## Form **990**

**Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) OMB No. 1545-0047

, 20

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

, 2022, and ending

В	Check	if applicable:	С				D En	ıployer i	dentificat	tion number	
	Α	ddress change	Tulsa Lawyers fo	r Children, Inc.	•		7	3-15	9327	5	
	N	ame change	Post Office Box				<b>E</b> Te	lephone	number		
	Ir	nitial return	Tulsa, OK 74101-	2254			9	18-4	25-5	858	
	Fi	nal return/terminated									
	Α	mended return					<b>G</b> Gr	oss recei	pts \$	377,	599.
	Α	pplication pending	F Name and address of principa	officer: Yvette Hart	:		(a) Is this a group				X No
			Same As C Above			Н	(b) Are all subording If "No," attach	nates inc	luded?	ions Yes	No
I	Tax	-exempt status:	X 501(c)(3) 501(c) (	) (insert no.)	4947(a)(1) or	527	rio, attaori	u 1101. 00	0 11 10 11 11 11		
J	We	bsite: ww	w.tulsalawyersfo	rchildren.org		н	(c) Group exemption	on numb	er		
K	Forr	n of organization:	X Corporation Trust	Association Other	L Year	of formation	1: 2000	M State	of legal	domicile: OK	
Pa	rt I	Summar									
	1		be the organization's miss								
ġ			is to recruit, t								d
anc			<u>rneys) represent</u>	<u>ing children in</u>	<u>all stage</u>	s of c	<u>child abu</u>	se_aı	n <u>d</u> ne	eglect	
Governance		cases.						<del></del>	<u>_</u>		
્ઠ્ર	2	Check this bo	ox	n discontinued its operations						S.	1.0
જ	4		idependent voting members						3 4		18 18
<u>es</u>	5		of individuals employed in						5		4
Activities &	6		r of volunteers (estimate if						5		60
Act			ed business revenue from						7a		0.
	b	Net unrelated	d business taxable income	from Form 990-T, Part I,	line 11				7b		0.
							Prior Y	ear		Current Ye	ar
Φ	8		and grants (Part VIII, line				420	982	2.		497.
eun	9		vice revenue (Part VIII, line								295.
Revenue	10		ncome (Part VIII, column (/					2,573	3.		193.
ш	11		le (Part VIII, column (A), li				400		-		951.
	12		e – add lines 8 through 11 imilar amounts paid (Part				423	3,555	).	370,	648.
	13 14		I to or for members (Part 1)								
			er compensation, employe				221	1 240	,	2.0	0.5.0
es	15							L,240			859.
šuš	16a		fundraising fees (Part IX,			_	L,696	٠.	1,	500.	
Expenses	b	Total fundrais	sing expenses (Part IX, co	umn (D), line 25)	6,	,065 <u>.</u>					
ш	17		ses (Part IX, column (A), li	•				3,778		114,	618.
	18		es. Add lines 13-17 (must				341	L,714	1.	<u> </u>	977.
	19		s expenses. Subtract line 1				81	L,841	L. •		329.
3 or			(Part X, line 16)				Beginning of Cu			End of Yea	-
sset 3alar	20							3,414			453.
Net Asse Fund Bal	21		es (Part X, line 26)					5,453		•	821.
			r fund balances. Subtract li	ne 21 from line 20			341	L <b>,</b> 961	- •	335,	632.
	rt II	Signatur									
Unde	er pena olete. D	Ities of perjury, I de Declaration of preparation	eclare that I have examined this retu arer (other than officer) is based on	urn, including accompanying schell all information of which preparer	dules and statemen has any knowledge.	its, and to the	e best of my knowle	edge and	l belief, it	is true, correct,	and
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c:		Signature of	officer				Date				—
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110			L Baker t name and title			11	easurer				—
		, · ·	oreparer's name	Preparer's signature	D	ate	Check	it	PTIN	1	
D-	: A	3,74	·	Self-Prepared			self-em				
Pa	ıa epar	er Firm's name	e	Tooti iichared			3011-011	.p.030u			
	e Or		-				Firm's	EIN I			
		I min s addit					Phone				
May	/ the	IRS discuss th	nis return with the preparer	shown above? See instr	uctions		1 Hone			Yes	No
									•		

) (Revenue \$

including grants of

290,167.

(Expenses

4e Total program service expenses

			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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		Х
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	Χ	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Χ	
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a	Χ	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		Х
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		Х
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		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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

# Form 990 (2022) Tulsa Lawyers for Children, Inc. Part IV Checklist of Required Schedules (continued)

			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? <i>If "Yes," complete Schedule J.</i>	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 a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		X
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? <i>If "Yes," complete Schedule L, Part l</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? <i>If "Yes," complete Schedule L, Part II</i>	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
	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		X
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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Χ
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? <i>If "Yes," complete Schedule N, Part II</i>	32		Χ
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? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
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
35a	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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Χ
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? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	X	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	NO
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1.		
ВΛΛ	(garnbling) winnings to prize winners?	1c	990 (	(0000

Form 990 (2022) Tulsa Lawyers for Children, Inc.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			res	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 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
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		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		^
•	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	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.).			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	-10		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
	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		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14a 14b		- 47
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
13	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	If "Yes," complete Form 4720, Schedule O.			
	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
AA	TEEA0105L 09/01/22	Form	990 (	2022)

Form 990 (2022) Tulsa Lawyers for Children, Inc. 73-1593275 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year. . . . . 18 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent.... 18 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? See Schedule 0 Χ 2 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8b 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 **Section 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?..... Χ 10a 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?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule 0 Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official...... 15a **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records.

Suite 130 Tulsa OK 74128 918-425-5858

The Organization 10159 East 11th Street,

Form 990 (	2022)	Tulsa	Lawvers	for	Children,	Inc.

73-1593275

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## 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 Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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, box 6 of 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.

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

			(C)							
(A) Name and title	(B) Average hours	thar	n one Ì s both dire	box, an o	unles fficer truste		on	(D)  Reportable compensation from	(E)  Reportable  compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Timothy Michaels-Johnson Executive Director	$-\frac{40}{0}$				Х			86,650.	0.	2,550.
(2) Margo Shipley	1				Λ			00,050.		2,330.
Secretary	0	Х		Χ				0.	0.	0.
(3) Stephanie Barberousse Director	_0.5_ 0	Х						0.	0.	0.
(4) R. Daniel Carter Director	_0.5_ 0	Х						0.	0.	0.
(5) Turaj Pilehvar Director	0.5	Х						0.	0.	0.
(6) Amber Cornelius Director	0.5	Х						0.	0.	0.
(7) James Fisher Director	0.5	Х						0.	0.	0.
(8) Becki Murphy Director	0.5	Х						0.	0.	0.
(9) Yvette Hart President	1	Х		Х				0.	0.	0.
(10) Madison Perigo Director	0.5	Х						0.	0.	0.
(11) Rhiannon Thoreson Vice President	1	Х		Х				0.	0.	0.
(12) John H. Rule Director	0.5	Х						0.	0.	0.
(13) Marquess Dennis Director	0.5	Х						0.	0.	0.
(14) Thomas Kirby Director	0.5	X						0.	0.	0.
DAA		- 11						0.	0.	Farma 000 (2022)

Part VII Section A. Officers, Directors, 110	1	ney	Em	•		es,	and	a Hignest Com	ipensated Empi	oyees	(conti	nued)
	(B)	Position (do not check more than one										
(A)	Average hours	(do	not c	check	more	than	one h an	(D) Reportable	(E)		(F)	
Name and title	per week		cer ar	nd a d		or/trus	tee)	compensation from	Reportable compensation from	Estim	ated amon	ount
	(list any hours	or d	Isn	Officer	Key	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	the o	nsation rganizat	ion
	for related	or director	oitu	cer	emp	Highest co employee	ner	MIGO/1033 NEG/	IIII00/1033 NEO)		d related anization	
	organiza - tions	Ď, ∰	nal t		employee	e						
	below dotted	individual trustee or director	Institutional trustee		ŏ	ens						
	line)	"	ਲ			ated						
(15) Rachel Thompson	0.5											
Director	0	X						0.	0.			0.
(16) April Ryan	0.5											
Director	0	X						0.	0.			0.
(17) Timothy Carney	0.5											
Director	0	Х						0.	0.			0.
(18) Wendy Williams	0.5											
Director	0	X						0.	0.			0.
(19) Rachel Baker	11_											
Treasurer	0	X		Χ				0.	0.			0.
(20)	<del> </del>											
(21)												
(21)												
(22)												
	1	•										
(23)												
(24)												
(25)												
1h Cuhanal	ļ							06.650			2 [	
1b Subtotal								86,650.	0.		۷,5	550.
d Total (add lines 1b and 1c)								86,650.	0.		2 [	<u>0.</u> 550.
Total number of individuals (including but not limited)										ensatio		<i>.</i>
from the organization 0				-,				,				
											Yes	No
3 Did the organization list any <b>former</b> officer, direc	tor, truste	e, ke	ey ei	mple	oyee	e, or	high	nest compensated	employee			
on line 1a? If "Yes,"complete Schedule J for suc	h individu	ıaİ	· · · ·							. 3		X
4 For any individual listed on line 1a, is the sum of	f reportab	le co	mpe	ensa	ation	and	otḥ	er compensation	from			
the organization and related organizations greate such individual										. 4		Х
5 Did any person listed on line 1a receive or accru	e comper	satio	n fr	om	anv	unre	late	ed organization or	individual			
for services rendered to the organization? If "Yes	s," comple	ete S	che	dule	J f	or su	ch p	person		. 5		Χ
Section B. Independent Contractors	امما امما		ام مام	٠			م ما ا	t received week	¢100 000 of			
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated indisation for	epen the c	alen	dar j	year	endi	เกล ng v	with or within the or	ganization's tax year			
								(	C)			
(A) Name and business address  Description of services  Com								Compè	nsatio	'n		
2 Total number of independent contractors (including t	out not lim	ited t	n tha	ا عور	listor	l aho	۷e۱	who received more	than			
\$100,000 of compensation from the organization		nou l	o aic	JJC 1	13150	. ubu	v <i>U)</i>	milo received more	trial i			
. ,	U											

		Check if Schedule O contains a	a response or note to an	y line in this Part VI	11		
				(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	1a b c d e f	Federated campaigns	1a         1b         1c       3,496.         1d         1e       57,029.         1f       299,972.         1g				
	h	Total. Add lines 1a-1f		360,497.			
Program Service Revenue	2a b	TRAINING INCOME	Business Code 541100	23,295.	23,295.		
Service	c d						
ram	e f	All other program service revenue					
rog	q	<b>-</b>		23,295.			
	3	Investment income (including divide other similar amounts)	nds, interest, and	-6,193.			-6,193.
	5	Royalties					
	b	Gross rents         6a           Less: rental expenses         6b           Rental income or (loss)         6c					
	d	Net rental income or (loss)					
		Gross amount from sales of assets other than inventory Less: cost or other basis	ities (ii) Other				
	С	and sales expenses 7b  Gain or (loss)					
Other Revenue		Gross income from fundraising events (not including \$ 3,496 of contributions reported on line 1c).					
r R		See Part IV, line 18	8a				
the		Less: direct expenses  Net income or (loss) from fundrai	8b 6,951.	C 0F1			
0		Gross income from gaming activities. See Part IV, line 19	9a	-6,951.			
		Less: direct expenses	9b				
	С	Net income or (loss) from gaming	activities				
		Gross sales of inventory, less returns and allowances	1 0a 1 0b				
		Net income or (loss) from sales of	f inventory				
zí.			Business Code				
e ed	11a b c d						
lan en	b						
scellaneous Revenue	c d	All other revenue					
MΣ		<b>Total.</b> Add lines 11a-11d					
-		Total revenue. See instructions		370.648.	23, 295.	0.	-6.193.

Form 990 (2022) Tulsa Lawyers for Children, Inc. 73
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re	sponse or note to any			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	89,200.	70,911.	17,142.	1,147.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	149,554.	118,890.	28,741.	1,923.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,260.	3,386.	819.	55.
9	Other employee benefits				
10	Payroll taxes	17,845.	14,187.	3,429.	229.
11	Fees for services (nonemployees):				
	Management				
b	Legal				
С	Accounting	3,600.		3,600.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	1,500.			1,500.
	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	4,966.	2,729.	2,237.	
13	Office expenses	12,916.	5,893.	7,023.	
14	Information technology	5,758.	3,496.	1,714.	548.
15	Royalties.	3,730.	3, 430.	1, 111.	340.
16	Occupancy	22,758.	19,458.	3,107.	193.
17	Travel	13,234.	13,234.	3,107.	133.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	13,234.	13,231.		
19 20	Conferences, conventions, and meetings				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	37,995.	28,113.	9,461.	421.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).	31,993.	20,113.	9,401.	421.
а	TELEPHONE & INTERNET	5,313.	4,501.	763.	49.
b	TRAINING	2,760.	2,760.		
С	DUES AND SUBSCRIPTIONS	1,873.	1,873.		
d		1,785.		1,785.	
6	All other expenses	1,660.	736.	924.	
25	Total functional expenses. Add lines 1 through 24e	376,977.	290,167.	80,745.	6,065.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response or note to any line in this Part X	<u></u>	<u></u>	
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing.	273,102.	1	259,014.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net.	28,047.	3	41,146.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
ī	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges		9	5,390.
As	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation		10c	
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	42,523.	15	181,903.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	348,414.	16	487,453.
	17	Accounts payable and accrued expenses		17	6,073.
	18	Grants payable		18	·
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other 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		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule	D.	25	145,748.
	26	Total liabilities. Add lines 17 through 25	6,453.	26	151,821.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
lar	27	Net assets without donor restrictions	288,961.	27	285,632.
Ba	28	Net assets with donor restrictions	53,000.	28	50,000.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.	,		,
ō	29	Capital stock or trust principal, or current funds		29	
इं	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
t A	32	Total net assets or fund balances		32	335,632.
₽	33	Total liabilities and net assets/fund balances	,	33	487,453.
	_		,		

Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	70,6	548.
2	Total expenses (must equal Part IX, column (A), line 25).	2	3	76,9	977.
3	Revenue less expenses. Subtract line 2 from line 1	3		-6,3	329.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	41,9	961.
5	Net unrealized gains (losses) on investments.	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10			
Da	column (B))	10		35,6	32.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. Ll</u>
				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 O.				
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 review separate basis, consolidated basis, or both:  Separate basis  Both consolidated and separate basis	ed on a			
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis	ate			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	, 	. 2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R Part 200, Subpart F?	Uniform	. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u> </u>	. 3b		
BAA	TEEA0112L 09/01/22		Forn	9 <b>90</b>	(2022)

#### **SCHEDULE A** (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.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

2022

Open to Public Inspection

		e organization	_						auon numb	er
		Lawyers for Childr						59327		
		Reason for Public Cha						instruc	ctions.	
The c	rga	inization is not a private found	lation because it is: (	For lines 1 through 12,	check o	nly one	box.)			
1		A church, convention of church	es, or association of cl	hurches described in <b>sec</b> t	tion 1 <b>70</b> (	b)(1)(A)(	i).			
2		A school described in section	n <b>170(b)(1)(A)(ii).</b> (Att	ach Schedule E (Form	990).)					
3		A hospital or a cooperative h	ospital service organ	ization described in sec	ction 170	0(b)(1)(A	A)(iii).			
4		A medical research organiza	tion operated in conju	unction with a hospital of	describe	d in <b>sec</b>	tion 170(b)(1)	(A)(iii). E	nter the	hospital's
	<u> </u>	name, city, and state:	,	,			( // /			•
5		An organization operated for section 170(b)(1)(A)(iv). (Co		ege or university owned	or oper	ated by	a government	al unit de	escribed	- – – – – - in
6		A federal, state, or local gove		ental unit described in <b>s</b>	ection 1	<b>70(b)(</b> 1)	)(A)(v).			
7	X	An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	it or from the ge	eneral pu	olic descr	ibed
8		A community trust described		<b>A)(vi).</b> (Complete Part I	L)					
9	H	An agricultural research organia			•	oniunctio	on with a land-o	rant colle	ana	
9		or university or a non-land-gran								
		university								
10		An organization that normally from activities related to its investment income and unrel June 30, 1975. See section 5	exempt functions, sub lated business taxabl	oject to certain exception e income (less section	ns; and	(2) no r	more than 33-1	1/3% of i	ts suppo	t from gross
11		An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).			
12		An organization organized ar or more publicly supported o	rganizations describe	ed in <b>section 509(a)(1)</b> c	r <b>sectio</b>	n 509(a	)( <b>2).</b> See <b>sect</b> i	on 50̈9(a	ut the pu <b>)(3).</b> Che	rposes of one ck the box on
_		lines 12a through 12d that de	escribes the type of s	upporting organization	and con	nplete lir	nes 12e, 12f, a	and 12g.		
а		Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	gularly appoint or elect	d, or controlled by its sup t a majority of the directo	ported o	rganizat stees of t	ion(s), typically the supporting o	by giving organizati	i the suppon. <b>You n</b>	iust
b		Type II. A supporting organiz management of the supporting must complete Part IV. Secti	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization the supported	n(s), by organizat	having c ion(s). <b>Yo</b>	ontrol or <b>u</b>
С		Type III functionally integrated. organization(s) (see instruction		tion operated in connectio	n with, a	nd functio	onally integrated	d with, its	supported	I
d		Type III non-functionally integrated. The control of the control o	rated. A supporting ord	anization operated in cor	nection	with its s	supported organ	nization(s	) that is n	ot
_		instructions). You must com	plete Part IV, Section	s A and D, and Part V.	·				·	•
e	L	Check this box if the organization integrated, or Type III non-fu	nctionally integrated	supporting organization	١.			-	e III tund T	tionally
f a		nter the number of supported of covide the following information	-						· · · · · · L	
		ame of supported organization	(ii) EIN				(v) Amount of	monetany	6.63	Amount of other
,	I) INC	anie oi supporteu organization	(11) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed overning ment?	support (see ins			(see instructions)
					Yes	No				
(A)										
<u>(B)</u>										
(C)										
(D)										
<u>(E)</u>										
T										

### 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	tion A. Public Support						
begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	352,476.	413,917.	366,258.	420,982.	360,497.	1,914,130.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 3  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	352,476.	413,917.	366,258.	420,982.	360,497.	1,914,130.
6	shown on line 11, column (f) <b>Public support.</b> Subtract line 5 from line 4						449,882. 1,464,248.
Sec	tion B. Total Support						1,404,240.
	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	(f) Total
7	Amounts from line 4	352,476.	413,917.	366,258.	420,982.	360,497.	1,914,130.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,167.	4,407.	4,753.	2,573.	175.	16,075.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	,	,		0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
	Total support. Add lines 7 through 10						1,930,205.
	Gross receipts from related activ	,	ŕ			!	0.
	First 5 years. If the Form 990 is organization, check this box and			third, fourth, or fi	fth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pul Public support percentage for 20	olic Support P	ercentage	20 11 column (f)		14	75.06%
	Public support percentage from 2						75.86 % 77.36 %
16a	<b>33-1/3% support test—2022.</b> If the and <b>stop here.</b> The organization	ne organization di qualifies as a pub	d not check the bo	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	this box
b	<b>33-1/3% support test—2021.</b> If th and <b>stop here.</b> The organization						heck this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts-	meets the facts-ar	nd-circumstances	test, check this b	oox and stop here	. Explain in Part '	VI how
b	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-ar	nd-circumstances	test, check this h	oox and stop here	. Explain in Part	VI how the
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions

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	tion A. Public Support	,					
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> 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.)						
Sec	tion B. Total Support						T-
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	(f) Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	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.).						
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)					501()	
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or f	fifth tax year as a	section 501(c)	(3)
	tion C. Computation of Pul			10		- I -	- 1 ^
	Public support percentage for 20	•			•		
	Public support percentage from 2					1	6 %
	tion D. Computation of Inv				(0)	1 -	<b>,</b>   0
	Investment income percentage for	•	• • •	-			
	Investment income percentage for						
19a	<b>33-1/3% support tests—2022.</b> If t is not more than 33-1/3%, check	the organization of this box and <b>sto</b>	ald not check the t <b>p here.</b> The organ	ization qualifies	nd line 15 is more as a publicly supp	e tnan 33-1/3%, oorted organiza	ion
b	<b>33-1/3% support tests—2021.</b> If t line 18 is not more than 33-1/3%		lid not check a bo		ne 19a, and line 1	6 is more than	

### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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**

			Yes	NI.
			res	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
_	500			
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	За		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
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>4</b> a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	<b>4</b> c		
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 <b>Part VI</b> , 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).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If "Yes," provide detail in Part VI.</i>	6		
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).	7		
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).	8		
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 <b>Part VI.</b>	9a		
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? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	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 <b>Part VI</b> .	9с		
l0a	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.	10a		
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.)	10b		

BAA TEEA0404L 09/09/22 Schedule A (Form 990) 2022

Га	10   Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
ā	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		
ŀ	a A family member of a person described on line 11a above?	11b		
	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 <b>Part VI.</b>	11c		
	ction B. Type I Supporting Organizations			
	non Di Typo i Capporang Cigamizationo		Yes	No
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? If "No," describe in <b>Part VI</b> how the supported			
	organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees			
	were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers	4		
	during the tax year.	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 <b>Part VI</b> how providing such			
	benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the			
	supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction 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		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	•		
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 <b>Part VI</b> 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			
Ū	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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a ☐ The organization satisfied the Activities Test. <i>Complete line 2 below</i> .			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
•	c The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	instru	uctions	s).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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.	2a		
1	<b>b</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.	2b		
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.	3a		
1	<b>b</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.	3b		

Page 6

Pa	rt V   Type III Non-Functionally integrated 503(a)(5) Supporting Orga	aiiizati	IUIIS	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on No ns mus	v. 20, 1970 (explain in technology) t complete Sections A	n Part VI). <b>See</b> Lthrough E.
Sec	tion 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		
Sec	tion 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):			
ä	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
-	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	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		
Sec	tion 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	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	egrated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2022

**Current Year** 

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Part V	Type III Non-Function	ally Integ	grated 509	(a)(3)	Supporting	Organizations (	(continue	d)	
Section	D - Distributions								Ī
1	1 211 1 1		and a second Barbara	4				1	Т

1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	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 organization is responsive (provide details in Part VI). See instructions	R	

	in <b>Part VI</b> ). See instructions.	8	L
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017			
<b>b</b> From 2018			
<b>c</b> From 2019			
<b>d</b> From 2020			
<b>e</b> From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
<b>b</b> Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			
BAA		Sched	ule A (Form 990) 2022

BAA Schedule A (Form 990) 2022

73-1593275

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section 4, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

Tulsa Lawyers for Children, Inc. 73-1593275 Organization type (check one): Filers of: Section: X 501(c)( 3 ) Form 990 or 990-EZ (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. 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

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

1

Employer identification number

Tulsa Lawyers for Children, Inc.

73-1593275

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

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	GEORGE KAISER FAMILY FOUNDATION  7030 South Yale Avenue, #600  Tulsa, OK 74136	\$55,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	MERVIN BOVAIRD FOUNDATION  401 SOUTH BOSTON AVENUE  TULSA, OK 74103	\$ 10,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	COMMONWEALTH FOUNDATION  2431 EAST 61ST STREET, STE 600  TULSA, OK 74136	\$ <u>10,000</u> .	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	CHARLES & LYNN SCHUSTERMAN FDTN  110 WEST 7TH STREET, STE 2000  TULSA, OK 74119	\$ 25,318.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>5</u>	JESS L. & MIRIAM B. STEVENS FNDN  4000 ONE WILLIAMS CENTER  TULSA, OK 74172	\$ 20,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>6</u>	OKLAHOMA BAR FOUNDATION	\$ 50,000.	Person X Payroll

Tulsa Lawyers for Children, Inc.

73-1593275

	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional s	pace ie riecaca.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SARKEYS FOUNDATION		Person
		\$20,000.	Payroll Noncash
	NORMAN, OK 73071		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	SHARNA & IRVIN FRANK FOUNDATION		Person X Payroll
	3125-B SOUTH YALE AVENUE	\$10,000.	Noncash
	TULSA, OK 74135		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	ANNE & HENRY ZARROW FOUNDATION		Person X
	401 South Boston, Suite 900	\$ <u>15,000.</u>	Payroll Noncash
	Tulsa, OK 74103		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>10</u> _	QUIKTRIP CORPORATION		Person X
	4705 South 129th East Avenue	\$26,000.	Payroll Noncash
	4/03 Souch 129th East Avenue		<u> </u>
	Tulsa, OK 74134		(Complete Part II for noncash contributions.)
(a) No.			
(a) No.	Tulsa, OK 74134	(c)	(d) Type of contribution  Person
(a) No.	Tulsa, OK 74134(b)	(c)	(d) Type of contribution
(a) No.	Tulsa, OK 74134(b)	(c) Total contributions	(d) Type of contribution  Person Payroll
(a) No. — — — (a) No.	Tulsa, OK 74134(b)	(c) Total contributions	(d) Type of contribution  Person Payroll Noncash  (Complete Part II for
	Tulsa, OK 74134  Name, address, and ZIP + 4  (b)	(c) Total contributions	roncash contributions.)  (d) Type of contribution  Person Payroll Noncash (Complete Part II for noncash contributions.)  (d) Type of contribution  Person
	Tulsa, OK 74134  Name, address, and ZIP + 4  (b)	(c) Total contributions	roncash contributions.)  (d) Type of contribution  Person Payroll Noncash (Complete Part II for noncash contributions.)  (d) Type of contribution
	Tulsa, OK 74134  Name, address, and ZIP + 4  (b)	(c) Total contributions  \$ (c) Total contributions	Complete Part II for noncash contribution   (d)   Type of contribution   (d)   Type of contributions.)   (d)   Type of contribution   Person   Payroll

Tulsa Lawyers for Children, Inc.

1 1 Employer identification number

73-1593275

Part II	Noncash Proper	tv (see instructions)	. Use duplicate cop	pies of Part II if addition	al space is needed.
---------	----------------	-----------------------	---------------------	-----------------------------	---------------------

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A 	\$	
(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
		\$	
DAA	TEE 007031 07/22/22		D (E 000) (0000)

Name of organization Employer identification number Tulsa Lawyers for Children, Inc. 73-1593275 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000** or less for the year. (Enter this information once. See instructions.)..... Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

Tul	lsa Lawyers for Children, Inc.	73-1593275
Pai		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor a are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds car for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpimpermissible private benefit?	n be used only ose conferring
Pai		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (for example, recreation or education)	a historically important land area
	Protection of natural habitat Preservation of	a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a last day of the tax year.	conservation easement on the
	last day of the tax year.	Held at the End of the Tax Year
á	a Total number of conservation easements.	2a
		2 b
		2 c
	Number of conservation easements included in (c) acquired after July 25, 2006 and not on a	
,	historic structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the org	anization during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling	of violations,
	and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conserva-	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expinclude, if applicable, the text of the footnote to the organization's financial statements that describe conservation easements.	ense statement and balance sheet, and bes the organization's accounting for
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or O Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	ther Similar Assets.
1 a	a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research in furt Part XIII the text of the footnote to its financial statements that describes these items.	ent and balance sheet works of art, herance of public service, provide in
ŀ	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance following amounts relating to these items:	of public service, provide the
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1.</li><li>(ii) Assets included in Form 990, Part X.</li></ul>	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gramounts required to be reported under FASB ASC 958 relating to these items:	
á	a Revenue included on Form 990, Part VIII, line 1	\$
l	a Assets included in Form 990, Part X	\$

Part III Organizations Maintaining Co	mections of Art, fils	orical freasures, c	or Other 3	IIIIIai ASS	215 (COI	ונווונ	ueu)
<b>3</b> Using the organization's acquisition, accession, a items (check all that apply):	and other records, check ar	y of the following that ma	ake significan	t use of its col	lection		
a Public exhibition	<b>d</b> Loan o	r exchange program					
<b>b</b> Scholarly research	e Other	0 1 0					
c Preservation for future generations	· 🗀	-					
Provide a description of the organization's collect Part XIII.	tions and explain how they	further the organization's	exempt purp	ose in			
5 During the year, did the organization solicit o to be sold to raise funds rather than to be ma	r receive donations of art intained as part of the or	, historical treasures, or ganization's collection?	r other simila	ır assets	Yes		No
Part IV Escrow and Custodial Arrang reported an amount on Form 990, Part	ements. Complete if the				, line 9,	or	<u>,                                      </u>
1 a Is the organization an agent, trustee, custodia	an or other intermediary f	or contributions or othe	er assets not	included	V		
on Form 990, Part X?					Yes		No
<b>b</b> if fes, explain the arrangement in Part Alli and	i complete the following tal	ne.		Λ :=			
Denimaina kalanaa				An	nount		
c Beginning balance							
<b>d</b> Additions during the year							
e Distributions during the year							
f Ending balance							
2a Did the organization include an amount on Fo				· —	Yes		No
<b>b</b> If "Yes," explain the arrangement in Part XIII	. Check here if the explar	nation has been provide	ed on Part XI	II			
Part V Endowment Funds. Complete if	the organization answered	"Yes" on Form 990, Par	t IV, line 10.				
(a) Curren	t year (b) Prior year	(c) Two years back	(d) Three	years back	(e) Four y	years I	back
1 a Beginning of year balance							
<b>b</b> Contributions							
- N. I.							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
<b>q</b> End of year balance							
2 Provide the estimated percentage of the curre	ent vear end balance (line	e 1g. column (a)) held a	as:				
<b>a</b> Board designated or quasi-endowment	%	, ig, co.a (a),					
<u> </u>	<u> </u>						
c Term endowment	,						
The percentages on lines 2a, 2b, and 2c should	agual 1000/						
The percentages on lines 2a, 2b, and 2c should	equal 100%.						
3 a Are there endowment funds not in the possession	n of the organization that a	e held and administered	for the			<del></del>	
organization by:					Ye	5	No
(i) Unrelated organizations					Ba(i)	_	
(ii) Related organizations					a(ii)		
<b>b</b> If "Yes" on line 3a(ii), are the related organiz	·				3b		
4 Describe in Part XIII the intended uses of the		nt funds.					
Part VI Land, Buildings, and Equipme							
Complete if the organization answered	"Yes" on Form 990, Part I	V, line 11a. See Form 99	90, Part X, lir	ie 10.			
Description of property	(a) Cost or other basis	(b) Cost or other	(c) Accum		(d) Book	( valı	ue
2 333p. 31. proporty	(investment)	basis (other)	deprecia	ation	(2) 2001	· • ait	
<b>1 a</b> Land							
<b>b</b> Buildings							
c Leasehold improvements							
<b>d</b> Equipment				<del>-  </del>			
e Other				<del></del>			
Total. Add lines 1a through 1e. (Column (d) must e		olumn (R) line 10c )					
Total Add lines to through te. (Column (d) must be	quair oilli 220, Fail A, C	סוטוווו (ש), וווופ וטנ <i>.).</i>					0.

BAA Schedule D (Form 990) 2022

Part VII	Investments — Other Securities. Complete if the organization answered "Yes" on	Form 990. Part IV. line	N/A e 11b. See Form 990. Part X. line 12.	-
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	year market value
	Il derivatives	, ,		<u>-                                      </u>
(2) Closely	held equity interests			
(3) Other				
(A)				
(A) (B) (C) (D)				
(C)				
(D)				
(E)				
<u>(F)</u>				
(G) (H)				
(l)				
	(b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII			N/A	
I dit Viii	Investments — Program Related. Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 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)				
(10)				
	(b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on	<u>ı Form 990, Part IV, line</u> scription	e 11d. See Form 990, Part X, line 15.	(b) Book value
(1) FIIND	S HELD BY THIRD PARTY	scription		36,155.
	ATING LEASE RIGHT OF USE			145,748.
(3)				,
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
Total. (Colu	ımn (b) must equal Form 990, Part X, column (ı	B) line 15.)		181,903.
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on		e 11e or 11f. See Form 990, Part X, line 2	
1. (1) Fodors	(a) Descrial income taxes	iption of liability		(b) Book value
	ENT OPERATING LEASE			28,306.
	ATING LEASE			117,442.
(4)				
(5)				
(6)				
(7)				
(8) (9)				
(10)				
(11)				
	(b) must equal Form 990, Part X, column (B) line 25.)			145,748.
	uncertain tax positions. In Part XIII, provide the text of the fo			
	nder FASB ASC 740. Check here if the text of the footnote has			e Part XIII 🛛

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	441,669.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
<b>b</b> Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	71,021.
3 Subtract line 2e from line 1	3	370,648.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	370,648.
		370,010:
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		·
·		·
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		·
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Retur	n.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	Retur	n.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	Retur	n.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  2 71,021.	Retur	n.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  2 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  2 Total expenses and use of facilities  2 Donated services and use of facilities  2 Donated services and use of facilities	Retur	n.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	Retur	n.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	Retur	447,998.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities 2a 71,021. b Prior year adjustments 2b 2c 2c 2c 2c 2d	Retur	71,021.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities 2a T1,021.  b Prior year adjustments 2b 2c	Retur	71,021.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	Retur	71,021.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities 2a T1,021.  b Prior year adjustments 2b 2c	Retur  1  2e 3	71,021.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part X - FASB ASC 740 Footnote

Part XIII Supplemental Information.

The Organization is exempt from Federal income tax under Internal Revenue Code

Section 501(c)(3). As such, the Organization is not required to pay Federal income

taxes. The Organization is required to file annual information tax returns.

Generally accepted accounting principles require tax effects from an uncertain tax

position to be recognized in the financial statements only if the position is more

likely than not to be sustained if the position were to be challenged by a taxing

authority. The assessment of the tax position is based solely on the technical

BAA Schedule D (Form 990) 2022

Part XIII Supplemental Information (continued)

### Part X - FASB ASC 740 Footnote (continued)

merits of the position, without regard to the likelihood that the tax position may be challenged. The Organization's primary tax positions relate to its status as a not-for-profit entity exempt from income taxes and classification of activities related to its exempt purpose. As of December 31, 2022, the Organization had no uncertain tax positions that qualify for either recognition or disclosure in the financial statements.

#### **SCHEDULE 0** (Form 990)

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number Tulsa Lawyers for Children, Inc. 73-1593275

#### Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

SEVERAL MEMBERS OF THE BOARD MAY HAVE BUSINESS RELATIONSHIPS OR ARE EMPLOYED WITH THE SAME COMPANY AS OTHER MEMBERS. NO PRIVATE BENEFIT RESULTS FROM THESE RELATIONSHIPS.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

A draft of the organization's Form 990 is provided to the entire board via e-mail for comment before filing.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Directors are asked to sign an annual declaration stating compliance with the organization's conflict of interest policy.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Upon request, certain documents available on the organization's website.