068.	288,068.		
Total	<u>\$ 2,664,992.</u>	<u>\$ 1,452,360.</u>	<u>\$ 485,845.</u>	<u>\$ 726,787.</u>

**Statement 5**  
**Form 990, Part III**  
**Organization's Primary Exempt Purpose**

TULSA OPERA, INC. OPERATES IN THE STATE OF OKLAHOMA FOR THE PRIMARY PURPOSE OF FURTHERING THE APPRECIATION OF MUSIC, PARTICULARLY OPERA, FOR THE GENERAL PUBLIC. TULSA OPERA, INC. PERFORMS SELECT OPERA THROUGHOUT THE YEAR FOR THE PUBLIC. IN ADDITION TO THESE PRODUCTIONS, TULSA OPERA CONDUCTS VARIOUS EDUCATIONAL PROGRAMS.

**Statement 6**  
**Form 990, Part IV, Line 57**  
**Land, Buildings, and Equipment**

Category	Basis	Accum. Deprec.	Book Value
Furniture and Fixtures	\$ 259,725.	\$ 204,202.	\$ 55,523.
Buildings	279,052.	173,149.	105,903.
Improvements	46,667.	39,802.	6,865.
Land	106,837.		106,837.
Total	<u>\$ 692,281.</u>	<u>\$ 417,153.</u>	<u>\$ 275,128.</u>

**Statement 7**  
**Form 990, Part IV, Line 65**  
**Other Liabilities**

LINE OF CREDIT	\$ 335,000.
Total	<u>\$ 335,000.</u>

**Statement 8**  
**Form 990, Part IV-A, Line b(4)**  
**Other Amounts**

CHANGE IN TEMPORARILY RESTRICTED ASSETS	\$ -69,890.
COST OF GOODS SOLD	982.
FUNDRAISING EXPENSES	260,133.
Total	<u>\$ 191,225.</u>

Tulsa Opera, Inc.

73-0643311

**Statement 9**  
**Form 990, Part IV-B, Line b(4)**  
**Other Amounts**

COST OF GOODS SOLD	\$	-982.
FUNDRAISING EXPENSES		-260,133.
<b>Total</b>	<b>\$</b>	<b><u>-261,115.</u></b>

**Statement 10**  
**Form 990, Part VI, Line 80b**  
**Related Organizations**

<u>Name of Organization</u>	<u>Exempt</u>	<u>Nonexempt</u>
TULSA OPERA ENDWMNT TRST 1 ID-73-1214668	X	
TULSA OPERA ENDWMNT TRST 2 ID-73-6212218	X	

**Statement 11**  
**Schedule A, Part I**  
**Compensation of Five Highest Paid Employees**

<u>Name and Address</u>	<u>Title &amp; Average Hours Worked</u>	<u>Compen- sation</u>	<u>Contributio EBP &amp; DC</u>	<u>Expense Account</u>
CARRIE F VESELY 2841 EAST 21ST PLACE TULSA, OK 74114	DIR. OF DEVEL. 40	57,608.	7,168.	0.
NOAH SPIEGEL 1567 SOUTHWEST BOULEVARD #2FF TULSA, OK 74107	DIR. OF PROD. 40	61,025.	2,773.	0.
T. LEE DUNNING 211 EAST 24TH PLACE TULSA, OK 74114	DIR. OF FINANCE 40	55,446.	3,381.	0.
<b>Total</b>		<b><u>\$ 174,079.</u></b>	<b><u>\$ 13,322.</u></b>	<b><u>\$ 0.</u></b>

**Statement 12**  
**Schedule A, Part III, Line 2**  
**Transactions with Trustees, Directors, Etc.**

2c Many members of the Tulsa Opera board are contributors to the organization and volunteer their services to assist the organization.

2d The organization compensates its employees. To the extent that any board member is a member of the Tulsa Opera Chorus, he or she receives the same nominal compensation as other chorus members for performances in the operas.

Tulsa Opera, Inc.

73-0643311

Statement 13  
Schedule A, Part IV-A, Line 22  
Other Income

<u>Description</u>	<u>(a) 2004</u>	<u>(b) 2003</u>	<u>(c) 2002</u>	<u>(d) 2001</u>	<u>(e) Total</u>
OTHER INCOME	\$ 216,997.	\$ 196,783.	\$ 249,547.	\$ 274,370.	\$ 937,697.
Total	<u>\$ 216,997.</u>	<u>\$ 196,783.</u>	<u>\$ 249,547.</u>	<u>\$ 274,370.</u>	<u>\$ 937,697.</u>

## FORM 990, PART V - A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

						TITLE	COMPENSATION	CONTRIBUTIONS TO BENEFIT PLANS	EXPENSE ACCOUNT
Ms	Caroline	Abbott	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Carole	Ashcraft	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Mary	Athens	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Kristen	Bender	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Rolf	Blom	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	David	Bownam	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Casey	Cooper	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Gina	Covington	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Dr	Carol	Crawford	1610 S Boulder Ave	Tulsa	OK 74119	General Director	\$136,578 00	\$13,789 48	\$0 00
Mr	John	Doak	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Scott	Filstrup	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	John	Fischer	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Frank	Fore	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Vaughn	Fuller	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Elizabeth	Geer	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	LouAnn	Gibson	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Dr	Andrew	Gottelher	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Stephen	Greubel	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Mary	Haddican	1611 S Boulder Ave	Tulsa	OK 74120	Director	\$0 00	\$0 00	\$0 00
Mrs	Alvina	Hart	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Peggy	Helmerch	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Frank	Henke	1611 S Boulder Ave	Tulsa	OK 74120	Director	\$0 00	\$0 00	\$0 00
Dr	Soohyn	Jin	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Marci	Johnson	1611 S Boulder Ave	Tulsa	OK 74120	Director	\$0 00	\$0 00	\$0 00
Mr	Arno	Kahn	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	John	Keveney	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Beth	Khoundara	1611 S Boulder Ave	Tulsa	OK 74120	Director	\$0 00	\$0 00	\$0 00
Mrs	Margaret	Kobos	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Dr	Frank	Letcher	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Corrine	Lewis	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Mike	Lodes	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Mano	Nargi	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Valene	Randolph	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Lucy	Rooney	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Katherine	Saunders	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mrs	Mary	Shaw	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Sandy	Stava	1611 S Boulder Ave	Tulsa	OK 74120	Director	\$0 00	\$0 00	\$0 00
Mr	Bruce	Stoesser	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	David	Sylvan	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Tom	Warburton	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Kathleen	Westby	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Ms	Randi	Wightman	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00
Mr	Henry	Will	1610 S Boulder Ave	Tulsa	OK 74119	Director	\$0 00	\$0 00	\$0 00