** PUBLIC DISCLOSURE COPY **

** 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) **

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.

** 2018 **

** Open to Public Inspection **

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** A ** For the 2018 calendar year, or tax year beginning and ending

---

** B ** Check if applicable:

- Address change
- Name change
- Initial return
- Final return (Terminated)
- Amended return
- Application pending

---

** C ** Name of organization

- SPECIAL OLYMPICS OKLAHOMA, INC.

---

** D ** Employer identification number

- 23-7174120

---

** E ** Telephone number

- 918.481.1234

---

** G ** Gross receipts

- 2,167,961

---

** H(a) ** Is this a group return

- No

---

** H(b) ** Are all subordinates included?

- No

---

** I ** Tax-exempt status:

- Yes

---

** J ** Website:

- WWW.SOOK.ORG

---

** K ** Form of organization:

- Corporation

---

** L ** Year of formation:

- 1969

---

** Part I ** Summary

---

** 1 ** Briefly describe the organization's mission or most significant activities:

- SPECIAL OLYMPICS OKLAHOMA PROVIDES YEAR-ROUND SPORTS TRAINING AND ATHLETIC COMPETITION IN A

---

** 2 ** Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

- No

---

** 3 ** Number of voting members of the governing body (Part VI, line 1a)

- 3

---

** 4 ** Number of independent voting members of the governing body (Part VI, line 1b)

- 4

---

** 5 ** Total number of individuals employed in calendar year 2018 (Part V, line 2a)

- 5

---

** 6 ** Total number of volunteers (estimate if necessary)

- 6

---

** 7a ** Total unrelated business revenue from Part VIII, column (C), line 12

- 0

---

** 7b ** Net unrelated business taxable income from Form 990-T, line 38

- 0

---

** Revenue **

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** 8 ** Contributions and grants (Part VIII, line 1h)

- 1,717,692

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** 9 ** Program service revenue (Part VIII, line 2g)

- 51,314

---

** 10 ** Investment income (Part VIII, column (A), lines 3, 4, and 7d)

- 104,846

---

** 11 ** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

- 88,741

---

** 12 ** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

- 1,785,111

---

** Expenses **

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** 13 ** Grants and similar amounts paid (Part IX, column (A), lines 1-3)

- 0

---

** 14 ** Benefits paid to or for members (Part IX, column (A), line 4)

- 0

---

** 15 ** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

- 793,101

---

** 16a ** Professional fundraising fees (Part IX, column (A), line 11e)

- 0

---

** 16b ** Total fundraising expenses (Part IX, column (D), line 25)

- 124,904

---

** 17 ** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

- 876,566

---

** 18 ** Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

- 1,669,667

---

** 19 ** Revenue less expenses. Subtract line 18 from line 12

- 115,444

---

** Net Assets or Fund Balances **

---

** 20 ** Total assets (Part X, line 16)

- 3,844,622

---

** 21 ** Total liabilities (Part X, line 26)

- 98,192

---

** 22 ** Net assets or fund balances. Subtract line 21 from line 20

- 3,746,430

---

** Part II ** Signature Block

---

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

---

** Sign Here **

---

** Signature of officer **

- ADRIAN DEWENDT, CEO

---

** Type or print name and title **

- Date

---

** Paid **

---

** Print/Type preparer's name **

- CHANDRA FOSTER

---

** Preparer's signature **

- CHANDRA FOSTER

---

** Date **

- 09/20/19

---

** Checked **

- Self-employed

---

** PTIN **

- P00104736

---

** Preparer **

---

** Firm's name **

- EIDE BAILLY LLP

---

** Firm's EIN **

- 45-0250958

---

** Use Only **

---

** Firm's address **

- 810 S CINCINNATI AVE, STE 600

---

** TULSA, OK 74119-1623

---

** Phone no. **

- 918-748-5000

---

May the IRS discuss this return with the preparer shown above? (see instructions)

- Yes

---

** Form 990 (2018) **

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See Schedule O for Organization Mission Statement Continuation
**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III  

[X] Yes  

**1 Briefly describe the organization’s mission:**  
**TO PROVIDE OLYMPIC TYPE TRAINING AND COMPETITION TO INTELLECTUALLY DISABLED CHILDREN AND ADULTS IN THE STATE OF OKLAHOMA.**

**2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?**  

[ ] Yes  

[X] No  

If “Yes,” describe these new services on Schedule O.

**3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?**  

[ ] Yes  

[X] No  

If “Yes,” describe these changes on Schedule O.

**4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses.**

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

<table>
<thead>
<tr>
<th>Code</th>
<th>(Expenses $)</th>
<th>(Revenue $)</th>
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<tbody>
<tr>
<td>4a</td>
<td>1,670,973.</td>
<td>66,860.</td>
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SPECIAL OLYMPICS OKLAHOMA OFFERS 15 OFFICIAL SPORTS INCLUDING TRADITIONAL AND UNIFIED SPORTS. THE SPECIAL OLYMPICS OKLAHOMA PROGRAM BENEFITS 11,600 ATHLETES, AND IS SUPPORTED BY OVER 1,700 VOLUNTEER COACHES AND THOUSANDS OF SPONSORS, DONORS, AND VOLUNTEERS CONDUCTING MORE THAN 140 EVENTS IN 2018.

**4b**

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**4c**

<table>
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<th>Code</th>
<th>(Expenses $)</th>
<th>(Revenue $)</th>
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**4d Other program services (Describe in Schedule O.)**

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<tr>
<th>Expenses $ including grants of $</th>
<th>(Revenue $)</th>
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**4e Total program service expenses**  

1,670,973.
### Part IV Checklist of Required Schedules

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**Section 501(c)(3) Organizations**

1. 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 I
2. 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
3. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
4. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
5. 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
6. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
7. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X
8. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
9. Did the organization maintain an office, employees, or agents outside of the United States? If "Yes," complete Schedule D, Part XI and XII
10. 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
11. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV
12. Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? If "Yes," complete Schedule D, Parts I and IV
13. Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
14. 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 I and IV
15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV
16. 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
17. Did the organization report a total of more than $15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
18. Did the organization report a total of more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
19. 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 17? If "Yes," complete Schedule I, Parts I and II
20. 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 17? If "Yes," complete Schedule I, Parts I and II
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 17? If "Yes," complete Schedule I, Parts I and II
22. 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 17? If "Yes," complete Schedule I, Parts I and II
### Part IV Checklist of Required Schedules (continued)

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**Note.** All Form 990 filers are required to complete Schedule O.

### Part 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

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<thead>
<tr>
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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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.  

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  

b If “Yes,” has it filed a Form 990-T for this year? If “No” to line 3b, provide an explanation in Schedule O.  

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)?  

b If “Yes,” enter the name of the foreign country:  


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  

c If “Yes” to line 5a or 5b, did the organization file Form 8886-T?  

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?  

b If “Yes,” did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  

7 Organizations that may receive deductible contributions under section 170(c).  

a 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?  

b If “Yes,” did the organization notify the donor of the value of the goods or services provided?  

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  

d If “Yes,” indicate the number of Forms 8282 filed during the year.  

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099-C?  

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  

9 Sponsoring organizations maintaining donor advised funds.  

a Did the sponsoring organization make any taxable distributions under section 4966?  

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  

10 Section 501(c)(7) organizations. Enter:  

a 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.  

11 Section 501(c)(12) organizations. Enter:  

a Gross income from members or shareholders.  

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  

b If “Yes,” enter the amount of tax-exempt interest received or accrued during the year.  

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  

a Is the organization licensed to issue qualified health plans in more than one state?  

Note. See the instructions for additional information the organization must report on Schedule O.  

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  

c Enter the amount of reserves on hand.  

14a Did the organization receive any payments for indoor tanning services during the tax year?  

b If “Yes,” has it filed a Form 720 to report these payments? If “No,” provide an explanation in Schedule O.  

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?  

If “Yes,” see instructions and file Form 4720, Schedule N.  

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  

If “Yes,” complete Form 4720, Schedule O.
Part VI Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year ............................................ 1a 20

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 in Schedule O. 1b 20

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? 2 2 X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X

5 Did the organization become aware during the year of a significant diversion of the organization’s assets? 5 X

6 Did the organization have members or stockholders? 6 X

7a 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 X

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body? ........................................... 8a X

b Each committee with authority to act on behalf of the governing body? 8b X

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If "Yes," provide the names and addresses in Schedule O. 9 X

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates? 10a X

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes? 10b

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X

b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11b

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X

13 Did the organization have a written whistleblower policy? 13 X

14 Did the organization have a written document retention and destruction policy? 14 X

15 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?

a The organization’s CEO, Executive Director, or top management official 15a X

b Other officers or key employees of the organization 15b X

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X

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 organization’s exempt status with respect to such arrangements? 16b X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed. OK

18 Section 6104 requires an organization to make its Forms 1023 (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.

[] Own website  [x] Another’s website  [x] Upon request  [] Other (explain in Schedule O)

19 Describe in 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.

20 State the name, address, and telephone number of the person who possesses the organization’s books and records.

THE ORGANIZATION - 918-481-1234

6835 S. CANTON AVE, TULSA, OK  74136