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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009			
B Check if applicable <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Coastal Bend Community Foundation	
		Doing Business As	
		Number and street (or P O box if mail is not delivered to street address) 600 Leopard Street No 1716	Room/suite
		City or town, state or country, and ZIP + 4 Corpus Christi, TX 78401	
		F Name and address of principal officer Kent H Williams 600 Leopard Street No 1716 Corpus Christi, TX 78401	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
J Website: ▶ www.cbcbfoundation.org			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1980	M State of legal domicile TX

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities To enhance the quality of life in the Coastal Bend area of Texas through charitable & educational grants		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a) 3 2		
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 2		
	5 Total number of employees (Part V, line 2a) 5		
	6 Total number of volunteers (estimate if necessary) 6		
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a		
	b Net unrelated business taxable income from Form 990-T, line 34 7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3,901,035	2,715,892
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-3,636,711	-764,010
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	398,958	406,159
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	663,282	2,358,041
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,127,240
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)		335,265	375,326
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		564,980	607,488
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		6,027,485	4,016,773
19 Revenue less expenses Subtract line 18 from line 12		-5,364,203	-1,658,732
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	33,288,500	38,705,068
	21 Total liabilities (Part X, line 26)	4,013,095	3,998,874
	22 Net assets or fund balances Subtract line 21 from line 20	29,275,405	34,706,194

Part II		Signature Block			
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge				
	***** Signature of officer		2010-08-09 Date		
	Kent H Williams President and CEO Type or print name and title				
Paid Preparer's Use Only	Preparer's signature		Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		Kirk Monroe & Klostemann LLP 1016 Santa Fe Suite 201 Corpus Chrsti, TX 78404		EIN
					Phone no (361) 882-7131

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission

To enhance the quality of life in the Coastal Bend area of Texas through charitable and educational grants

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 ☒ 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 ☒ No
If “Yes,” describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 2,562,629 including grants of \$ 2,176,140) (Revenue \$ 925,882)
The Foundation makes grants to nonprofit organizations to improve the quality of life in the Coastal Bend area of Texas from unrestricted, field-of-interest, designated, special project and donor advised funds	











4b	(Code) (Expenses \$ 552,450 including grants of \$ 488,579) (Revenue \$ 598,874)
The Foundation provides scholarships and fellowships to students from the seven county area of the Coastal Bend of Texas in accordance with the terms of the approximately 90 scholarship and fellowship funds it holds	

4c	(Code) (Expenses \$ 402,836 including grants of \$ 369,240) (Revenue \$ 601,807)
The Foundation provides hardship grants for employees of one organization. These grant requests are reviewed on a case by case basis in accordance with the terms of the employee assistance fund agreements	

4d	Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)	

4e	Total program service expenses \$ 3,517,915
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Part IV Checklist of Required Schedules

		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	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	Yes
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• 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.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• 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? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	No
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	17	No
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	Yes
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	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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 I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. 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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	6	
		1b	0	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1c	Yes
2a	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	6	
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 this return (see instructions)			2b	Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			3a	No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	No
b If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
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?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
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?			7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	23	
b	Enter the number of voting members that are independent	1b	23	
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		No
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No

Section B. Policies

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶TX
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Beverly Harper 600 Leopard Street Suite 1716 Corpus Christi, TX 78401 (361) 882-9745

Part VII

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

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. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees. See 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Clare Atkinson Wonders Director	1.00	X						0	0	0
Eugene Bouligny Director	1.00	X						0	0	0
Nancy Johnson Bellows Director	1.00	X						0	0	0
William B Whitworth Director	1.00	X						0	0	0
F John Shepherd III Director	1.00	X						0	0	0
Laura Fischer Director	1.00	X						0	0	0
Richard Bianchi Director	1.00	X						0	0	0
Leah Pagan Olivarr Director	1.00	X						0	0	0
Dale K Wilson Director	1.00	X						0	0	0
Jean Claire Turcotte Director	1.00	X						0	0	0
Jack W Wrght Director	1.00	X						0	0	0
Josephine Miller Director	1.00	X						0	0	0
Susan Hutchinson Director	1.00	X						0	0	0
Robert Furgason Director	1.00	X						0	0	0
Kathleen M White Director	1.00	X						0	0	0
Larry Aduddell Director	1.00	X						0	0	0
Laura Miller Director	1.00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Fred J Nemec Director	1 00	X						0	0	0
Tom Dobson Director	1 00	X						0	0	0
Leon S Loeb Chairman	5 00	X		X				0	0	0
Dick Messbarger Vice Chairman	1 00	X		X				0	0	0
Sylvia Whitmore Treasurer	1 00	X		X				0	0	0
Rona Train Secretary	1 00	X		X				0	0	0
Kent H Williams President and CEO	40 00			X	X	X		113,350	0	9,131
Dorothy Sigler Assistant Secretary	15 00			X	X			5,587	0	3,185
Susan B Jackson Assistant Secretary/Dire	40 00			X	X			48,600	0	8,217
Beverly McCall Harper Director of Finance	40 00				X			58,300	0	7,860
Martha Daniels Director of Development	40 00				X			55,500	0	4,502
1b Total								281,337	0	32,895

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b						
	c	Fundraising events	1c	159,601					
	d	Related organizations	1d						
	e	Government grants (contributions)	1e						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,556,291					
	g	Noncash contributions included in lines 1a-1f \$ 167,364							
	h	Total. Add lines 1a-1f		2,715,892					
Program Service Revenue	2a		Business Code						
	b								
	c								
	d								
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f							
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		752,315	752,315			
4		Income from investment of tax-exempt bond proceeds . .							
5		Royalties		83,633	83,633				
6a		Gross Rents	(i) Real	(ii) Personal	35,668	35,668			
		b	Less rental expenses	109,836					
		c	Rental income or (loss)	74,168					
		d	Net rental income or (loss)	35,668					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	-1,516,325	-1,516,325			
		b	Less cost or other basis and sales expenses	34,978,578					
		c	Gain or (loss)	36,494,903					
		d	Net gain or (loss)	-1,516,325					
8a		Gross income from fundraising events (not including \$ 57,496 of contributions reported on line 1c) See Part IV, line 18			-47,704	-47,704			
		a	159,601						
		b	Less direct expenses	105,200					
c		Net income or (loss) from fundraising events . .							
9a		Gross income from gaming activities See Part IV, line 19							
		a							
		b	Less direct expenses						
c		Net income or (loss) from gaming activities . .							
10a		Gross sales of inventory, less returns and allowances							
	a								
	b	Less cost of goods sold							
c	Net income or (loss) from sales of inventory . .								
Miscellaneous Revenue		Business Code							
11a	Administrative Fees	561,000	231,478	231,478					
b	Casualty Loss Income	900,099	94,070	94,070					
c	Class action lawsuit	900,099	9,014	9,014					
d	All other revenue								
e	Total. Add lines 11a-11d		334,562						
12	Total revenue. See Instructions		2,358,041	-357,851	0	0			

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	2,176,140	2,176,140		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	857,819	857,819		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	281,337		281,337	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	30,000		30,000	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	9,340		9,340	
9	Other employee benefits	31,106		31,106	
10	Payroll taxes	23,543		23,543	
11	Fees for services (non-employees)				
a	Management	22,950	22,950		
b	Legal	28,455	8,987	19,468	
c	Accounting	10,000		10,000	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	224,758	224,758		
g	Other	10,916	3,816	7,100	
12	Advertising and promotion	2,726	1,897	829	
13	Office expenses	20,629	518	20,111	
14	Information technology	18,379	3,232	15,147	
15	Royalties				
16	Occupancy	23,883		23,883	
17	Travel	2,666		2,666	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,044	1,504	2,540	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,956		6,956	
23	Insurance	6,183		6,183	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	Admistrative Fee Expens	199,202	199,202		
b	Park Improvements	14,431	14,431		
c	Library Books	1,488	1,488		
d					
e					
f	All other expenses	9,822	1,173	8,649	
25	Total functional expenses. Add lines 1 through 24f	4,016,773	3,517,915	498,858	0
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			237,091	1	138,946
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			33,814	3	31,436
	4	Accounts receivable, net			5,929	4	252,699
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			16,579	9	18,580
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	2,802,695			
	b	Less accumulated depreciation	10b	97,781	2,148,497	10c	2,704,914
	11	Investments—publicly traded securities			30,511,324	11	35,137,223
	12	Investments—other securities See Part IV, line 11			335,266	12	421,270
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			33,288,500	16	38,705,068
Liabilities	17	Accounts payable and accrued expenses			10,220	17	10,052
	18	Grants payable			1,227,474	18	885,108
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				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 Complete Part X of Schedule D			2,775,401	25	3,103,714
	26	Total liabilities. Add lines 17 through 25			4,013,095	26	3,998,874
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			-2,293,963	27	873,535
	28	Temporarily restricted net assets			6,562,175	28	8,223,306
	29	Permanently restricted net assets			25,007,193	29	25,609,353
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			29,275,405	33	34,706,194
	34	Total liabilities and net assets/fund balances			33,288,500	34	38,705,068

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization Coastal Bend Community Foundation	Employer identification number 74-2190039
---	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,097,404	2,486,262	3,385,409	3,901,035	2,715,892	15,586,002
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,097,404	2,486,262	3,385,409	3,901,035	2,715,892	15,586,002
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						15,586,002

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	3,097,404	879,815	3,385,409	3,901,035	2,715,892	15,586,002
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	788,921	879,815	1,326,920	1,276,052	945,784	5,217,492
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	74,951	166,116	298,505	215,987	392,058	1,147,617
11 Total support (Add lines 7 through 10)						21,951,111

12 Gross receipts from related activities, etc (See instructions)

12

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	71 000 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	73 150 %

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
Coastal Bend Community Foundation

Employer identification number
74-2190039

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	4479
2	Aggregate contributions to (during year)	874,003553,531
3	Aggregate grants from (during year)	852,533483,397
4	Aggregate value at end of year	2,272,9074,705,831
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div>YesNo</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div>YesNo</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4

Number of states where property subject to conservation easement is located ▶

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

YesNo

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

YesNo

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1▶ \$

(ii) Assets included in Form 990, Part X▶ \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1▶ \$

b

Assets included in Form 990, Part X▶ \$

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	22,933,799	32,771,461		
b	Contributions	672,512	1,020,397		
c	Investment earnings or losses	5,116,638	-9,190,204		
d	Grants or scholarships	-592,992	-1,149,957		
e	Other expenditures for facilities and programs	0	-63,657		
f	Administrative expenses	-503,572	-454,241		
g	End of year balance	27,626,385	22,933,799		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 5 300 % %

b

Permanent endowment ▶ 55 700 % %

c

Term endowment ▶ %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	2,291,907			2,291,907
b Buildings	337,142			337,142
c Leasehold improvements	69,200			69,200
d Equipment		104,446	97,781	6,665
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				2,704,914

Schedule D (Form 990) 2009

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	12,358,041
2	Total expenses (Form 990, Part IX, column (A), line 25)	4,016,773
3	Excess or (deficit) for the year Subtract line 2 from line 1	-1,658,732
4	Net unrealized gains (losses) on investments	7,417,835
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	-328,314
9	Total adjustments (net) Add lines 4 - 8	7,089,521
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	5,430,789

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	19,340,844
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a7,417,835	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e7,417,835	
3	Subtract line 2e from line 131,923,009	
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 7b4a	
b	Other (Describe in Part XIV)4b435,032	
c	Add lines 4a and 4b4c435,032	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)52,358,041	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	3,910,054
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e0	
3	Subtract line 2e from line 133,910,054	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b106,719	
c	Add lines 4a and 4b4c106,719	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)54,016,773	

Part XIV Supplemental Information

Complete this part to 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 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The Foundation's endowment funds are used for unrestricted grants to nonprofit organizations to improve the quality of life in the Coastal Bend area of Texas.
		Part XI,Line 8 - Change in Agency Endowment Funds -328313, Rounding -1 Part XII,Line 4b - Agency Endowment Revenue 674,388, Expenses Netted Against Revenue -191,836, Interfund gifts -47520 Part XIII,Line 4b -Agency Endowment Expenses 346,075, Expenses Netted Against Revenue -191,836, Interfund grants -47,520

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
Coastal Bend Community Foundation

Employer identification number
74-2190039

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and e-mail solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

☐ Yes ☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			Harvey Weil Fundraising Dinner	Maps in Schools	3	(Add col (a) through col (c))
			(event type)	(event type)	(total number)	
	1	Gross receipts	133,814	19,476	6,311	159,601
Direct Expenses	2	Less Charitable contributions	79,714	16,135	6,256	102,105
	3	Gross income (line 1 minus line 2)	54,100	3,341	55	57,496
	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs			4,750	4,750
	7	Food and beverages	31,193			31,193
	8	Entertainment				
	9	Other direct expenses	43,766	22,790	2,701	69,257
	10	Direct expense summary Add lines 4 through 9 in column (d)				105,200
	11	Net income summary Combine lines 3, column d, and line 10.				-47,704

Part III Gaming.

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
						(Add col (a) through col (c))
Direct Expenses	1	Gross revenue				
	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				
	8	Net gaming income summary Combine lines 1, column d, and line 7				

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►			
Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ►			
Address ►			
16	Gaming manager information		
Name ►			
Gaming manager compensation ► \$ _____			
Description of services provided ►			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
Coastal Bend Community Foundation

Employer identification number
74-2190039

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations

▶

3

Enter total number of other organizations

▶

Software ID:

Software Version:

EIN: 74-2190039

Name: Coastal Bend Community Foundation

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Foster Youth Life Investment PartnersPO Box 7743 Corpus Christi, TX 78467	20-0014082	501 (c) (3)	10,000				College assistance, Housing,medical and utility assistance
Coastal Bend Wildlife Habitat Educational Program Inc711 N Carancahua Street Ste 120 Corpus Christi, TX 78475	20-0960059	501 (c) (3)	93,127				Book Printing, Wildlife flashacards, Office administration, General program support
Shoreline Charter School Inc PO Box 68 Taft, TX 78390	20-4134512	501 (c) (3)	10,345				Renovate, expand physical education facility
Texas State Aquarium Association2710 N Shoreline Blvd Corpus Christi, TX 78402	23-7044950	501 (c) (3)	7,700				Oceans in Jeopardy program General program support
Boys and Girls Club of Beeville IncPO Box 131 Beeville, TX 78104	51-0211273	501 (c) (3)	15,000				Tutoring and Internet Safety Program and Other after school program support
Salvation Army416 West Colonial Orlando, FL 32804	58-0660607	501 (c) (3)	31,576				Diabetic shoe program, Operating expenses,General Program Support
Lutheran Social Services of the South IncPO Box 140767 Austin, TX 78714	74-1109745	501 (c) (3)	8,500				Foster kids support,Project HEALTH program, general program support
Young Womens Christian Association of Corpus Christi4601 Corona Drive Corpus Christi, TX 78411	74-1157366	501 (c) (3)	41,312				YW Teen Support program, Scholarships for Elderly Therapudic and Mentally Disabled programs,General Program support
First United Methodist Church900 South Shoreline Blvd Corpus Christi, TX 78401	74-1166910	501 (c) (3)	126,800				Youth Choir, Christian Adventure Camp, Medical and other needs for elderly, Habitat for Humanity, Sea City Work Camp and General Program support
Wesley Community Center PO Box 586 Robstown, TX 78380	74-1185657	501 (c) (3)	58,291				upgrade fire alarm system, replace exit doors, senior food and nutrition program, , General Program support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Catholic Diocese of Corpus Christi620 Lipan Corpus Christi, TX 78403	74-1185667	501 (c) (3)	14,000				General program support and operating expense support
American Red Cross Coastal Bend Texas ChapterPO Box 3429 Corpus Christi, TX 78463	74-1207551	501 (c) (3)	15,051				Emergency fire victim support,General Program support
United Way of the Coastal Bend Inc711 N Carancahua Street Suite 302 Corpus Christi, TX 78475	74-1207552	501 (c) (3)	37,770				VITA Tax Preparation support, Annual Children's Christmas Appeal, General program support
YMCA of Corpus Christi417 South Upper Broadway Corpus Christi, TX 78401	74-1211670	501 (c) (3)	25,814				Partner with Youth Campaign, Leadership program for CCISD Middle and High School, Capital campaign, General Program support
Goodwill Industries of South Texas Inc2961 South Port Avenue Corpus Christi, TX 78405	74-1223056	501 (c) (3)	12,000				Work 2000 HUD matching grant, General program support
Mary McLeod Bethune Day Nursery Inc900 Kinney Street Corpus Christi, TX 78401	74-1238426	501 (c) (3)	27,722				Scholarships for Child Care for Homeless Children,child care for low income children, general program support
St Luke's United Methodist Church3151 Reid Drive Corpus Christi, TX 78404	74-1255636	501 (c) (3)	6,700				Rent, utility and other assistance for low income elderly
St Gertrude Catholic Church 1120 South 8th Street Kingsville, TX 78363	74-1260723	501 (c) (3)	20,000				Church Building Renovations
Gulf Coast Humane Society 3118 Cabaniss Pkwy Corpus Christi, TX 78415	74-1266245	501 (c) (3)	26,263				General Program support
Boys & Girls Club of Corpus Christi Inc3902 Greenwood Drive Corpus Christi, TX 78416	74-1294586	501 (c) (3)	36,000				After School program support, underserved youth support general program support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Family Counseling Service 3833 South Staples St Suite S203 Corpus Christi, TX 78411	74-1321308	501 (c) (3)	10,000				Therapy services support, Senior Counseling Support
Boys & Girls Club of AlicePO Box 689 Alice, TX 78333	74-1463071	501 (c) (3)	7,500				Homework time and Kidzlit programs
Boys & Girls Club of Kingsville IncPO Box 1181 Kingsville, TX 78364	74-1499178	501 (c) (3)	7,500				Air Conditioner replacement
CBCOG Area Agency on AgingPO Box 9909 Corpus Christi, TX 78469	74-1586230	State Agency	11,000				A Matter of Balance Senior Program support and Matching Funds for Respite Services for Caregivers Program
Coastal Bend Alcohol-Drug Rehab CenterPO Box 4996 Corpus Christi, TX 78469	74-1595867	501 (c) (3)	14,207				DSHS Match to Support Drug & Alcohol Abuse for Homeless, Capital campaign, General operating support
Good Samaritan Rescue MissionPO Box 65 Corpus Christi, TX 78403	74-1611894	501 (c) (3)	24,214				Unfunded Meals for Low Income Clients, General Program Support
South Texas Public Broadcasting System Inc 939 South Stadium Road Columbia, SC 29201	74-1616224	501 (c) (3)	46,800				Purchase of HD radio transmitters,Purchase of new Fitness fun and education program for preschoolers, Challenge program, General Program Support
Art Community Center of Corpus Christi100 North Shoreline Blvd Corpus Christi, TX 78401	74-1716003	501 (c) (3)	7,500				General Program and Operating Support
Texas A & M University at Corpus Christi6300 Ocean Drive Corpus Christi, TX 78412	74-1760663	State Agency	41,500				President's Council Support, Habitat use of spotted seatrout in Tx waters program, Happy Kitchen,Healthy Choices program,Youth Author's Camp,Summer Basketball Camp, Reading and Writing Tutoring Program , Nat'l Youth Sports & Wellness program, Community "ArtReach" program, general program support
Aransas County Council on Aging912 South Church Street Rockport, TX 78382	74-1796095	501 (c) (3)	16,857				Meals for the Elderly Program, unfunded Meals for Low Income Clients Program, general program support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Christus Spohn Health System Development Foundation600 Elizabeth Street Corpus Christi, TX 78404	74-1906005	501 (c) (3)	22,000				Lifeline Services for Patients, awareness campaign for 211 for diabetics general program support
Women's Shelter of South TexasPO Box 3368 Corpus Christi, TX 78463	74-1943398	501 (c) (3)	16,824				General Program Support
Special Olympics Texas Inc 7715 Chevy Chase Drive Suite 120 Austin, TX 78752	74-1998367	501 (c) (3)	7,500				General Program Support
Corpus Christi Area Council for the DeafInc5151 McArdle Corpus Christi, TX 78411	74-2076700	501 (c) (3)	6,000				Youth Programs and Silent Senior Programs
Palmer Drug Abuse Program of Corpus Christi Inc3104 South Alameda Street Corpus Christi, TX 78404	74-2200058	501 (c) (3)	37,932				General Program Support
Food Bank of Corpus Christi 826 Krill Street Corpus Christi, TX 78408	74-2234089	501 (c) (3)	43,590				General Program Support
Corpus Christi Metro MinistriesPO Box 4899 Corpus Christi, TX 78469	74-2247261	501 (c) (3)	151,543				Loaves and Fishes Program Support, Petra Vela Kennedy Center Building Support, Rainbow House Support, Unfunded Meals for Increased Low Income Clients Support, General Program Support
Beeville Vineyard Inc210 North Monroe Street Beeville, TX 78102	74-2314158	501 (c) (3)	17,374				Career Corner Assistance Program, Security System Support, Unfunded Meals for Low Income Clients, Utility Assistance for Underserved in Beeville, Texas, Bee County Rainbow Room Support
Catholic Charities of Corpus Christi IncPO Box 2620 Corpus Christi, TX 78403	74-2330464	501 (c) (3)	15,571				Emergency Aid Support, Unfunded Meals for Low Income Clients, General Program Support
Communities in School Corpus Christi IncPO Box 331203 Corpus Christi, TX 78463	74-2429440	501 (c) (3)	6,000				Kids Dress for Success Program for School Clothes, caps & gowns for low income graduating HS seniors

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Corpus Christi Literacy Council4044 Greenwood Drive Corpus Christi, TX 78416	74-2444906	501 (c) (3)	7,750				General Program Support
Corpus Christi Hope House Inc658 Robinston Street Corpus Christi, TX 78404	74-2480299	501 (c) (3)	52,500				Celebration for Life Project Support, General Program Support
Texas A & M University Corpus Christi Foundation Inc6300 Ocean Drive USC 205 Corpus Christi, TX 78412	74-2491445	501 (c) (3)	7,884				Dick Conolly Scholarship Fund Support
St Andrew's Episcopal Church13026 Leopard Street Corpus Christi, TX 78410	74-2536092	501 (c) (3)	10,000				General Program Support
Habitat for Humanity International IncPO Box 3032 Corpus Christi, TX 78463	74-2561473	501 (c) (3)	10,000				General Program support
Driscoll Children's Hospital PO Box 6530 Corpus Christi, TX 78466	74-2577746	501 (c) (3)	16,900				Camp Hearty, Camp Easy Breathers, Camp TLC child injury prevention program, other camp for patients, General Program Support
Coastal Bend Bays Foundation IncPO Box 23025 Corpus Christi, TX 78403	74-2603919	501 (c) (3)	24,500				CRM Software Support, Grant research tool Support, General Program Support
Corpus Christi Education Foundation801 Leopard Street Corpus Christi, TX 78401	74-2711535	501 (c) (3)	7,000				Voyages Project Support and World Class Schools Support
Ark Assessment Center & Emergency Shelter for Youth 12960 Leopard Street Corpus Christi, TX 78410	74-2859907	501 (c) (3)	22,979				General Progam Support
Brazos Valley Coalition for Life3601 East 29th Street Ste 8 Bryan, TX 77802	74-2881292	501 (c) (3)	7,000				General Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Foster Angels of South Texas Foundation13934 Sea Anchor Street Corpus Christi, TX 78418	74-2917772	501 (c) (3)	31,022				General Program Support, Operational Support for Program to Help Foster Children
Our Lady of Corpus Christi PO Box 9785 Corpus Christi, TX 78469	74-2944149	501 (c) (3)	26,000				Our Lady of Corpus Christi College Scholarship Fund Support, General Program Support
Corpus Christi Symphony Society IncPO Box 495 Corpus Christi, TX 78403	74-6011470	501 (c) (3)	9,000				SSupport Sarina Zhang performance, General Program Support
Texas State Historical Association4412 Spicewood Springs Rd Ste 800 Austin, TX 78759	74-6025220	501 (c) (3)	10,000				Capital Campaign Support
South Texas Institute for the Arts1902 North Shoreline Blvd Corpus Christi, TX 78401	74-6025882	501 (c) (3)	6,500				Exhibit Support, American Ceramics exhibit Support, Silver Safari program support,General Program Support
Most Precious Blood Catholic Church3502 Saratoga Blvd Corpus Christi, TX 78415	74-6089686	501 (c) (3)	5,500				Fullness of Truth project, General Program Supprt
HALO Flight Inc315 Pinson Drive Corpus Christi, TX 78406	74-2235660	501 (c) (3)	7,475				General Program Support
Boy Scouts of America Council700 Everhart Terrace Bldg A Corpus Christi, TX 78411	75-2675978	501 (c) (3)	11,523				General Program Support
Champions for LifePO Box 761101 Dallas, TX 75376	75-2733954	501 (c) (3)	9,500				To Launch new Program in Taft, TX, Life Skills Curriculum program in Bee County, Youth at Risk Mentoring initiative program
Christ Evangelical Presbyterian Church8300 Katy Freeway Houston, TX 77024	76-0332175	501 (c) (3)	13,000				General Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mission of Mercy IncPO Box 102 Fairfield, PA 17320	86-0704883	501 (c) (3)	57,794				Mobile Medical Unit Support, Medical services for uninsured and underserved and General Program Support
Campus Crusade for Christ Inc100 Lake Hart Drive Orlando, FL 32832	95-6006173	501 (c) (3)	5,300				General Program Support
Tennis Success IncPO Box 71647 Corpus Christi, TX 78467	06-1725402	501 (c) (3)	16,188				General Program support
Muscular Dystrophy Association3300 East Sunrise Drive Tuscon, AZ 85718	13-1665552	501 (c) (3)	5,500				General program support
Boone & Crockett Club250 Station Dr Missoula, MT 59801	13-6400091	501 (c) (3)	10,000				Conservation Across Boundaries program
Timons MinistriesPO Box 18248 Corpus Christi, TX 78480	31-1638327	501 (c) (3)	23,272				Various programs for low income families, General program support
Alice Chamber of Commerce PO Box 1609 Alice, TX 78333	74-0480027	501 (c) (6)	7,013				Leadership Jim Wells Program
Planned Parenthood of South Texas Inc3536 Holly Rd Corpus Christi, TX 78415	74-1460204	501 (c) (3)	6,000				General program support
Corpus Christi Museum Foundation1900 N Chaparral St Corpus Christi, TX 78401	74-2032535	501 (c) (3)	15,103				General program support
Corpus Christi International Competition for Piano and StringsPO Box 81243 Corpus Christi, TX 78468	74-2203058	501 (c) (3)	10,000				Support for 2009 competition

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Anchor Club Inc320 Anchor St Corpus Christi, TX 78418	74-2351502	501 (c) (3)	6,000				Replace air conditioner in meeting room
Citizens Promoting Medical Excellence405 N Adams Beeville, TX 78102	74-2531617	501 (c) (3)	8,850				Fund current operations and general program support
Good Samaritan Ministries of Refugio CountyP O Box 483 Refugio, TX 78377	74-2598729	501 (c) (3)	7,500				Provide food and clothing to low income families
Texas Wildlife Association Foundation2800 Ne Loop 410 Ste 105 San Antonio, TX 78218	74-2605516	501 (c) (3)	7,500				Texas Youth Hunting Program support
CASA of Nueces County Inc PO Box 4 Corpus Christi, TX 78403	74-2631146	501 (c) (3)	6,000				General program support
Little League Baseball Inc 143 Avenue C Taft, TX 78390	74-2724361	501 (c) (3)	20,000				Build a new baseball complex
PeeWee's Pet Adoption World & Sanctuary Inc1307 Saratoga Corpus Christi, TX 78417	74-2746680	501 (c) (3)	28,394				General Program support
South Texas Lighthouse for the Blind FoundationP O Box 9697 Corpus Christi, TX 78469	74-2818980	501 (c) (3)	15,000				General program support
Driscoll Children's Health Plan615 N Upper Broadway Ste 1621 Corpus Christi, TX 78477	74-2838488	501 (c) (3)	29,573				Diabetes program support
911 Park PlaceP O Box 3157 Corpus Christi, TX 78463	74-2996340	501 (c) (3)	5,050				Project HOPE program support, Walk to Siloam program support, General program support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mother Teresa Shelter Inc 513 Sam Rankin St Corpus Christi, TX 78401	74-3026147	501 (c) (3)	5,402				Program support services for the homeless
University of Texas MD Anderson Cancer CenterPO Box 4486 Houston, TX 77210	74-6000203	State Agency	9,850				General program support
Congregation Beth Israel 4402 Saratoga Blvd Corpus Christi, TX 78413	74-6000619	501 (c) (3)	10,225				General program support
Texas A & M University at Kingsville700 University Blvd Kingsville, TX 78363	74-6001530	State Agency	12,965				Scholarship for college of business, Geosciences program support, Bach to Future concert support, History Fair support, comperter equipemnt for Teacher Tech Lab, Other program support
Caesar Kleberg Foundation for Wildlife Conservation711 Navarro St Ste 535 San Antonio, TX 78205	74-6038766	501 (c) (3)	7,500				Program to translocate ocelot recovery in Texas
Junior League of Corpus Christi Inc4050 Weber Road Corpus Christi, TX 78411	74-6053163	501 (c) (3)	10,000				General Program support
Habitat for Humanity International IncP O Box 1103 Alice, TX 78333	74-3011432	501 (c) (3)	7,500				Build home for low income family
Texas Maritime Museum Association Inc1202 Navigation Circle Rockport, TX 78382	74-2097680	501 (c) (3)	73,671				General Program support
Texas Department of Transportation - Corpus Christi1701 S Padre Island Drive Corpus Christi, TX 78416	74-6001708	State Agency	19,376				Highway signage
Nueces County Department of Human Services901 Leopard St Rm 302 Corpus Christi, TX 78401	74-6000585	State Agency	25,000				Elderly program service

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization
Coastal Bend Community Foundation

Employer identification number
74-2190039

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	5	167,364	Stock Market Quotation
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement290

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

30a

No

31

Yes

32a

No

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990****Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ **Attach to Form 990.**

OMB No 1545-0047

2009**Open to Public
Inspection****Name of the organization**

Coastal Bend Community Foundation

Employer identification number

74-2190039

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Draft input for the Form 990 is prepared by the Director of Finance for review and approval by the President/CEO. That information is then provided to our tax preparer for input to the form. A draft copy of that form is then provided to staff for review. Staff then presents it to the Board's Executive Committee for review and discussion. Upon adoption by the Executive Committee, it is then presented to the full Board of Directors for review and approval.
Form 990, Part VI, Section B, line 12c		Annually, staff provides copies of the foundation's conflict of interest policy to all Board members. For new Board members, the policy is presented and discussed during their orientation briefing. After review, all Board members sign and submit to the President a certification of compliance with the policy, noting any potential conflicts they may have, if any. During committee meetings, Board members are asked to identify any potential conflicts of interest if they arise and those are dealt with by the committee chairman at that time.
Form 990, Part VI, Section B, line 15		The Board Chairman is annually provided with a compensation history for the CEO. He is also provided with a performance evaluation form to complete for the CEO as well as the most recent salary comparability data available from independent sources, like the Council on Foundations. These documents are used by the Chairman to review the CEO's performance with the Executive Committee (in executive session) and to determine a compensation amount for the CEO for that year. For key employees, the process is similar except that the independent review official is the CEO. He uses comparable salary information provided by the independent Council on Foundations as well as performance appraisal information to make salary adjustment determinations. The latter are proposed by the CEO and approval, in turn, by the Finance Committee, the Executive Committee and the full Board of Directors as part of the annual budget determination.
Form 990, Part VI, Section C, line 19		Governing documents, conflict of interest policy and financial statements are available to the public upon request. Financial statements are also published in the foundation's annual report, which is available online.

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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