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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)

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

OMB No 1545-0047

Open to Public Inspection

Α	For the	2009 cal	endar ye	ar, or tax	year beginr	ning			, aı	nd end	ding					
В	Check if ap	oplicable	Please	C Name	of organization	n Alamo (	Colleges Fo	undation	Inc.			D Empl	loyer id	entification nu	mber	
	Address	change	use IRS label or	Doing	Business As				- · · · · · · · ·		ľ	74-2422	2589			
X	Name ch	ange	print or	Numb	er and street (	or P O box if mail	s not delivered	i to street a	ldress)	Roo	m/suite	E Telep	ohone ni	umber		
ים	nitial retu	ım	type. See	201 W.	Sheridan, E	3lda. C					ı f	(210) 48	85-004	<b>42</b>		
$\Box$	Terminat	ed	Specific			country, and ZIP	+ 4					•				
$\Box$	Amended	return	instruc- tions	San An				TX	7820	04		G Gross	s receip	ts \$	4,92	20,188
=		on pending				rıncipal officer.	_			-	H/a\ Is th	ns a grour	n return	for affiliates?		X No
_	. ,	, ,	l		-	eridan, Bldg	C S A TY	78204				all affiliate			Yes	No
											• •			(see instructions		
		mpt status	=		3) <b>∢</b> (in	sert no )	4947(a)(1)	or	527						"	
JV	Vebsite	: <b>►</b> www			<u>ndation</u>		<del></del>				H(c) Gro	up exemp	otion nur	mber ▶		
KF	orm of o	rganization	X Co	rporation	Trust	Association	Other	<b>&gt;</b>	L	. Year o	of format	ion 1	984	M State of leg	jal domicile	TX
P	art I		nmary													
	1	Briefly d	escribe	the orga	nızation's m	nission or mos	t signıficant	activities	: Prov	ide po	ost-sec	ondary	educa	ation schola	rships and	<u> </u>
•		other ed	ucationa	al suppoi	rt to and for	students in th	e Alamo Co	olleges.								
Activities & Governance										<b>.</b>						
EL S				<u></u>												
30.	2					zation discont			or dispo	sed o	f more	than 25	5% of	its net asser	is.	
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	4		•		•	ibers of the go	verning boo	dy (Part \	/I, line 1	b) .			-	4	<del></del>	23
<b>♣</b>	5				ees (Part V,	•	-						L	5		0
ศร์	6					e if necessary							L	6		23
Z	7a					nue from Part			e 12					7a	····	0
<u>N</u> _	b	Net unre	elated bu	usiness t	axable inco	me from Forn	990-T, line	<del>2 34</del>		<del></del>		<u> </u>		7b		0
	1 -									-		Prior Ye			urrent Year	_
SCANNED Revenue	8					line 1h)				.  -		1	1,715,	T T	4,47	71,568
Z	9	Program	1 service	revenue	∌ (Part VIII-	tine 2g)							004	0		0
<b>Z</b>	10	investm	ent inco	me (Paπ	VIII, COLUM	<b>州图①檀3</b>	200-10			 			224,			95,902 50,740
ථි	11	Other re	venue (	Part VIII,	column (A)	), lines 5, 6d	10¢,	and Tie	•	·			-534,			52,718
<b>®</b>	12	Total reve	enue—ad	ia lines 8	through 1 g	nust equal Part	VIII, conumn	(A), line 1	2)	-			1,405,			20,188
	13					ant IX, Leolungin		-3)	•	-			1,185,		91	14,599
	14	Benefits	paid to	or for me	ampers (22	rt IX, column (	A), 11(6)4)	 Jumpo (A)	lines E	10/				0		- 0
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Expenses	16a			_	-				17	. 024				<del></del>		
Ä	l b					, column (D), l ), lines 11a–1			11.	,024			92	343		9 725
	17		•	-		nust equal Par			25)				<u>63,</u> 1,268,			38,725
	18 19		-			ne 18 from line				ŀ			137,			53,324 56,864
- 50		Kevenu	C 1033 C/	kpenses.	Subilactili	ne to nomina	<del>5 14</del>	<del></del>			Region	ing of Cu			nd of Year	10,004
ats o	20	Total as	sets (Pa	rt X line	- 16)					F	Dog		5,668,			35,748
Assets Baland	21							•		` <b> </b>			,,,,,,	0	,	0
Net					•	ct line 21 fron				r		E	6,668,	884	10.63	35,748
	rt II		nature					<u> </u>	····				-,,			
					I declare that I	have examined th	ıs return, ınclu	ding accom	panying sc	hedules	s and sta	tements,	and to t	he best of my k	nowledge	
		and t	elief, it is t	ие, сопес	t, and complete	e Declaration of p	repared (other t	han officer)	is based o	on all inf	formation	of which	prepare	er has any know	ledge	
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	parer's Only	<b>1</b>	s name (or		RD Harris	son CPA						EIN		4-2999811		
US	- Unity		-employed			65076, San A	ntonio TX	78265-50	)76			Phone no		210) 545-30	75	
Mar	the 15					rer shown abo									Yes	No
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ror	rrivac	y ACT and	raperw(	אות Reau	cuon ACT NO	tice, see the s	parate insti	นบนบที่รี.							Form <b>990</b>	<b>』</b> (∠∪∪५)

c	(Code )	(Expenses \$	0 including g	rants of \$ 0 )	(Revenue \$	0)
						· · · · · · · · · · · · · · · · · · ·
d	Other program services.		•	0) (Payeng 6	0)	
e	(Expenses \$  Total program service	0 including g expenses ►	914,599	0)(Revenue \$	0)	
	-				Fo	m <b>990</b> (2009)

Par	t 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		Х
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	:	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	١		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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,"	9		х
40	complete Schedule D, Part IV	9		
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	Х	
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		X
•	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.			İ
•	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			
40	addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>			
12	Schedule D, Parts XI, XII, and XIII.	12	Х	-
128	Was the organization included in consolidated, independent audited financial statements for the tax  Yes No	12		-
120	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		-
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
_	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
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 United States? If "Yes," complete Schedule F, Part II	15		Х
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 United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	[		
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	_	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Ves." complete Schedule H	20		Ιx

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			l
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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? If "Yes," complete Schedule I, Parts I and III	22	X	l
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	-		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		1	ĺ
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	1	X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			$\vdash$
·	to defease any tax-exempt bonds?	24c		
A	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
		274		
238	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25a		x
L	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<del>  ^</del>
D	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	254		V
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		i	l .
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	<del> </del>	<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		1	l
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?		1	
	If "Yes," complete Schedule L, Part III	_27	1	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			i
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV .	28b		X
С	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 direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	į		
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			1
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		1	ĺ
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			1
	VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		Ė
50	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O.	38	x	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			İ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	_ X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<u>2b</u>		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Х
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			ĺ
	account)?	4a		X
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?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		١.,
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			ĺ
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
_	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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		ļ
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			٠.
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			-
а	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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1
11	Section 501(c)(12) organizations. Enter.			1
a	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40	against amounts due or received from them.)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1	L	ı

Part VI

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

Sect	ion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body	1a	ļ	23			
b	Enter the number of voting members that are independent	1b	<u> </u>	23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel		•				
	any other officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or u						
	supervision of officers, directors or trustees, or key employees to a management company or		-		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9				_4		X
5	Did the organization become aware during the year of a material diversion of the organization				5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or r						<u> </u>
	of the governing body?			.	7a		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or ot			.	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions under	rtaker	n during			i	1
	the year by the following.			i		-	
а	The governing body?	•		.	8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot						
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedul				<u>9a</u>		_X_
	tion B. Policies (This Section B requests information about policies not required by the	e Inte	rmal				
Reve	enue Code.)						
				ı		Yes	No
	Does the organization have local chapters, branches, or affiliates?				10a		Х
Ь	If "Yes," does the organization have written policies and procedures governing the activities of						
	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 to	etore	filing the				
444	form?				11	Х	
11A	· · · · · · · · · · · · · · · · · · ·		•		4.0		
12a	<b>3</b>	•			12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests	that co	ould give		4.01	,,	
_	rise to conflicts?			·	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the pol describe in Schedule O how this is done.	•	-		40		
40				}	12c	X	
13				. }	13	^	~
14				٠ ٠	14		_X
15	Did the process for determining compensation of the following persons include a review and a independent persons, comparability data, and contemporaneous substantiation of the deliber			2			
_		ation	and decis	0117	40.	- [	-
a	The organization's CEO, Executive Director, or top management official	•	•	· }	15a		
b	Other officers or key employees of the organization				15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a			.		- 1	
IVa	with a taxable entity during the year?			ŀ	46-		- '
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization			•	16a		<u>X</u>
	its participation in joint venture arrangements under applicable federal tax law, and taken step			ŀ	ì	- 1	
	the organization's exempt status with respect to such arrangements?			ŀ	16b	-	
Sact	ion C. Disclosure	<u> </u>	<del>:</del>	1	IOD		
17 .			<del></del>		•		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar		T (501/a	\(2\)0.01			
	available for public inspection. Indicate how you make these available. Check all that apply.	וע ששנ	-1 (301(C	/(3)S 01	11 <b>y</b> )		
	X Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents of the control	nonto	conflict c	Fintoro	et		
	policy, and financial statements available to the public.	iciils,	COMMICT O	miere	อเ		
20	State the name, physical address, and telephone number of the person who possesses the b	naka 4	and record	le of th	^		
	organization: No. James A. Eskin						
	201 W. Sheridan Bldg C , San Antonio, TX 78204		(210)	<u> </u>	*4		
	20 I W. Oriendan plug C , San Antonio, 1A 70204						

# 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 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

X Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(B) (C)							(E)	(F)
Name and Title	Average	Position	on (c	hec	k all	that app	ply)	Reportable	Reportable	Estimated
rante and the	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Michael Beldon Chairman	2.	х						0	0	0
Anthony White Vice Chairman	2.	Х						0	0	0
Roberto Zarate Director	2.	х						0	0	0
Paul Young Director	. 2	x						0	0	0
Louis Rowe Director	2.	х						0	0	0
Gus Cardenas Director	2.	х						0	0	0
Katherine David Secretary	2	х						0	. 0	0
George Ozuna Director	2.	x						0	0	0
Steven Bennett Treasurer		х						0	0	0
Diana Burns-Banks Director	2.	х						0	0	0
Randy Smith Director	2.	Х						0	0	0
Charles Wender Director	2.	X						0	0	0
Yolanda Arellano Director	2.	<u>x</u>						0	0	0
Samuel Dawson Director	2.	Х						0	0	0
Erlinda Dimas Director	2.	х						0	0	0
Milton Lee Director	2	х						0	0	0

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	(A)	(B)			-	C)			(D)	(E)		(F)	
	Name and title	Average hours per week	or director		(chec Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	0 2	Estimal amount other ompens from the rganization and relation	t of r ation he ation ated
Phili	p White	2.	X						0	0		·	0
Erlin	da Dimas												
Dire		2.	<u>  X</u>	<u> </u>		-		$\vdash$	0	0	_		0
Dire		2.	X			<u> </u>			0	0			0
Lou	Miller												
Dire	ctor ando Reyes	2.	<u>  X</u>						0	0			0
Dire		2	x					<u></u>	0	0			0
	en Roitsch Norman												
Dire	Dhiana	2	X	<u> </u>			<del> </del> -		0	0		<del> </del>	0
Dire		2	X						0	0			0
									0	0			0
			<u> </u>										
1b	Total					·	<u> </u>	. 🕨	0	<u> </u>			0
2	Total number of individuals (including but no reportable compensation from the organizat		se lis	ted a	ibove 0	e) wi	по ге	ceive	ed more than \$1	00,000 in			
	Toportable sompendation from the organization				<u> </u>				·	· · · · · · · · · · · · · · · · · · ·		Yes	No
3	Did the organization list any former officer, employee on line 1a? If "Yes," complete Sci					yee,	or h	ighe	st compensated	[	3	_=	X
4	For any individual listed on line 1a, is the su					n an	d oth	er c	ompensation fro	<u> </u>			
	the organization and related organizations g										_		
_	individual									· · ·	4		X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "You	-				-			ganization for		5	_	X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest concompensation from the organization.	npensated inde	pend	ent d	contr	acto	rs th	at re	ceived more tha	in \$100,000 of			
	(A) Name and business a	ddress							(B) Description of ser	vices Co	( mpen	C) sation	
	None					-							0
								-		<del></del>			0
													0
													0
2	Total number of independent contractors (in more than \$100,000 in compensation from t	_		ed to	thos	se lis	ted a	abov	e) who received				

Form **990** (2009)

Parl	: VIII	Statement of Revenue						
1	٠				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र्ह्म ह	1a	Federated campaigns	а	0				
Contributions, gifts, grants and other similar amounts	b		b	0				
₽, E	C		c	0			}	
ifts rai			d					
.g	d		e					
Sir	e		e	4	j			
黄	1	All other contributions, gifts, grants, and					1	1
들들			If 4,4	171,568				
g g	g	Noncash contributions included in lines 1a-1f: \$		의	-			
<u> </u>	h	Total. Add lines 1a–1f		▶	4,471,568			
e			Busines	ss Code				
Je J	2a				0			
ě	ь				0			
<u>8</u>	С				0			
5	d				0			
S	ē				0			
Program Service Revenue	f	All other program service revenue			o			
5	ا م	Total. Add lines 2a–2f.	. '	•	0		<del> </del>	
	- 3			· -				
	3	Investment income (including dividends, interest,			405.000			405.005
		other similar amounts)		▶	195,902	<del></del>	<del></del>	195,902
	4	Income from investment of tax-exempt bond proce	eeds .	▶	0		-	
	5	Royalties	·	. ▶	0			
		(ı) Real	(II) Pe	rsonal				
	6a	Gross Rents						
	b	Less. rental expenses .						
	С	Rental income or (loss)	0	0				<u> </u>
	d	Net rental income or (loss)			0			
	7a	Gross amount from sales of (i) Secunties	(11) (	Other				
		assets other than inventory	0	0			İ	
	Ь	Less cost or other basis	<u> </u>				1	1
		and sales expenses	o	ام				
	١ .	Gain or (loss)	0					
	C	· · · · · · · · · · · · · · · · · · ·					1	
	d	Net gain or (loss)	<u> </u>	•		· · · · · · · · · · · · · · · · · · ·	<del> </del>	
<u>o</u>	8a	Gross income from fundraising						
Š		events (not including \$0						
Š		of contributions reported on line 1c)						
Other Revenue		,	a	0				
ĕ	b	2000 direct expenses	b [	0				
충	С	Net income or (loss) from fundraising events .	.ـــــــــــــــــــــــــــــــــــــ		0			
_	9a	Gross income from gaming activities.						
		See Part IV, line 19	a	0				
	Ь	Less: direct expenses	b 🗆	0				<u> </u>
	c	Net income or (loss) from gaming activities		. ▶	Ö			
	1	Gross sales of inventory, less						
		returns and allowances	a l	n			1	1
	ь	Less: cost of goods sold	- h				1	
		<u> </u>	~		o			-
	<del>c</del>	Net income or (loss) from sales of inventory .  Miscellaneous Revenue		ss Code	· · · · · · · · · · · · · · · · · · ·		<del> </del>	
	1						<b>!</b>	050 740
	1	Unrealized Gain on Investments	523000	<u>'</u>	252,718		<del> </del>	252,718
	b		<u> </u>		0		<del>                                     </del>	ļ
	С				0			<b></b>
	d	All other revenue			0			<b></b>
	е	Total. Add lines 11a-11d		▶	252,718			ļ
	12	Total revenue. See instructions		▶	4,920,188	C	ol a	448,620

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#### 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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				1
	organizations in the U.S See Part IV, line 21.	0			
2	Grants and other assistance to individuals in				1
	the U.S. See Part IV, line 22	914,599	914,599		
3	Grants and other assistance to governments,				'
	organizations, and individuals outside the				1
	U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
^	trustees, and key employees	0			· · · · · · · · · · · · · · · · · · ·
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ا			
7	persons described in section 4958(c)(3)(B) .	0			
7 8	Other salaries and wages				
0	and section 403(b) employer contributions)	ol			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				<del>.</del>
''a	Management	ol			
b	Legal	0			
c	Accounting	12,914		12,914	***************************************
ď	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			J3.1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	1,336		1,336	
13	Office expenses	2,368		2,368	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	•		
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	5,083	<del></del>	5,083	1
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)				ı
_	·	o	<del></del>	·	
a b	The Chancellor's Gala	17,024			17,024
		0			17,024
c d		0			
u		0			<del></del>
f	All other expenses	0			<del></del>
25	Total functional expenses. Add lines 1 through 24f	953,324	914,599	21,701	17,024
	Joint costs. Check here ▶ if following	000,024	2,300		,027
26	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising	İ			
	solicitation				

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	450,839	1	1,630,151
	2	Savings and temporary cash investments	4,867,801	2	7,351,269
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	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			1
		Part II of Schedule L	0	6	,
ম	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	8	
As	9	Prepaid expenses and deferred charges		9	· · · · · · · · · · · · · · · · · · ·
	_	Land, buildings, and equipment cost or   10a   0			
		other basis Complete Part VI of Schedule D			
	h	Less: accumulated depreciation	0	10c	
	11	Investments—publicly traded securities	1,350,244		1,654,328
	12	Investments—other securities. See Part IV, line 11.	0	-	0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,668,884		10,635,748
	17	Accounts payable and accrued expenses	0,000,001	17	10,000,710
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	0		
ģ	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
þi		employees, highest compensated employees, and disqualified			'
Ë		persons Complete Part II of Schedule L	0	22	
	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties .	0	_	0
	25	Other liabilities. Complete Part X of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	0		0
	20	Organizations that follow SFAS 117, check here ► X and			
ခ်		complete lines 27 through 29, and lines 33 and 34.		-	
<u>a</u>	27	Unrestricted net assets	-332,138		-147,976
Ba	28	Temporarily restricted net assets	1,502,243		2,017,625
5	29	Permanently restricted net assets	5,498,779	29	8,766,099
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
\$	30	Capital stock or trust principal, or current funds		30	
<b>3</b> 86	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne.	33	Total net assets or fund balances	6,668,884	~~~~	10,635,748
_	34	Total liabilities and net assets/fund balances	6,668,884		10,635,748
	54	rotal navintics and het assets/fully balances	0,000,004	<u> </u>	10,033,740

Form **990** (2009)

Pari	XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O	L		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	_2a		Χ
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.	1		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	ļ		
	issued on a consolidated basis, separate basis, or both:	<u></u>		
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1		
	the Single Audit Act and OMB Circular A-133?	3a		Х
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	3b		

Form **990** (2009)

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

Department of the Treasury

Internal Revenue Service

## **Public Charity Status and Public Support**

OMB No 1545-0047

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. Open to Public Inspection

Employer identification number

Name of the organization 74-2422589 Alamo Colleges Foundation, Inc. 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6  $|\mathbf{x}|$ 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives. (1) more than 33 1/3 % of its support from contributions, membership fees, and gross 9 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 b | Type II c Type III-Functionally integrated Type III-Other 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? . . . . 11g(i) A family member of a person described in (i) above? . . . 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . Provide the following information about the supported organization(s) h (iii) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vii) Amount of (i) Name of supported (ii) EIN (described on lines 1-9 in col (i) listed in your organization in col support the organization in organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes No Yes No Yes 0 n Total

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Schedule A (Form 990 or 990-EZ) 2009 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (a) 2005 (d) 2008 (e) 2009 Calendar year (or fiscal year beginning in) ▶ (b) 2006 (c) 2007 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ") . . . . 906,913 1,047,542 1,715,734 4,471,568 1,621,356 9,763,113 2 Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 its behalf . . . . . . . . . . . . . The value of services or facilities furnished by a governmental unit to the 0 organization without charge . . . O 0 4,471,568 1,621,356 1,047,542 1,715,734 9,763,113 Total. Add lines 1 through 3 . . . . 906,913 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) 2,323,500 Public support. Subtract line 5 from line 4. 7,439,613 Section B. Total Support (d) 2008 (e) 2009 Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (f) Total 7 1,621,356 906,913 1,047,542 1,715,734 4,471,568 9,763,113 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 136.883 225,421 281,195 222,502 195,902 1,061,903 sources . . 9 Net income from unrelated business activities, whether or not the business is 0 regularly carried on . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 10,825,016 11 Total support. Add lines 7 through 10. 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 68.73% Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . 14 15 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 . . .**⊳** |X| 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 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% 17a 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. 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.

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

Page 3

Part III

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

0	(Complete only if you checked the	ne box on line	9 of Part I.)				<del></del>
	tion A. Public Support	4.3.0005	(L) 2006	(-) 2007	(4) 2000	(=) 2000 T	/D T-4-1
Care	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and				,	İ	
	membership fees received (Do not						
	include any "unusual grants.")	0	0				0
2	Gross receipts from admissions, merchandise	i		ľ			
_	sold or services performed, or facilities furnished	1					
	in any activity that is related to the	1					
	organization's tax-exempt purpose	ol	o				0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's		•				
	benefit and either paid to or expended on						
	its behalf	0	0				0
5	The value of services or facilities						
	furnished by a governmental unit to the	i					
	organization without charge	0	0				0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3	j				ļ	
	received from disqualified persons						. 0
ь	Amounts included on lines 2 and 3 received						
U	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from					<u>_</u>	
							0
Sec	line 6.)					<u>-</u>	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,				İ		
	rents, royalties and income from similar						0
h	Sources		<del></del>				<u>-</u>
U	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
c	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
•	activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0	0				0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	0	0	0	0]	0	0
14	First five years. If the Form 990 is for the org	janization's firs	t, second, third	d, fourth, or fifth	n tax year as a	section 501(c)	(3)
	organization, check this box and stop here						▶ [
Sec	tion C. Computation of Public Support	Percentage					•
15	Public support percentage for 2009 (line 8, co		d by line 13. c	olumn (f))		15	0 00%
16	Public support percentage from 2008 Schedu			(,,,		16	0 00%
	tion D. Computation of Investment Inco				• • •	_ · <del>-</del>	2 00 70
	Investment income percentage for 2009 (line			e 13. column /	0)	17	0.00%
17 40						18	0.00%
18	Investment income percentage from 2008 Sc			ing 14 and lin			
ıya	33 1/3% support tests—2009. If the organiza						1/18
	not more than 33 1/3%, check this box and st						· .►
Þ	33 1/3% support tests-2008. If the organization d						, r
	line 18 is not more than 33 1/3%, check this box ar						· 🏲 📙
20	Private foundation. If the organization did no	ot check a box	on line 14, 19a	a, or 19b, checi	k this box and s	see instructions	s ▶ <u>L</u>

Schedule A (Form	990 or 990-EZ) 2009	Alamo Colleg	es Foundation,	Inc.			74-2422589	Page 4
Part IV	Supplemental	Information.	Complete this	part to	provide the explanat	tions required	by Part II, line	10;
·	Part II, line 17a	or 17b; and P	art III, line 12	Provide	e any other additiona	I information.	See instruction	S
				·				
					******			
		· <del></del>					,	-
						••••••		
			• • • • • • • • • • • • • • • • • • • •					

#### **SCHEDULE D** (Form 990)

## **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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► See separate instructions.

Inspection **Employer identification number** 

<u>A</u> lan	o Colleges Foundation, Inc.		74-2422589
Par	Organizations Maintaining Don	or Advised Funds or Other Similar	Funds or Accounts. Complete if
	the organization answered "Yes" t	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and o	lonor advisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subje	_	
6	Did the organization inform all grantees, do		<del></del>
•	used only for charitable purposes and not for		
	purpose conferring impermissible private be		Yes No
Par		olete if the organization answered "Ye	s" to Form 990 Part IV line 7
rai			
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e.g	, recreation or pleasure) Preservation	on of an historically important land area
	Protection of natural habitat	Preservation	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiz	ation held a qualified conservation contrib	oution in the form of a conservation
2	easement on the last day of the tax year.	ation field a qualified conservation contri-	duon in the form of a conscivation
	casement on the last day of the tax year.		Hold at the End of the Tay Year
_	Total number of conservation easements		Held at the End of the Tax Year . 2a
a		opposite	
b	Total acreage restricted by conservation ea		20
C	Number of conservation easements on a co		2d
d	Number of conservation easements include		
3	Number of conservation easements modifie	ed, transferred, released, extinguisned, or	terminated by the organization
	during the tax year		
4	Number of states where property subject to		
5	Does the organization have a written policy		
	violations, and enforcement of the conserva-		<u> </u>
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservat	ion easements during the year
	·		
7	Amount of expenses incurred in monitoring	, inspecting, and enforcing conservation $\epsilon$	easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported	d on line 2(d) above satisfy the requireme	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıi)?		Yes No
9	In Part XIV, describe how the organization	•	·
	balance sheet, and include, if applicable, th	e text of the footnote to the organization's	financial statements that describes
	the organization's accounting for conservat		
Par		ons of Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answere	ed "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted un-	der SFAS 116, not to report in its revenue	statement and balance sheet works of
	art, historical treasures, or other similar ass		
	service, provide, in Part XIV, the text of the		
b	If the organization elected, as permitted un-		
	historical treasures, or other similar assets		search in furtherance of public
	service, provide the following amounts relate	ing to these items:	
	(i) Revenues included in Form 990, Part VI	II, line 1	▶ \$
	<ul><li>(i) Revenues included in Form 990, Part VI</li><li>(ii) Assets included in Form 990, Part X</li></ul>		> \$
2	If the organization received or held works o		
-	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, I		<b>▶ \$</b>
b	Assets included in Form 990, Part X		<b>▶</b> \$
U	Assets included in Follingso, Fait A	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

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Part	III Organizations Maintaining	g Collections of	Art, His	torical 1	reasures	, or Ot	<u>her Similar A</u>	ssets (c	ontını	ıed)
3	Using the organization's acquisition use of its collection items (check all	, accession, and o								
а	Public exhibition	triat apply).	d [	Loan	or exchang	e progr	ams			
_	<b>=</b>		· -  =	Other						
b	Scholarly research		е	Other						
С	Preservation for future general									
4	Provide a description of the organiz Part XIV.				-				ose in	
5	During the year, did the organization assets to be sold to raise funds rath	er than to be main	itained a	s part of t	he organiz	ation's	collection?	Y	es 🗌	No
Part	IV, line 9, or reported an ar	mount on Form 9	90, Par	X, line	21				0, Par	t 
1a	Is the organization an agent, trustee			-			ther assets no			
b	included on Form 990, Part X? If "Yes," explain the arrangement in					• •	• •	Y	es	No
U	ii res, explain the arrangement in	Tall XIV and com	picte the	ionown ig	, table.		Ţ	Amount		
С	Beginning balance					. 10				0
d	Additions during the year .					10	I I			
е	Distributions during the year					. 1e				
f	Ending balance					<u>1f</u>	·		·	0
2a	Did the organization include an amo	ount on Form 990,	Part X, I	ne 21? .				Y	es X	No
b	If "Yes," explain the arrangement in		•							•
Part			zation a	nswere	d "Yes" to	Form 9	990, Part IV, I	ne 10.		
		(a) Current year	( <b>b</b> ) Pa	or year	(c) Two yea	ars back	(d) Three years ba	ck (e) Fo	our years	back
1a	Beginning of year balance	5,498,779	5	,007,954						
b	Contributions	3,267,320		490,825						
C	Net investment earnings, gains,						·			
	and losses									
d	Grants or scholarships									
е	Other expenditures for facilities							ŀ		
	and programs									
f	Administrative expenses									
g	End of year balance	8,766,099	5	498,779						
2	Provide the estimated percentage of	of the year end bala	ance held	l as						
а	Board designated or quasi-endowm	ent 🕨	%							
b	Permanent endowment	100%								
C	Term endowment	_%_								
3a	Are there endowment funds not in the	he possession of t	he organ	ızatıon th	at are held	and ad	lministered for t	he		
	organization by							<u> </u>	Yes	No
	(-)							3a(i)		Х
	(ii) related organizations							3a(ii)		Х
b	If "Yes" to 3a(ii), are the related orga							3b		
4	Describe in Part XIV the intended u					- 4 3/ 1	- 40			
Part						1				
	Description of investment	(a) Cost or oth			st or other s (other)	1 ''	Accumulated epreciation	(d) B	ook valu	e 
1a	Land		0		0	<del></del>				0
b	Buildings		0		0	<del>}</del>	0			0
C	Leasehold improvements		0		0		0			0
d	Equipment		0		0	<del>                                     </del>	0			0
<u>e</u>	Other		0		0	<u> </u>	0			0
Total	. Add lines 1a through 1e (Column (	d) must equal Fon	m 990, P	art X, col	umn (B), lii	ne 10(c)	).) ▶			0

organization's liability for uncertain tax positions under FIN 48.

Part VII	Investments—Other Securities	s. See Form 990, Part X,	line 12.	
(	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
Financial d	lerivatives	0		
	ld equity interests	0		
O11	· ·	0		
		0		
		0		
		0		
		0		·· <del>·</del>
		0		
		0		
		0		
		0		·········
		0		
	(b) must equal Form 990, Part X, col (B) line 12)	0	<u> </u>	
Part VIII	Investments—Program Relate	<b>d.</b> See Form 990, Part X,	line 13	
	(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
		0		
		0		
		0		
		0		
		0		
		0		<del></del>
		0		· · · · · · · · · · · · · · · · · · ·
		0		
		0	,	
		0		
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)	<u> </u>	4	
Part IX	Other Assets. See Form 990, P	art X, line 15.		,
		a) Description		(b) Book value
				<u> </u>
				<u> </u>
				ļ <u>C</u>
				ļ <u>C</u>
				<u> </u>
	<u> </u>		<del></del>	
		(5) (-45)		<u></u>
	lumn (b) must equal Form 990, Part X,		<u></u>	] 0
Part X	Other Liabilities. See Form 990		<del></del>	
1.	(a) Description of liability	(b) Amount		
Federal inc	come taxes		_0	
	<u> </u>		_0	
			_0	
			0	
	<del></del>		_0	
	<del> </del>		_0	
		<del></del>	<u>0</u>	
<del></del> .	<del></del>		_0	
			_0	
<del></del>			_0	
			_0	
	(b) must equal Form 990, Part X, col (B) line 25)		0	
2 FIN 48 F	Footnote In Part XIV provide the text o	f the footnote to the organiz	ation's financial statements that	reports the

Schedule D (Form 990) 2009 Page **4** 

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financia	State	ments
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,920,188
2	Total expenses (Form 990, Part IX, column (A), line 25) .	2	953,324
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	3,966,864
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.	10	3,966,864
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per F	leturn
1	Total revenue, gains, and other support per audited financial statements	1	4,920,188
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
đ	Other (Describe in Part XIV.)	]	
е	Add lines 2a through 2d	_26	0
3	Subtract line 2e from line 1	3	4,920,188
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV )		_
C	Add lines 4a and 4b	40	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1 .10001100
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es pe	Return
1	Total expenses and losses per audited financial statements	1	953,324
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		1
С	Other losses		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	20	<del></del>
3	Subtract line 2e from line 1	3	953,324
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV )		
C	Add lines 4a and 4b	. 40	; 0
_5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	953,324
Par	t XIV Supplemental Information		
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2b; Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and part to provide any additional information		
			•••••

Alamo Colleges Foundation, Inc.

74-2422589

Schedule D (Form		Page 3
Part XIV	Supplemental Information (continued)	
		- <i></i>
		<b></b>
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	***************************************	

# SCHEDULE 1 (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

OMB No 1545-0047

Open to Public

► Attach to Form 990.

74-2422589

Employer identification number

**ջ** □ (h) Purpose of grant or assistance X Yes 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 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to . . . . . . . . Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ō 0 (e) Amount of non-cash assistance (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed. Enter total number of section 501(c)(3) and government organizations. the selection cnteria used to award the grants or assistance?. General Information on Grants and Assistance (c) IRC section if applicable (b) EIN 1 (a) Name and address of organization Alamo Colleges Foundation, Inc. or government Part i Part II

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. . Enter total number of other organizations

Schedule I (Form 990) 2009

Page 2

Schedule I (Form 990) 2009

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) 0 Ö 0 0 0 (d) Amount of non-cash assistance 914,599 0 Ö 0 0 Use Part IV and Schedule I-1 (Form 990) if additional space is needed (c) Amount of cash grant 734 0 0 Ŏ 0 0 (b) Number of recipients (a) Type of grant or assistance Scholarships and educational support Part IV Part III

Schedule I (Form 990) 2009

#### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

2009

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Inspection
Employer identification number

Alamo Colleges Foundation, Inc.	74-2422589
Form 990 Part VI Section B Line 11a The finance committee of the board of directors	reviewed and
approved the Form 990 before signing and filing.	
Form 990 Part VI Section B Line 12c The board's secretary accumulates annual confl	ict-of-interest
responses and reports any potential issues to the full board.	
Form 990 Part VI Section C Line 19 The Organization makes its governing documents	s, conflict of
interest policy, and financial statements available to the public on its own website or u	pon
request	
······································	
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