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# Form 990-PF

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009

Treated às à Private Foundation Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending G Check all that apply Initial return Initial Return of a former public charity Final return X Amended return Address change Name change Employer identification number Use the SAN ANGELO HEALTH FOUNDATION IRS label. 75-1315145 Otherwise, P. O. BOX 3550 Telephone number (see the instructions) print SAN ANGELO, TX 76902 325-486-0185 or type. See Specific C If exemption application is pending, check here. Instructions 1 Foreign organizations, check here . . . 2 Foreign organizations meeting the 85% test, check Check type of organization: X Section 501(c)(3) exempt private foundation here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year J Accounting method: Cash under section 507(b)(1)(A), check here. . (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ► Ś 53,089,599 (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Ra社 Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see the instructions).) Contributions, gifts, grants, etc, received (att sch). **神理調整器 5** Ck ► X if the foundn is **not** req to att Sch B Interest on savings and temporary ,171 1,171 cash investments Dividends and interest from securities... 297 062,915 5a Gross rents. b Net rental income or (loss) -1,593,911. 6a Net gain/(loss) from sale of assets not on line 10. REVENUE SCALMED JUL 28 2011 **b** Gross sales price for all assets on line 6a . . 5,888,296. Capital gain net income (from Part IV, line 2) . . 0. Net short-term capital gain . . Income modifications..... 10a Gross sales less returns and allowances . . . b Less Cost of goods sold. . . . c Gross profit/(loss) (att sch) . . . 11 Other income (attach schedule). SEE STATEMENT 1 258,295 150,501 Total. Add lines 1 through 11 333,148. 214,587. 12 0 13 Compensation of officers, directors, trustees, etc. 500. 998. 121,503. 1,462 48,938. Other employee salaries and wages . . . 50,400. 25,159 15 Pension plans, employee benefits 1,714 23,445 BECEIVED 16 a Legal fees (attach schedule) 31,220 **b** Accounting fees (attach sch) SEE ST 2 15,540 15,540 c Other prof fees (attach sch). اهّا Ö **17** Interest . . Ś Taxes (attach schedule)(see instr.) . SEE STM . 3 9,216 9,216 ΤÇ Depreciation (attach とうこうにころ 134,442 9,102 sch) and depletion . . . . Occupancy. . . . . . 21.7611.482 N Ý 20,278. Travel, conferences, and meetings Printing and publications 4,481 4,481 Other expenses (attach schedule) SEE STATEMENT 4 327,619. 271,152 71,474. Total operating and administrative expenses. Add lines 13 through 23 736,798 320,666. 305,659 2,025,477 Contributions, gifts, grants paid PART XV 4 7 B 2,628,128 Total expenses and disbursements. Add lines 24 and 25 2,762,275 320,666 0 2,933,787 Subtract line 26 from line 12: a Excess of revenue over expenses -4,095,423 and disbursements.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions,

**b** Net investment income (if negative, enter -0-). C Adjusted net income (if negative, enter -0-)

TEEA0504L 02/02/10

893,921.

Form 990-PF (2009)

Form	, 990-F	PF (2009) SAN ANGELO HEALTH FOUNDATION		75-1	1315	5145 Page 2
		Attached sehadulas and amounts in the description	Beginning of year		d of	
Ranti	IIS I	Balance Sheets (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash – non-interest-bearing	300.	20	0.	200.
	2	Savings and temporary cash investments	135,559.	178,91	5.	178,915.
	3	Accounts receivable				
ł		Less. allowance for doubtful accounts ▶				
	4	Pledges receivable				
		Less: allowance for doubtful accounts ▶				
ł	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions).				
	7	Other notes and loans receivable (attach sch) .				
A	•	Less allowance for doubtful accounts				
A S E T	8	Inventories for sale or use				
Ĕ	_	Prepaid expenses and deferred charges	76,765.	21,12	4	21,124.
S		Investments — U.S. and state government	1.07.100.1			
		obligations (attach schedule)				
		Investments — corporate stock (attach schedule)				···
		: Investments — corporate bonds (attach schedule)				
i	11	Investments — land, buildings, and equipment: basis — 751,892.	Marin Salah S	1 1 1 PC	2	
		Less: accumulated depreciation (attach schedule) SEE .STMT 5.	751,892.	751,89	2.	751,892.
	12	Investments – mortgage loans				
	13	Investments — other (attach schedule)	52,090,080.	47,562,94	1.	46,276,137.
	14	Land, buildings, and equipment: basis. ►5,395,319.				
		Less: accumulated depreciation	4 400 601	4 200 10	.	F 0.C1 331
		(attach schedule) . SEE .STMT 6 ► 1,127,159.	4,402,601. -12,590,300.	4,268,16 -1,286,80		5,861,331.
		Other assets (describe SEE STATEMENT 7)  Total assets (to be completed by all filers)	-12,590,500.	-1,200,00	3.	
	10	see instructions Also, see page 1, item I)	44,866,897.	51,496,42	-	53,089,599.
Ļ	17	Accounts payable and accrued expenses	107,766.	131,87		
Å	18	Grants payable	2,157,978.	1,555,32	5.	
В	19	Deferred revenue				
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons				
Ļ	21	Mortgages and other notes payable (attach schedule)	7 265	1 20		
<u>i</u>	22	Other liabilities (describe ► SEE STATEMENT 8)	1,365.	1,36	·/·	
E S	23	Total liabilities (add lines 17 through 22)	2,267,109.	1,688,56	8.	
		Foundations that follow SFAS 117, check here X and complete lines 24 through 26 and lines 30 and 31.	4			
		and complete lines 24 through 26 and lines 30 and 31.				
NE	24	Unrestricted	42,040,675.	49,549,73		
ËÜ	25	Temporarily restricted	559,113.	258,12	23.	
D	26	Permanently restricted				
S B S A E L		Foundations that do not follow SFAS 117, check here ► and complete lines 27 through 31.	4	<u> </u>		
E L T A S N	27	Capital stock, trust principal, or current funds				
SN	28	Paid-in or capital surplus, or land, building, and equipment fund .				
OE	29	Retained earnings, accumulated income, endowment, or other funds				
RS	30	•	42,599,788.	49,807,80	51.	
	31	Total liabilities and net assets/fund balances (see the instructions).	44,866,897.	51,496,42	29.	أعلام مرور في مردة ويسيد ويواند مدين في معالية
Par	All¥	Analysis of Changes in Net Assets or Fund Balan	ces			
1	Tota	al net assets or fund balances at beginning of year - Part II, co	lumn (a), line 30 (must a	agree with		
	end	-of-year figure reported on prior year's return)		· · · · · · · · · · · · · · · · · · ·	1	42,599,788.
		er amount from Part I, line 27a		· [	2	-4,095,423.
3		r increases not included in line 2 (itemize)	<u>-9</u>		3_	11,303,496.
4	Add	I lines 1, 2, and 3	•		4	49,807,861.

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

5

6

	(a) List and describe 2-story brick warehous	the kind(s) of property sold (e.g., re; or common stock, 200 shares ML	eai estate, .C Company)	(b) How acq P — Purch D — Donat	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, yea
la SEE STATEMENT 10							
b							
С							
d							
e				<u>.                                    </u>			
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale					(h) Gain or (e) plus (f) m	
<u>a</u>							
<u>b</u>							
c		<u> </u>					
d							
e	Complete only for accets chays	Ing gain in column (h) and owned by	the foundation on 12/31/6			40.0	
	(i) Fair Market Value as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	n (i)	ga tha	(I) Gains (Coli ain minus column (I in -0-) or Losses (fi	(), but not less
a b							
C							
d							
e e					-		
		If noin also	enter in Part I, line 7				
2	Capital gain net income or (net	t capital loss).	iter -0- in Part I, line 7	-	2	-	1,593,91
3	Net short-term capital gain or (	(loss) as defined in sections 1222(5)	and (6):	İ			· <del></del>
	• •	e 8, column (c) (see the instructions	_				
	ir gain, aiso enter in Part i, inte in Part I, line 8	e 8, column (c) (see the instructions	). II (1055), elitel -0-		3		
			<u> </u>				
and or o	optional use by domestic privation 4940(d)(2) applies, leave t	·	4940(a) tax on net investm	ent income	:.)	N/A	□No
and or consect as the	optional use by domestic private tion 4940(d)(2) applies, leave t the foundation liable for the sec s,' the foundation does not qua	e foundations subject to the section	4940(a) tax on net investment of any year in the batter this part.	nent income ase period?	)		☐ No
and or co sec as t 'Ye:	optional use by domestic private tion 4940(d)(2) applies, leave t the foundation liable for the sec s,' the foundation does not qua	e foundations subject to the section this part blank. ction 4942 tax on the distributable at lify under section 4940(e). Do not co	4940(a) tax on net investment of any year in the batter this part.	nent income use period? ng any entr	i.)		n ratio
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2 3 4 5 6	potional use by domestic private tion 4940(d)(2) applies, leave to the foundation liable for the section, the foundation does not quate the appropriate amount (a)  Base period years Calendar year (or tax year beginning in)  2008 2007 2006 2005 2004  Total of line 1, column (d).  Average distribution ratio for to number of years the foundation.  Enter the net value of nonchair Multiply line 4 by line 3  Enter 1% of net investment in	this part blank.  Stion 4942 tax on the distributable and lify under section 4940(e). Do not come each column for each year; see to the section 4940(e) and the section and th	mount of any year in the batter mount of any year in the batter this part.  The instructions before make the instruction before make the instruction before make the instruction before make t	nent income ase period? ang any entr	(col	Yes  (d) Distributio	n ratio

	990-PF (2009) SAN ANGELO HEALTH FOUNDATION 75-1315145		Page 4
anta	划嫌器 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructi	ons)	
[	Exempt operating foundations described in section 4940(d)(2), check here.   and enter 'N/A' on line 1.  and enter 'N/A' on line 1.  (attach copy of letter if necessary - see instr.)	1.5	
	Domestic foundations that meet the section 4940(e) requirements in Part V,		,878.
	check here   and enter 1% of Part I, line 27b		
c A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b).		
2 -	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable	<u> </u>	
1	oundations only. Others enter -0-)		0.
3 /	Add lines 1 and 2	17	7,878.
4 9	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	17	7,878.
6 (	Credits/Payments Credits/Payments		
	2009 estimated tax pmts and 2008 overpayment credited to 2009		
	Exempt foreign organizations — tax withheld at source		
	Tax paid with application for extension of time to file (Form 8868).	a seman.	
	Backup withholding erroneously withheld	11/1	<b>发展</b>
	Total credits and payments. Add lines 6a through 6d	in a constant	0.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached.		535.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE .STATEMENT . 11	20	0,318.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		2,0201
	Enter the amount of line 10 to be: Credited to 2010 estimated tax Refunded 11		
	WIFAS Statements Regarding Activities		
		Y	es No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b	Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
d	Did the foundation file Form 1120-POL for this year?	1c	X
	foundation managers. > \$ 0.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
	If 'Yes,' attach a detailed description of the activities.		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
	If 'Yes,' attach the statement required by General Instruction T.	ç ,	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
	● By language in the governing instrument, or		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions).  TX		
t	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b	Х
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10	х

Form **990-PF** (2009)

BAA

Forn	n 990-PF (2009) SAN ANGELO HEALTH FOUNDATION	75-131514	5	Page 5
	Statements Regarding Activities Continued			. ugo
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11	х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exempti	on application?	13	Х
14	Website address ► SAHFOUNDATION.ORG  The books are in care of ► OLIVER BAINEY & WOLTEK		042	
14	The books are in care of ► OLIVER, RAINEY, & WOJTEK  Located at ► 2909 SHERWOOD WAY STE 300 SAN ANGELO TX  ZIP + 4		342	5/13
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check her	e	.N/A	. •
	and enter the amount of tax-exempt interest received or accrued during the year .	. 15		N/A
Har	Statements Regarding Activities for Which Form 4720 May Be Required		f1	v. I w
•	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes No
16	a During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	. Yes XNo		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.).	Yes X No		
	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruc	.n ctions)?	1 b	N/A
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted act that were not corrected before the first day of the tax year beginning in 2009?	:s,	1c	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	. Yes XNo		
	If 'Yes,' list the years ► 20 , 20 , 20			
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 494 all years listed, answer 'No' and attach statement — see the instructions.)	42(a)(2) to	2 b	N/A
	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the year			
	► 20 , 20 , 20			
3	Ba Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No		:
	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period appropriate by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, of (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	oved or	3b	N/A
4	4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	
	<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b	Х

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Form **990-PF** (2009)

Form 990-PF (2009) SAN ANGELO HEALTH	FOUNDATION		75-131	5145 Page <b>6</b>
Part VILB Statements Regarding Activities	es for Which Form	4720 May Be Requ	uired (continued)	
5a During the year did the foundation pay or incur	-			
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	Yes X	No la
(2) Influence the outcome of any specific publ	ic election (see section			
on, directly or indirectly, any voter registra  (3) Provide a grant to an individual for travel,			Yes X	13
•	•	•	tes A	NO ESTABLISHED
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instru	ganization described ictions)	Yes X	No la
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?	. Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to da current notice regard	ling disaster assistance	ions	5b N/A
Organizations relying on a current notice regains	rding disaster assistanc	e check here	▶ 🗍	
c If the answer is 'Yes' to question 5a(4), does t	he foundation claim ex	emption from the	_	
tax because it maintained expenditure responsi If 'Yes,' attach the statement required by Regu	sibility for the grant?	· · · · · · · · · · · · · · · · · · ·	. N/A Yes	No
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premiums	Yes X	No Maria
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal benef	fit contract?	6b X
If 'Yes' to 6b, file Form 8870.	lakaa a sa da ka sa			
7a At any time during the tax year, was the found				
b If yes, did the foundation receive any proceed: Part VIII Information About Officers, D				7b N/A
and Contractors		1 odnadion manag	jers, riigiliy raid L	inployees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 12			compensation	
<u> </u>				
		132,500.	9,275.	0.
	<b>{</b>			[
2 Compensation of five highest-paid employed	es (other than those in	cluded on line 1— see in	nstructions). If none, e	nter 'NONE.'
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	ļ	employee benefit plans and deferred	other allowances
			compensation	
VICKI FORD P.O. BOX 3550	ADMIN OFFICER			
SAN ANGELO, TX 76902	ADMIN OFFICER	50,400.	3,528.	0.
	]			
			<u> </u>	<del>                                     </del>
	1			
	1			
Total number of other employees paid over \$50,00	10	<del></del>		<del>                                     </del>
BAA	TEEA0306L	07/06/09		Form <b>990-PF</b> (2009

orm 990-PF (2009) SAN ANGELO HEALTH FOUNDATION	75-131	5145 Page
Rantivilla Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services enter NONE.	s — (see instructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
RUSSELL INVESTMENTS		
909 A STREET		
TACOMA, WA 98402	INVESTMENT FEES	224,259
Total number of others receiving over \$50,000 for professional services		
RaitiXA Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevan organizations and other beneficiaries served, conferences convened, research papers produced,	etc.	Expenses
1 <u>N/A</u>		
2		<del></del>
3		
4		
Ranix Bi Summary of Program-Related Investments (see	instructions	
		Amount
Describe the two largest program-related investments made by the found  1 N/A		Amount
2		
All other program-related investments. See instructions		

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Form **990-PF** (2009)

	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes.  Average monthly fair market value of securities	1 a	40,914,902.
	Average of monthly cash balances	1b	142,794.
	Fair market value of all other assets (see instructions)	1c	6,803,916.
	Total (add lines 1a, b, and c)	1 d	47,861,612.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	47,861,612.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	717,924.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	47,143,688.
6	Minimum investment return. Enter 5% of line 5.	6	2,357,184.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► ☐ and do not complete this pa		foundations
1	Minimum investment return from Part X, line 6	1 1	2,357,184.
•	Tax on investment income for 2009 from Part VI, line 5		2,337,104.
	Income tax for 2009. (This does not include the tax from Part VI.).		
	Add lines 2a and 2b	2c	17,878.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,339,306.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,339,306.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,339,306.
	Qualifying Distributions (see instructions)		
IF G	dualitying distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	2,933,787.
	b Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
	<b>b</b> Cash distribution test (attach the required schedule)	3 b	-
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	2,933,787.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.  Enter 1% of Part I, line 27b (see instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,933,787.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the	e foundation
	qualifies for the section 4940(e) reduction of tax in those years		

# Pari XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7		-		2,339,306.
2 Undistributed income, if any, as of the end of 2009: a Enter amount for 2008 only			1,040,973.	
b Total for prior years: 20, 20, 20, 20, 20, 20, a From 2004		0.	<u> </u>	
<b>b</b> From 2005	0.			
f Total of lines 3a through e.  4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 2,933,787.  a Applied to 2008, but not more than line 2a	0.		1,040,973.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions).		0.		
c Treated as distributions out of corpus (Election required — see instructions).	0.		en e	1,892,814.
d Applied to 2009 distributable amount  e Remaining amount distributed out of corpus	0.			1,892,814.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.	1		
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010			and the second s	446,492.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2005 b Excess from 2006				
c Excess from 2007				
d Excess from 2008.				
e Excess from 2009				

Part XIV Private Operating Foundatio		tions and Part \	/II-A guestion 9	/5-1315145	N/A
1 a If the foundation has received a ruling or de	etermination letter			<del> </del>	147 71
is effective for 2009, enter the date of the r	=			□ 4042(\\2\ os	4040()(5)
<b>b</b> Check box to indicate whether the foundation <b>2a</b> Enter the lesser of the adjusted net	Tax year	rating foundation o	Prior 3 years	4942(j)(3) or	4942(j)(5)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	<b>(d)</b> 2006	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter:				 	
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		<u> </u>	<u> </u>		
Rank XV Supplementary Information	(Complete this	part only if the	organization ha	ad \$5,000 or mo	re in
assets at any time during th		structions.)	<del> </del>		
1 Information Regarding Foundation Managa List any managers of the foundation who is	nave contributed m	ore than 2% of the	total contributions i	eceived by the foun	idation before the
close of any tax year (but only if they have NONE	e contributed more	than \$5,000). (See	e section 507(d)(2))	•	
<b>b</b> List any managers of the foundation who	own 10% or more o	of the stock of a co	rporation (or an equ	ally large portion of	the ownership of
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater inter	rest.		
2 Information Regarding Contribution, Gra	nt. Gift. Loan. Scho	olarship, etc. Progr	rams:		
Check here \( \bigcup \) if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions	s to preselected ch	arıtable organızatıor	is and does not acc janizations under ot	ept unsolicited her conditions,
a The name, address, and telephone number	er of the person to	whom applications	should be addresse	ed:	
	·	, ,			
SEE STATEMENT 13					
<b>b</b> The form in which applications should be	submitted and info	rmation and mater	ials they should incl	ude:	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines.					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charit	table fields, kinds of	institutions, or other	r factors
SEE STATEMENT FOR LINE 2A	· · · · · · · · · · · · · · · · · · ·				······································
DAA	-	EE 403101 07/06/00	<del>-</del>		Form 990 PF (2009)

3 Grants and Contributions Paid During th	f rear or Approved for Fut	uie rayment		<u> </u>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 14		1		
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			<u> </u>	
Total	<u> </u>		▶ 3	a 2,628,128
<b>b</b> Approved for future payment		}		
SEE STATEMENT 15				
		1		
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Total				<b>вы</b> 927,675
Total	TEAGEOU	07/06/09		Form <b>990-PF</b> (200
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### Rank MIA Analysis of Income-Producing Activities

Enter	gross amounts unless otherwise indicated.	Unrelate	d business income	Excluded b	y section 512, 513, or 514		
1 F	Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (see the instructions)	
а							
b							
c -						· <u> </u>	
ď							
e							
f							
g l	Fees and contracts from government agencies						
2	Membership dues and assessments .						
3 1	Interest on savings and temporary cash investments			14	1,171.		
4	Dividends and interest from securities .			14	1,297.		
5 (	Net rental income or (loss) from real estate:		and the second second second second				
a i	Debt-financed property						
ы	Not debt-financed property .						
6	Net rental income or (loss) from personal property.						
7	Other investment income					_	
8	Gain or (loss) from sales of assets other than inventory			14	-1,593,911.		
9	Net income or (loss) from special events .						
10	Gross profit or (loss) from sales of inventory				-		
11	Other revenue.						
a	FACILITY USAGE FEES			3	1,125.		
b	OIL AND GAS INCOME			15	149,376.		
c	SECURITIES SETTLEMENTS			14	107,794.		
ď							
e							
12	Subtotal. Add columns (b), (d), and (e) .				-1,333,148.		
13	Total. Add line 12, columns (b), (d), and (e)	•			13	-1,333,148	
(See	worksheet in the instructions for line 13 to verify	calculations.)					

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.)
N/A	
·-	
	}
	1

# Part Ville Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	describ relating a Transfe (1) Ca: (2) Other to (1) Sa (2) Pu (3) Re (4) Re (5) Lo: (6) Pe c Sharing diff the action and the good at the g	ped in section 50 g to political orgers from the repshore assets transactions: les of assets to rchases of asset ntal of facilities imbursement arians or loan guarformance of seg of facilities, enaswer to any orgods other assets	a noncharitable e ets from a nonchar , equipment, or ot rrangements irantees ervices or member quipment, mailing f the above is 'Yes	to a noncharitate  xempt organizate  itable exempt oner assets  ship or fundrary  lists, other assets  s,' complete the	ation 501(c)(3) organization  ation  organization  sing solicitations  sets, or paid emple following sched	ganizations) nization of	or in section 5	27,	1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1c (6) 1c	X X X X X X X X
	any tra	insaction or sha	aring arrangement,	shów in colun	nn <b>(d)</b> the value o	f the goods	, other assets,	or services rece	eived	
(a)	Line no.	(b) Amount invo	olved (c) Nam	e of noncharitable	exempt organization	(d)	Description of tran	sfers, transactions,	and sharing arranger	nents
<u>1</u> /			<u> </u>					<del>"</del>		
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		-								
2	descri <b>b</b> If 'Yes	bed in section 5 s,' complete the	ctly or indirectly a 501(c) of the Code following schedul	(other than se e.	ction 501(c)(3)) c	or in section	527?			X No
		(a) Name of org	ganization	(b)	Type of organiza	tion	(	) Description of	relationship	
N,	<u>/A</u>				<del> </del>					
_										
	Under pena complete (	alties of perjury, I dec Declaration of prepare	clare that I have examine er (other than taxpayer o	ed this return, includ or fiduciary) is based	ling accompanying school on all information of v	edules and state which preparer I	ements, and to the b nas any knowledge			correct, and
s	<b>_</b>		lumo 1.	Lan)	1-11	/ 4	130/11	► PRESID	ENT	
G	Sign	ature of officer or trus			// 1/11/	Date	• (	Title	2	
N						/ Dat	e	Check if	Preparer's Identifying (See Signature in the	number
빔	Paid	Preparer's signature	יייט א ביאיר	EL, CPA	M/XVAL.71	eVI.	5/27/11	self-	P00183891	, ((13U3)
H E R	Pre-	<u> </u>			TER TIE	<u> </u>	1/21/11	employed		
-	parer's Use	Firm's name (or yours if self-			TEK, VLLP	<del>//                                   </del>		EIN ► /5-	2138464	
	Only	employed), address, and	2909 SHERWO		UITE 300		<del></del>	4		
		ZIP code	SAN ANGELO,	TX 76901	3558			Phone no	<u>325-942-67</u>	
-	A A								Eorm 990.	DE (2000)

2009	FEDERAL STATEMENTS	PAGE 1
CLIENT 486	SAN ANGELO HEALTH FOUNDATION	75-1315145
5/27/11		01:05PM
STATEMENT 1 FORM 990-PF, PART I, LIN OTHER INCOME		
1	(A) (B) NET REVENUE INVESTME) PER BOOKS INCOME	NT ADJUSTED
FACILITY USAGE FEES OIL AND GAS INCOME SECURITIES SETTLEMENT	TS	25. 76. 501.\$ 0.
STATEMENT 2 FORM 990-PF, PART I, LIN ACCOUNTING FEES	NE 16B	
ACCOUNTING FEES AUDIT AND TAX RETURN		TED CHARITABLE
STATEMENT 3 FORM 990-PF, PART I, LIN TAXES	NE 18	
PROPERTY TAXES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUS PER BOOKS INCOME NET IN  \$ 9,216. \$ 9,216.  TOTAL \$ 9,216. \$ 9,216.	TED CHARITABLE
STATEMENT 4 FORM 990-PF, PART I, LII OTHER EXPENSES	NE 23	
	(A) (B) NET EXPENSES INVESTMENT ADJU PER BOOKS INCOME NET IN	
CHRISTMAS LIGHTS DUES AND SUBSCRIPTIC EMPLOYEE HEALTH INSU INSURANCE INVESTMENT FEES	JRANCE 11,589. 785. 22,837. 11,419. 237,601. 224,259.	\$ 1,071. 10,804. 11,419.
INVESTMENT FEES FROM OFFICE EXPENSES OTHER EXPENSE POSTAGE REPAIRS AND MAINTENA SERVICE CONTRACTS	2,289. 156. 1,597. 109. 640. 44. ANCE . 4,635. 316.	2,133. 1,488. 596. 4,319. 2,882.

2009	FEDERAL STATEMENTS	PAGE 2
LIENT 486	SAN ANGELO HEALTH FOUNDATION	75-131514
STATEMENT 4 (CONTINU FORM 990-PF, PART I, LI OTHER EXPENSES	ED) NE 23	01:05PM
SMALL EQUIPMENT STAFF TRAVEL, MEETII TELEPHONE & WEB PAGI	34,673. \$ 2,362.	
,	BUILDINGS, AND EQUIPMENT  ACCUM. BOOK	FAIR MARKET
<u>CATEGORY</u> LAND	BASIS DEPREC. VALUE  \$ 751,892. \$ 751,892  TOTAL \$ 751,892. \$ 0. \$ 751,892	<u>VALUE</u> 2. \$ 751,892.
STATEMENT 6 FORM 990-PF, PART II, I LAND, BUILDINGS, AND	INE 14 EQUIPMENT	
CATEGORY	ACCUM. BOOK BASIS DEPREC, VALUE	FAIR MARKET VALUE
FURNITURE AND FIXTU MACHINERY AND EQUIP BUILDINGS LAND MISCELLANEOUS	MENT 40,930. 40,930. 4,469,156. 689,236. 3,779,92 466,646. 466,64	0. 0. 0. 0. 4,469,156. 6. 874,709. 0. 495,872.
STATEMENT 7 FORM 990-PF, PART II, OTHER ASSETS  UNREALIZED GAIN (LO		FAIR MARKET VALUE  \$ 0.

	FEDERAL STATEMENTS		PAGE 3
LIENT 48	SAN ANGELO HEALTH FOUNDATION		75-131514
/27/11		···	01:05PN
FORM	MENT 8 990-PF, PART II, LINE 22 LIABILITIES		
PENSIO ROUND	ON EXPENSE PAYABLE	\$	1,365. 2.
		TOTAL \$	1,367.
FORM OTHER	MENT 9 990-PF, PART III, LINE 3 NINCREASES LIZED GAIN ON INVESTMENT SECURITIES		., 303, 496. ., 303, 496.
FORM	MENT 10 990-PF, PART IV, LINE 1 AL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME (B) HOW	(C) DATE	(D) DATE
ITEM	(A) DESCRIPTION ACQUIRED 371.092 RAIF PLC DESIGNATED INV USD CLASS PURCHASED	ACOUIRED VARIOUS	SOLD 1/02/200
1 2	85,005.247 RUSSELL INSTL FDS LLC CORE BD FD ACCD		
3 4	PURCHASED 174.707 RAIF PLC DESIGNATED INV USD CLASS PURCHASED 2,857.437 RUSSELL INSTL FDS LLC LARGE CAP US EQUIT	VARIOUS VARIOUS	1/28/200 4/01/200
5	PURCHASED 791.514 RUSSELL INSTL FDS LLC SM CAP US EQUITY	VARIOUS	4/28/20
6	PURCHASED  104.603 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC	VARIOUS	4/28/20
_	PURCHASED  2,621.325 RUSSELL INSTL FDS LLC CORE BD FD ACCD	VARIOUS	4/28/20
7 8	339.188 RAIF PLC DESIGNATED INV USD CLASS PURCHASED	VARIOUS VARIOUS	4/28/20 5/01/20
9	235,379.112 RUSSELL INSTL FDS LLC QUANTITATIVE US EQ PURCHASED	VARIOUS	5/20/20
10	41,798.459 RUSSELL INSTL FDS LLC SM CAP US EQUITY PURCHASED	VARIOUS	5/20/20
11	153,905.313 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC PURCHASED	VARIOUS	5/20/20
	250.004 RUSSELL INSTL FDS LLC LARGE CAP US EQUIT PURCHASED	VARIOUS	6/24/20
12	1CE OOF DIRECTIT THEM TOO TIP OHANMITWATIVE HE TO		0/24/20
13	165.086 RUSSELL INSTL FDS LLC QUANTITATIVE US EQ PURCHASED	VARIOUS	
13 14	PURCHASED 54.044 RUSSELL INSTL FDS LLC SM CAP US EQUITY F PURCHASED	VARIOUS VARIOUS	6/25/20
13 14 15	PURCHASED 54.044 RUSSELL INSTL FDS LLC SM CAP US EQUITY F PURCHASED 192.254 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC PURCHASED		6/25/20 6/24/20
13 14 15 16	PURCHASED  54.044 RUSSELL INSTL FDS LLC SM CAP US EQUITY F  PURCHASED  192.254 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC  PURCHASED  154.02 RUSSELL INSTL FDS LLC CORE BD FD ACCD  PURCHASED	VARIOUS VARIOUS VARIOUS	6/25/20 6/24/20 6/24/20 6/24/20
13 14 15	PURCHASED 54.044 RUSSELL INSTL FDS LLC SM CAP US EQUITY F PURCHASED 192.254 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC PURCHASED 154.02 RUSSELL INSTL FDS LLC CORE BD FD ACCD	VARIOUS VARIOUS	6/25/20 6/24/20 6/24/20 6/24/20 7/01/20 7/28/20

2009	FEDERAL STATEMENTS				
CLIENT 4	86 SAN ANGELO HEALTH FOUNDATION	75-1315145			
5/27/11			01:05PN		
STATI FORM CAPIT	EMENT 10 (CONTINUED) 1990-PF, PART IV, LINE 1 TAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME				
	(B) HOW (A) DESCRIPTION ACQUIRED	(C) DATE ACOUIRED	(D) DATE		
<u>ITEM</u> 20	(A) DESCRIPTION ACQUIRED  2,105.859 RUSSELL INSTL FDS LLC SM CAP US EQUITY	ACQUIRED _	SOLD		
20	PURCHASED	VARIOUS	7/28/200		
21	199.971 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC PURCHASED	TARTOHC	7/20/200		
22	1,390.436 RUSSELL INSTL FDS LLC LARGE CAP US EQUIT	VARIOUS	7/28/200		
22	PURCHASED	VARIOUS	9/28/200		
23	623.385 RUSSELL INSTL FDS LLC SM CAP US EQUITY				
	PURCHASED	VARIOUS	9/28/200		
24	1,647.602 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC PURCHASED	VARIOUS	9/28/200		
25	12,039.771 RUSSELL INSTL FDS LLC LARGE CAP US EQUIT	VARIOUS	3/20/200		
23	PURCHASED	VARIOUS	10/28/200		
26	1,146.690 RUSSELL INSTL FDS LLC SM CAP US EQUITY				
	PURCHASED	VARIOUS	10/28/20		
27	10,037.504 RUSSELL INSTL FDS LLC INTL EQUITY FD ACC PURCHASED	VARIOUS	10/28/200		
28	303.631 RAIF PLC DESIGNATED INV USD CLASS PURCHASED	VARIOUS	10/01/20		
29	38,244.357 RUSSELL INSTL FDS LLC LARGE CAP US EQUIT				
	PURCHASED	VARIOUS	12/11/20		
30	16,928.581 RUSSELL INSTL FDS LLC QUANTITATIVE US EQ	UNDTOUG	10/11/00		
	PURCHASED  9 404 074 BUSSELL THSTLEDS LLC SM CAP US FOULTY	VARIOUS	12/11/20		

8,494.074 RUSSELL INSTL FDS LLC SM CAP US EQUITY

31

31	8,494.074	KOSSETF T	NSTL FDS LLC	SM CAP US	PURCH	ASED	VARIOUS	12/11/2009
32	16,371.819	RUSSELL	INSTL FDS L	LC INTL EQU				
				_	PURCH	ASED	VARIOUS	12/11/2009
	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
ITEM	<u>SALES</u>	_ALLOWED		(LOSS)	12/31/69	12/31/69	<u>(I)-(J)</u>	(LOSS)
1	290,365.		371,092.	-80,727.				\$ -80,727.
2 3	849,464.		860,052.	-10,588.				-10,588.
3	130,546.		174,707.	-44,161.				-44,161.
4	18,573.		26,894.	-8,321.				-8,321.
5	5,161.		7,575.	-2,414.				-2,414.
4 5 6 7	616.		924.	-308.				-308.
7	26,659.		26,213.	446.				446.
8 9	240,874.		339,188.	-98,314.				-98,314.
9	1664130.		2295716.	-631,586.				-631,586.
10	285,065.		400,038.	-114,973.				-114,973.
11	1032705.		1360028.	-327,323.				-327,323.
12	1,717.		2,274.	-557.				-557. -444.
13	1,166.		1,610.	-444.				
14	370.		517.	-147.				-147. -415.
15	1,284.		1,699.	-415.				78.
16	1,628.		1,550.	78.				-70,074.
17	186,833.		256,907.	-70,074. -5,791.				-5,791.
18	27,628.		33,419. 14,964.	-3,180.				-3,180.
19 20	11,784. 16,152.		20,154.	-4,002.				-4,002.
21	1,444.		1,767.	-323.				-323.
22	11,541.		12,648.					-1,107.
23	5,299.		5,966.	-667.				-667.
24	13,494.		14,558.					-1,064.
25	98,727.		109,516.	-10,789.				-10,789.
26	9,348.		10,975.					-1,627.
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09	FEDERAL STATEMENTS	PAGE
ENT 486 S	AN ANGELO HEALTH FOUNDATION	75-131514
7/11		01:05P
STATEMENT 10 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR	TAX ON INVESTMENT INCOME	
ITEM         SALES         ALLOWED           27         80,459.           28         182,264.         3           29         334,163.         3           30         148,114.         1           31         74,451.	COST GAIN FMV ADJ. BAS. EXC BASIS (LOSS) 12/31/69 12/31/69 (I)- 88,6928,233. 03,631121,367. 447,87613,713. 65,10016,986. 81,2946,843. 44,6638,391.	
STATEMENT 11 FORM 990-PF, PART VI, LINE 9 TAX DUE		
FORM 990-PF, PART VI, LINE 9	TOTAL	\$ 18,413. 1,162. 743. \$ 20,318.
FORM 990-PF, PART VI, LINE 9 TAX DUE TAX DUE LATE PAYMENT PENALTY LATE INTEREST  STATEMENT 12 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, T	TOTAL  TRUSTEES, AND KEY EMPLOYEES  TITLE AND AVERAGE HOURS  COMPEN- BUTION	1,162. 743. \$ 20,318.  CI- EXPENSE TO ACCOUNT/
FORM 990-PF, PART VI, LINE 9 TAX DUE TAX DUE LATE PAYMENT PENALTY LATE INTEREST  STATEMENT 12 FORM 990-PF, PART VIII, LINE 1	TOTAL  TRUSTEES, AND KEY EMPLOYEES  TITLE AND AVERAGE HOURS  COMPEN- BUTION	1,162. 743. \$ 20,318.  I - EXPENSE I TO ACCOUNT/ DC OTHER
FORM 990-PF, PART VI, LINE 9 TAX DUE  TAX DUE LATE PAYMENT PENALTY LATE INTEREST  STATEMENT 12 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, T  NAME AND ADDRESS F.L. STEPHENS P.O. BOX 3550	TOTAL  TRUSTEES, AND KEY EMPLOYEES  TITLE AND CONTR  AVERAGE HOURS COMPEN-BUTION PER WEEK DEVOTED SATION EBP &  ADVISOR TRUSTEE \$ 0.\$	1,162. 743. \$ 20,318.  EXPENSE TO ACCOUNT, DC OTHER  0. \$
FORM 990-PF, PART VI, LINE 9 TAX DUE  TAX DUE LATE PAYMENT PENALTY LATE INTEREST  STATEMENT 12 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, T  NAME AND ADDRESS F.L. STEPHENS P.O. BOX 3550 SAN ANGELO, TX 76902  MIKE BOYD P.O. BOX 3550	TOTAL  TRUSTEES, AND KEY EMPLOYEES  TITLE AND AVERAGE HOURS COMPEN- PER WEEK DEVOTED SATION EBP &  ADVISOR TRUSTEE \$ 0. \$ 2.00  SECRETARY 0.	1,162. 743. \$ 20,318.  I - EXPENSE I TO ACCOUNT/ OCHER  0. \$
FORM 990-PF, PART VI, LINE 9 TAX DUE TAX DUE LATE PAYMENT PENALTY LATE INTEREST  STATEMENT 12 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, T  NAME AND ADDRESS F.L. STEPHENS P.O. BOX 3550 SAN ANGELO, TX 76902  MIKE BOYD P.O. BOX 3550 SAN ANGELO, TX 76902  KAREN PFLUGER P.O. BOX 3550	TOTAL  TRUSTEES, AND KEY EMPLOYEES  TITLE AND AVERAGE HOURS COMPEN- PER WEEK DEVOTED SATION EBP &  ADVISOR TRUSTEE \$ 0. \$ 2.00  SECRETARY 0. TRUSTEE 0.	1,162. 743. \$ 20,318.  ITO ACCOUNT/ DC OTHER  0. \$

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# **FEDERAL STATEMENTS**

PAGE 6

CLIENT 486

#### SAN ANGELO HEALTH FOUNDATION

**75-1315145** 01:05PM

STATEMENT 12 (CONTINUED)	
FORM 990-PF, PART VIII, LINE 1	
LIST OF OFFICERS, DIRECTOR	S, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
O. STERLING GILLIS, M.D. P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00		\$ 0.	
SANDE VINCENT HARRISON P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
DEVIN BATES P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
JOHN MARK MCLAUGHLIN P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISOR TRUSTEE 2.00	0.	0.	0.
T. RICHEY OLIVER, CPA P.O. BOX 3550 SAN ANGELO, TX 76902	CHAIRMAN 4.00	0.	0.	0.
JAMES P. CUMMINGS P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
MARILYN ABOUSSIE PO BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
HUGH LAMAR STONE III P.O. BOX 3550 SAN ANGELO, TX 76902	TREASURER 4.00	0.	0.	0.
JOANNE RICE PO BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
ROBERT S. PATYRAK, M.D. P.O. BOX 3550 SAN ANGELO, TX 76902	VICE CHAIRMAN 4.00	0.	0.	0.
RICK DEHOYOS, ATTY P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
TOM EARLY P.O. BOX 3550 SAN ANGELO, TX 76902	PRESIDENT 40.00	132,500.	9,275.	0.
	TOTA	L <u>\$ 132,500</u> .	\$ 9,275.	\$ 0.

2009

#### **FEDERAL STATEMENTS**

PAGE 7

**CLIENT 486** 

#### SAN ANGELO HEALTH FOUNDATION

75-1315145

5/27/11

01:05PM

# **STATEMENT 13** FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

SAN ANGELO HEALTH FOUNDATION

NAME:

TOM EARLY

CARE OF:

TOM EARLY

STREET ADDRESS:

P.O. BOX 3550 SAN ANGELO, TX 76902-3550

CITY, STATE, ZIP CODE: TELEPHONE:

325-486-0185

FORM AND CONTENT:

SEE WEB SITE AT WWW.SAHFOUNDATION.ORG

SUBMISSION DEADLINES:

2-3 MONTHS PRIOR TO WHEN A DECISION IS NEEDED

RESTRICTIONS ON AWARDS: SAN ANGELO, TEXAS AREA

#### **STATEMENT 14** FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CONCHO VALLEY HOME FOR GIRLS 412 PREUSSER SAN ANGELO, TX 76903		501-C3	PURCHASE OF A VAN.	\$ 16,000.
SALVATION ARMY 215 GILLIS SAN ANGELO, TX 76903		501-C3	PURCHASE OF A DELIVERY TRUCK.	35,046.
CHILDREN'S ADVOCACY CENTER 317 KOBERLIN SAN ANGELO, TX 76903		501-C3	SEASONAL ASSISTANCE GRANT TO ORGANIZATION SERVING VICTIMS OF CHILD ABUSE.	2,500.
LAKE IVIE VOLUNTEER FIRE DEPARTMENT 13343 LAKE COUNTRY RD PAINT ROCK, TX 76866		501-C3	EXPANSION OF EXISTING FIRE HALL.	50,000.
RUNNELS COUNTY SENIOR CENTER 627 STRONG AVE BALLINGER, TX 76821		501-C3	RENOVATION OF THE BALLINGER SENIOR CENTER.	73,847.
CONFERENCE OF SWEST FOUNDATIONS 624 N. GOOD LATIMER EXPY, SUITE 100 DALLAS, TX 75204		501-C3	SUPPORT FOR PHILANTHROPIC MEMBERSHIP ORGANIZATION.	1,750.

### **FEDERAL STATEMENTS**

PAGE 8

CLIENT 486

#### SAN ANGELO HEALTH FOUNDATION

**75-1315145** 01:05PM

STATEMENT 14 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
HOUSE OF FAITH 2525 SOUTH JOHNSON SAN ANGELO, TX 76903		501-C3	HIGHER EDUCATION SCHOLARSHIP PROGRAM FOR QUALIFYING PARTICIPANTS.	\$ 123,000.
ASSOCIATION OF SMALL FOUNDATIONS 33 WILD BERRY LANE UNDERHILL, VT 05489		501-C3	SUPPORT FOR PHILANTHROPIC MEMBERSHIP ORGANIZATION.	495.
HOSPICE OF SAN ANGELO 36 E. TWOHIG, STE 1100 SAN ANGELO, TX 76903		501-C3	UPGRADE COMPUTER SYSTEMS.	31,215.
HOUSE OF FAITH 2525 SOUTH JOHNSON SAN ANGELO, TX 76903		501-C3	SEASONAL ASSISTANCE TO CHRISTIAN BASED YOUTH MINISTRY.	2,500.
SALVATION ARMY 215 GILLIS SAN ANGELO, TX 76903		501-C3	SEASONAL ASSISTANCE GRANT TO LOCAL ORGANIZATION SERVING NEEDY INDIVIDUALS AND FAMILIES.	2,500.
PLACID COMMUNITY VOLUNTEER FIRE DEPT P.O. BOX 48 ROCHELLE, TX 76872		501-C3	PURCHASE OF NEW BRUSH TRUCK.	69,000.
RUST STREET MINISTRIES 803 RUST SAN ANGELO, TX 76903		501-C3	NEW TRAILER FOR THEIR CLOTHING MINISTRY.	25,284.
TOM GREEN COUNTY LIBRARY 113 W BEAUREGARD SAN ANGELO, TX 76903		170-C1	FURNITURE, FIXTURES AND EQUIPMENT.	437,500.
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DRIVE, SUITE 700 ARLINGTON, VA 22202		501-C3	SUPPORT FOR MEMBERSHIP ORGANIZATION.	6,830.
SAMARITAN PASTORAL COUNSELING CENTER 2001 COLORADO AVE SAN ANGELO, TX 76901		501-C3	EMPLOYEE INSURANCE, CLIENT ASSISTANCE AND CLINICAL DIRECTOR.	30,750.

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### **FEDERAL STATEMENTS**

PAGE 9

CLIENT 486

#### SAN ANGELO HEALTH FOUNDATION

**75-1315145** 01:05PM

STATEMENT 14 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
WEST CENTRAL TEX SPECIALTY FEEDING TEAM 825 N. MAIN ST. SAN ANGELO, TX 76903		501-C3	EQUIPMENT TO ESTABLISH A DISASTER RELIEF TEAM.	\$ 25,000.
ANGELO CIVIC THEATRE 1936 SHERWOOD WAY SAN ANGELO, TX 76901		501-C3	MASTER PLAN FOR FUTURE NEEDS OF LOCAL PERFORMING ARTS ORGANIZATIONS.	37,978.
JUNIOR ACHIEVMENT OF WEST TEXAS 303 W. WALL ST, SUITE 807 MIDLAND, TX 79707		501-C3	SUPPORT TO CONTINUE PROGRAMS IN SAN ANGELO SCHOOLS.	1,325.
SAN ANGELO AREA FOUNDATION 2201 SHERWOOD WAY, SUITE 205 SAN ANGELO, TX 76901		501-C3	HONORARIUMS FOR SCHOLARSHIP PROGRAMS.	20,000.
WEST TEXAS REHAB CENTER 301 S. JACKSON SAN ANGELO, TX 76904		501-C3	NEW ELECTRONIC MEDICAL RECORDS SYSTEM.	250,000.
BOYS AND GIRLS CLUB OF SA 1802 N. LILLIE SAN ANGELO, TX 76903		501-C3	SEASONAL ASSISTANCE TO PROVIDE PROGRAMS FOR DISADVANTAGED BOYS AND GIRLS OF THE CONCHO VALLEY.	2,500.
CHRISTIANS IN ACTION 25 W. TWOHIG SAN ANGELO, TX 76903		501-C3	SEASONAL ASSISTANCE TO PROVIDE FOR THE DISADVANTAGED OF THE CONCHO VALLEY.	2,500.
SAN ANGELO LIONS CHARITIES 27 W. CONCHO SAN ANGELO, TX 76903	,	501-C3	SPECIAL EYE SCREENING CAMERA AND SOFTWARE.	5,000.
CITY OF SAN ANGELO COMMUNITY DVLPT DIV 622 S. OAKES, SUITE G SAN ANGELO, TX 76903		170-C1	TO FUND ROOF REPAIR FOR LOW-INCOME FAMILIES.	100,000.

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# **FEDERAL STATEMENTS**

PAGE 10

**CLIENT 486** 

#### SAN ANGELO HEALTH FOUNDATION

75-1315145

01:05PM

STATEMENT 14 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
JAMES PHILLIPS WILLIAMS MEMORIAL FDN P.O. BOX 60154 SAN ANGELO, TX 76906		501-C3	SPEAKER FOR LEARNING DISABILITIES CONFERENCE.	\$
WALL VOLUNTEER FIRE DEPARTMENT 7900 LOOP 570 WALL, TX 76957		501-C3	RESCUE TOOLS.	3,628.
ESPARANZA HEALTH AND DENTAL CENTERS 2033 W. BEAUREGARD SAN ANGELO, TX 76901		501-C3	PROFESSIONAL CONSULTANT TO ASSIST IN IDENTIFYING RESOURCES TO IMPROVE ACCESS TO HEALTH CARE.	10,000.
CONCHO VALLEY HOME FOR GIRLS 412 PREUSSER SAN ANGELO, TX 76903		501-C3	SEASONAL ASSISTANCE TO PROVIDE PROGRAMS FOR DISADVANTAGED GIRLS OF THE CONCHO VALLEY.	2,500.
CORNERSTONE CHRISTIAN SCHOOL 1502 N JEFFERSON STREET SAN ANGELO, TX 76901		501-C3	IMPROVEMENTS TO NEW GYMNASIUM.	125,000.
CITY OF SAN ANGELO P.O. BOX 1751 SAN ANGELO, TX 76901		170-C1	LIGHTING FOR A NEW PUBLIC TENNIS FACILITY.	131,800.
SAN ANGELO INDEPENDENT SCHOOL DISTRICT 1621 UNIVERSITY AVE SAN ANGELO, TX 76901		170-C1	CONSTRUCTION OF A NEW FIELDHOUSE.	125,000.
CRITTER SHACK HUMANE SOCIETY OF MENARD P.O. BOX 263 MENARD, TX 76859		501-C3	FENCE FOR ANIMAL SHELTER.	14,500.
PREGNANCY HELP CENTER OF THE CONCH VAL 4202 SHERWOOD WAY SAN ANGELO, TX 76901		501-C3	RENOVATION OF THEIR NEW FACILITY.	200,000.

2009	FEDERAL ST	ATEMENTS		PAGE 11
CLIENT 486	SAN ANGELO HEAL	LTH FOUNDATIO	N	75-1315145
5/27/11				01:05PI
STATEMENT 14 (CON FORM 990-PF, PART RECIPIENT PAID DUF	ITINUED) XV, LINE 3A RING THE YEAR			
	DONEE	FOUND- ATION	PURPOSE OF	

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CITY OF JUNCTION 730 MAIN STREET JUNCTION, TX 76849		170-C1	RENOVATION OF COMMUNITY SWIMMING POOL AND PARK.	\$ 40,000.
BALLINGER MEMORIAL HOSPITAL DISTRICT 1702 N. BROADWAY BALLINGER, TX 76821		170-C1	ELECTRONIC MEDICAL RECORDS SYSTEM FOR BALLINGER AND RUNNELS COUNTY HOSPITALS.	180,000.
CITY OF SAN ANGELO P.O. BOX 1751 SAN ANGELO, TX 76901		170-C1	CONSTRUCTION OF NEW RIO CONCHO SPORTS COMPLEX AND COMMUNITY PARK.	125,000.
IRION COUNTY EMS 209 N. PARK VIEW MERTZON, TX 76941		501-C3	TRAINING FACILITY FOR THEIR EMERGENCY MEDICAL SERVICE.	50,000.
SCHLEICHER COUNTY WELLNESS FOUNDATION P.O. BOX 353 ELDORADO, TX 76936		501-C3	CONSTRUCTION OF A COMMUNITY WELLNESS CENTER.	125,000.
TEXAS TECH FOUNDATION, INC. P.O. BOX 41081 LUBBOCK, TX 79409		170-C1	ESTABLISHMENT OF A COLLEGE OF NURSING AND ALLIED HEALTH AT ANGELO STATE UNIVERSITY.	140,000.
SONRISAS THERAPEUTIC RIDING 2702 SANTIAGO CANYON SAN ANGELO, TX 76904		501-C3	RETURN OF UNUSED GRANT FUNDS - REPLACEMENT HORSES FOR THEIR THERAPEUTIC RIDING PROGRAM.	-1,278.

TOTAL \$ 2,628,128.

2009
CLIENT 486
5/27/11
STATEMI FORM 99

# **FEDERAL STATEMENTS**

PAGE 12

#### SAN ANGELO HEALTH FOUNDATION

75-1315145

01:05PM

STATEMENT 15 FORM 990-PF, PART XV, LINE 3B RECIPIENT APPROVED FOR FUTURE PAYMENT

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF  GRANT	AMOUNT
CHANGE IN ACCRUED GRANTS BETWEEN YEARS VARIOUS SAN ANGELO, TX 76901		501-C3	VARIOUS	\$ -627,651.
SAN ANGELO AREA FOUNDATION 2201 SHERWOOD WAY, SUITE 205 SAN ANGELO, TX 76901		501-C3	MATCH FUNDS TO ESTABLISH A "FUTURE FUND".	25,000.
ANGELO STATE UNIVERITY P.O. BOX 11022 SAN ANGELO, TX 76909		170-C1	FUNDING TO IMPLEMENT MENTAL HEALTH SERVICES AT SAN JACINTO SCHOOL-BASED HEALTH CLINIC.	160,700.
TOM GREEN COUNTY LIBRARY 113 W BEAUREGARD SAN ANGELO, TX 76903		170-C1	LIBRARY RENOVATION AND EXPANSION PROJECT.	500,000.
BAPTIST MEMORIALS MINISTRIES 902 N MAIN SAN ANGELO, TX 76903		501-C3	ROTARY HOUSE OF HOPE RESIDENTIAL HOSPICE PROGRAM.	100,000.
HOUSE OF FAITH 2525 SOUTH JOHNSON SAN ANGELO, TX 76903		501-C3	HIGHER EDUCATION SCHOLARSHIP PROGRAM FOR QUALIFYING HOUSE OF FAITH PARTICIPANTS.	754,500.
SAMARITAN PASTORAL COUNSELING CENTER 2001 COLORADO AVE SAN ANGELO, TX 76901		501-C3	EMPLOYEE INSURANCE, CLIENT ASSISTANCE AND CLINICAL DIRECTOR.	9,126
MEALS FOR THE ELDERLY 310 E HOUSTON HARTE SAN ANGELO, TX 76903		501-C3	OFFICE FURNITURE, COMPUTER EQUIPMENT AND SOFTWARE CONSULTANT.	6,000
			TOTAL	\$ 927,675

2009 .	FEDERAL SUPPORTING DETAIL	PAGE 1
CLIENT 486	SAN ANGELO HEALTH FOUNDATION	75-1315145
5/27/11  OTHER REVENUE AMOUNT OIL AND GAS INCO	DME TIES	01:05PN 149,376. 149,376.
RUSSELL CORE BC RUSSELL LARGE C RUSSELL SMALL C RUSSELL QUANTAT RUSSEL INTERNAT	INCOME / ADJ. NET INCOME REST FROM SECURITIES (SEE SCREEN 18) [O]  IND FUND \$ IND FUND \$ IND EQUITY FUND \$ IVE EQUITY FUND \$ IVED THROUGH RUSSELL \$  TOTAL \$	538,066. 141,239. 30,493. 177,880. 173,940. 1,297. 1,062,915.
PENSION PLAN CONT	MINISTRATIVE EXP. (990-PF) ONTRIBUTIONS  TOTAL \$	12,745. 12,414. 25,159.
PENSION PLAN CONTRETIREMENT CONT		868. 846. 1,714.
RETIREMENT CON	MINISTRATIVE EXP. (990-PF) ONTRIBUTIONS  TRIBUTIONS \$ TOTAL \$	11,877. 11,568. 23,445.
BALANCE SHEET OTHER (FORM 99 INVESTMENT SEC	0-PF)[O]	47,562,941. 47,562,941.