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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		Cor th	2000 calon	dor.voor	or toy year beginning	09, and endin								
				dar year,	or tax year beginning , 20	105, and endin	<u> </u>	D Employ	or Idontifica	tion Number				
	В	Check i	f applicable	Please use										
		Ad	dress change	IRS label or print	East Texas Communities Foundati	.on			<u> 230913</u>	8				
		Na	ime change	or type.	315 N. Broadway #210		j	E Telepho	ne number					
		In	tial return	See specific	Tyler, TX 75702		-	903-	-533-0	208				
		Пте	rmination	Instruc- tions.										
		\vdash	nended return	"""				G Gross re	oceinte &	26,264	835			
		\vdash		E Name	and address of principal officer. Kyle L. Penney		H(a) Is this a				1			
		LJ Ap	plication pending		-		H(b) Are all	-		₽	No			
					As C Above			attach a list		tions) Yes				
	<u> </u>	Tax	-exempt statu	ıs X 501	(c) (3) (insert no.) 4947(a)(1) or	527								
	J	Wel	osite: 🕨 ww	w.etcf	.org		H(c) Group e	exemption nu	mber 🏲					
	K	Form	of organization	X Corpora	ation Trust Association Other	L Year of Format	tion 1989	9 ∣Mis	tate of legal	domicile TX	, L			
	Pa	rt Las	Summa					· · ·						
					ganization's mission or most significant activities:	East Tex	as Com	muniti	es Fou	indation				
					nthopy by offering simple ways									
	ဦ				ectives. We manage and distrib									
	na l									TT 16	-			
	Ver	_	SCHOLARS	1111 <u>1</u> 25	endowments, designated and dono	T-dovised	re then 3	50/ of its						
	ô				if the organization discontinued its operations or d	iisposea oi mo	ne man z	יים מינט מ <i>יכ</i> כן	3		23			
	≪ರ				ibers of the governing body (Part VI, line 1a), it voting members of the governing body (Part VI,	line 1b)		}	4		15			
	es					iiile ib)	• •	}	5		6			
	Σ				yees (Part V, line 2a) eers (estimate if necessary)		•	}	6		70			
	Activities & Governance				business revenue from Part VIII, column (C), line 1		•	•	7a		0.			
Ũ			-		s taxable income from Form 990-T, line 34	۷.		ŀ	7b	-	0.			
2010	,	D	Net unrelated	business	taxable income from Form 990-1, line 34				7.5					
								rior Year		Current Y				
9	8	8	Contributions	and gran	its (Part VIII, line 1h)		2	,632,0	13.	9,928	<u>,407.</u>			
√= 0	Revenue				ue (Part VIII, line 2g) .		<u> </u>							
DEC	8	10	Investment in	ncome (Pa	art VIII, column (A), lines 3, 4, and 7d).			40,3			,070.			
Ξ	œ	11	Other revenu	e (Part V	II, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .	•		11,5			,936.			
		12	Total revenue	e – add li	nes 8 through 11 (must equal Part VIII, column (A)), line 12) .	2	,683 <u>,</u> 9	12.	10,652	<u>,413.</u>			
		13	Grants and s	ımılar am	ounts paid (Part IX, column (A), lines 1-3)		2	,855,0	35.	3,129	,793.			
Ž					members (Part IX, column (A), line 4)									
Z			•		nsation, employee benefits (Part IX, column (A), lii		249,6	56.	246	,684.				
×	ခ				-		,							
SCANNED	Expenses				g fees (Part IX, column (A), line 11e) .			2 a 8	70 - 20	- 3'- W				
0,5	훘	b	Total fundrais	sing expe	nses (Part IX, column (D), line 25) ►		100 miles		% 汉: 5%	清新洲海				
		17	Other expens	ses (Part	X, column (A), lines 11a-11d, 11f-24f)			306,7	01.	243	,807.			
		18	Total expens	es. Add II	nes 13-17 (must equal Part IX, column (A), line 25	i)	3	,411,3	92.	3,620	,284.			
					s Subtract line 18 from line 12			-727,4		7,032				
			revende less	CAPOLISO	5 Cabacat mile 15 Hom mile 12		<u> </u>	· · · · · · · · · · · · · · · · · · ·		End of Ye				
	Net Assets or Fund Balances				RECEIVED			ning of Yo						
	Bale		Total assets	•		<u>·</u> · · · · · ·		,852,2		40,111				
	4 E		Total liabilitie	•	' 100	S · ·		<u>,948,7</u>		4,647	-			
		_22	Net assets or	fund bala	ances. Subtract line 21 fro line 200 V 1 9 2010	<u> </u>	23	<u>,903,4</u>	70.	<u>35,463,</u>	<u>,363.</u>			
	Pa	rt II		ure Bloc		S								
			Under penaltie	s of perjury.	declare that I have examined this return, malisting accompanying Declaration of preparer (other than office) is based on all informations.	schedules and sta	tements, and	to the best o	f my knowle	edge and belief,	it is			
			true, correct, a	and complete	Declaration of preparer (other than officer) is based of all information	tion of which prepa	arer has any l	knowledge						
	Sig	ın	 ► ' \	L. Ó	(. Ye.			11/15/	2010					
	He	re	Signature	officer	8	· · · · · · · · · · · · · · · · · · ·	Dat	e						
			 	1 10 1	. Penney President									
			Type or o	rin name and	title Tenney Trestaent			-						
,			1,750 0.1 5.1			Date			Prenar	er's identifying	number			
	D-:		ŀ	`	۸ -	Date	Ch sel	eck if If-	(see in	er's identifying i istructions)				
	Pai		Preparer's	- P	and L Turner CPA	1		ployed	Щ <u></u>					
	Pre		signature	<u> </u>	<u> </u>	11/15/1	0		N/A					
	par Us	er's	Firm's name (or <u>Arm</u>	s, Shilling & Pye, PC									
	Os:		yours if self- employed),	employed), ► P U BOX 5588						EIN ► N/A				
	J11	• 7	address, and ZIP + 4	Tyl			-	one no 🕨	(903)	561-812	2			
•	Mar	the II			with the preparer shown above? (see instructions)			<u>- :- · · y </u>	<u>(300)</u>		No			
	_				work Reduction Act Notice, see the separate inst		·-·	TEEANING		Form 990				
	אט	1 rur	TIVALY ACL	ziiu rapei	work neurcion act notice, see the separate inst	1 HCUOIIS.		TEEA0113L	12123103	1 01111 331	# (CUU3)			

	990 (2009) East Texas Communities Foundation	<u> 75-2.</u>	3091.	38		Page
	III Statement of Program Service Accomplishments					
	Briefly describe the organization's mission:					
	See Schedule O	 .				
•						
						
2	Did the organization undertake any significant program services during the year which were not listed on	the prior		-		
	Form 990 or 990-EZ?	tino prioi	П	Yes	X	No
	If 'Yes,' describe these new services on Schedule O				لت	
	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vicos 2		Yes	X	No
		VICES,	ш	162	Ţ	NO
	If 'Yes,' describe these changes on Schedule O.		•		.01/\	(2)
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an	d allocation	es se s to of	cuon a hers. t	he tot	(S) al
	expenses, and revenue, if any, for each program service reported					
	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
4a	(Code:) (Expenses \$ 3,309,160. including grants of \$ 3,323,460.)	Revenue	\$			
	Grants (schedule attached) distributed to local, national, and in	<u>ternati</u>	<u>ona</u> l			
	non-profit organizations to further their various charitable miss	<u>ions.</u>				
•						
•						·
	·					
4b	(Code: including grants of \$) (Expenses \$) (Revenue	Ś			,
	/(/, //,	, 10101140	' —			
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	·					
						- - .
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4 c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
_						
•						
•						
•				-		
						-
		- -				
	Other program services. (Describe in Schedule O.)					
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ Total program service expenses > 3,309,160.	I)	

Da	art IV. Checklist of Required Schedules			9-
ra	int 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			
2	Schedule A ! Is the organization required to complete Schedule B, Schedule of Contributors?	1 2	X	
3				
•	for public office? If 'Yes,' complete Schedule C, Part I	3	ļ	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
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 De Part 1.	6	х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? 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		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments 'Yes,' complete Schedule D, Part V	? //		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, 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 Schedu D, Part VI	le	7	Tr.
	• 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	al	*3	* *
	 Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its to assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII 	tal	* ^	
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Part X, line 16? If 'Yes,' complete Schedule D, Part IX	l ın		* '
	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			13.54
	 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X 			***
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
12		<u>o</u> *	, x	
12		12		
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	 	X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		X
	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			X
	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		X
	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		X
	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
	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 'Yes,' complete Schedule H

Form 990 (2009) East Texas Communities Foundation

Part 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 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	Х	_
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		X
	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Χ_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	``.		
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
Ь	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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	V	Х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, 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		X
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_		Х
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 VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA

Form 990 (2009)

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 US 0 Information Returns Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 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 6 X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b 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 b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) 4a **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 1 Financial Accounts. 5a X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a Х provided to the payor? X b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? q For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 q 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Х 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a 9b X b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 10a 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 10b 11 Section 501(c)(12) organizations. Enter: 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12h

BAA Form 990 (2009)

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.

	Scriedule O. See instructions.				
Sec	tion A. Governing Body and Management	· · · · · · · · · · · · · · · · · · ·			
_	-	ا ما		Yes	No ,
	Enter the number of voting members of the governing body	1a 23 1b 15			
	Enter the number of voting members that are independent				
2	Did any officer, director, trustee, or key employee have a family relationship or a business reofficer, director, trustee or key employee? See Schedule 0	elationship with any other	2	Х	
3	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other pers	under the direct supervision on?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents		4		<u>X</u>
	since the prior Form 990 was filed?				
5	Did the organization become aware during the year of a material diversion of the organization	n's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?		6		X
7 a	Does the organization have members, stockholders, or other persons who may elect one or governing body?	more members of the	7a	_	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions under the following:	ertaken during the year by	* 3	77	
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8ь	Х	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who ca organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	9		х
Sec	tion B. Policies (This Section B requests information about policies not	required by the Internal			
Reve	nue Code.)				
		,		Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?		10a		<u>X</u>
t	If 'Yes,' does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	10 ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body	before filing the form?	11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	See Schedule O		-	,
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that could give rise	12b	х	
c	Does the organization regularly and consistently monitor and enforce compliance with the positive $Schedule\ O$ how this is done $See\ Schedule\ O$	olicy? If 'Yes,' describe in	12c	х	
13	Does the organization have a written whistleblower policy?		13	Х	
14	Does the organization have a written document retention and destruction policy?		14		<u>X</u>
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision?	* .	*	
а	The organization's CEO, Executive Director, or top management official See Schedule	e O	15a	_X	
b	Other officers of key employees of the organization See Schedule O		15b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)		۱ ا		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar entity during the year? $$	arrangement with a taxable	16a		X
b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	n to evaluate its participation I the organization's exempt			
Sec	status with respect to such arrangements?		16b		
	List the states with which a copy of this Form 900 is required to be filed None				
	List the states with which a copy of this Form 990 is required to be filed None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available. Check all that apply	nd 990-1 (501(c)(3)s only) av	allable	e for p	oublic
	X Own website				
	Describe in Schedule O whether (and if so, how) the organization makes its governing docur statements available to the public. See Schedule O				ncial
	State the name, physical address, and telephone number of the person who possesses the target of the person who person target of the person targ		anızatı	on:	
•	Kyle L. Penney 315 N. Broadway #210 Tyler TX 75702 903-5	2270400			

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 organizations'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 employees.'
- 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.

Check this box if the organization did n	ot comper	isate a	ny (curre	ent	officer	, dır	ector, or trustee		
(A)	(B)			•	•			(D)	(E)	(F)
Name and Title	Average hours per week	Average Position (check all that ap			Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation		
		Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
Craig S. Adams	 		-			_				
V Chr / Gov Chr	0	X		Х				0.	0.	0.
Michael T. Allen										
Grants Chair	T 0	Х						0.	0.	0.
James Richard Allen										
Investment Chr	0	X						0.	0.	0.
Lawrence L. Anderson										
Director	0	Х						0.	0.	0.
Mark L. Boon										
Director	0	X			ĺ			0.	0.	0.
Michelle Brookshire										
Director	0	X						0.	0.	0.
Tom Brown										
Director	0	Х						0.	0.	0.
Shannon Dacus	_									
Marketing Chair	0	Х						0.	0.	0.
John W. Ferguson, Jr	_									
Treasurer	0	Х		Х				0.	0.	0.
Richard W. Jett, Jr										
Chair	0	Х		Х			<u> </u>	0.	0.	0.
Elizabeth McNally		ì								
Director	0	X			_	<u> </u>	_	0.	0.	0.
John Minton	4 .							_	_	_
Policy Chair	0	Х						0.	0.	0.
Gordon Northcutt	4								_	_
Development Chr	00	Х			_			0.	0.	0.
John G. Payne	- ,	.,,								•
Director	0	X_					<u> </u>	0.	0.	0.
Rebecca Stanley Davies	-	.,								•
Director	0	Х			<u> </u>			0.	0.	0.
A. W. "Whit" Riter, III	┤	.,							_ [^
Director Thomas Smith	0	Х	\vdash		<u> </u>		├-	0.	0.	0.
Thomas Smith	۸ ,	v							_	^
Director	0	Х					L	0.	0.	0.
BAA		7	EEA	0107L	. 11	/10/09				Form 990 (2009)

Part VII Section A. Officers, Directors, Trus	<u>tees, k</u>							nd Highest Compensated Employees (
(A)	(B)	•						(D)	(E)	(F)			
Name and Title	houre	Position (check all that ap						Reportable compensation from	Reportable compensation from	Estimated amount of other			
	per week	or di	Inst	Officer	ě	eggs Hgh	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the			
	per week	Individual trustee or director	Institutional trustee	.	Key employee	Highest compens	Je	(,	(,	organization and related			
		tas	altr		oyee	omp				organizations			
		tee	ustee			<u> 65</u>							
			"			ē							
W. Fred Smith			 	_									
Secretary	0	X		x				0.	0.	0.			
Kenneth W. Threlkeld								•					
Director	0	Х						0.	0.	0.			
Laura Koenig Young									_				
Director	0	X						0.	0.	0.			
Kyle L. Penney									_				
President	40	X		X				105,100.	0.	0.			
Douglas G. Bolles													
Director	0	X						0.	0.	0.			
Timothy F. Alexander		l v						_					
Director	0	X	-			H	-	0.	0.	0.			
- · · · · · · · · · · · · · · · · · · ·					 								
						\Box							
					_								
			-		-								
1 b Total				1	<u>. </u>	LI		105,100.	0.	0.			
2 Total number of individuals (including but not limite	d to tho	se li	ster	l abi	ove)	who	o re						
from the organization \blacktriangleright 1	u (0 (i)0		0.00		,	, ,,,,,			4 ,00,000 ,opo	abre compensation			
										Yes No			
3 Did the organization list any former officer, director	or trust	-00	بما	emr	alov.	۰ ۵	ar bi	ighest compensat	ed employee	* * " *			
on line 1a? If 'Yes,' complete Schedule J for such in	ndıvıdua	al	КСУ	CITIF	JIO y .	cc, c	JI 111	ignest compensut	ca employee	3 X			
4 For any individual listed on line 1a, is the sum of re	portable	100	mpe	nsa	tion	and	oth	er compensation	from				
the organization and related organizations greater t	nan \$15	ט,טנ	10?	IT Y	es	com	piet	e Scneaule J for s	sucn	4 X			
5 Did any person listed on line 1a receive or accrue of	omnane	atio	n fr	om :	anv	unre	ماداه	nd organization for	r senuces				
rendered to the organization? If 'Yes,' complete Sci	hedule .	J for	suc	h pe	erso	n	Jule	d organization for	30111003	5 X			
Section B. Independent Contractors													
 Complete this table for your five highest compensation from the organization. 	ted inde	pend	dent	cor	ntrac	ctors	tha	it received more t	han \$100,000 of				
				-				(B)		····			
(A) Name and business addres	s							(B) Description (of Services	(C) Compensation			
2. Tatal number of radian adapt and radiant as a land as	Barbara et	I ·	L = -1	4		. 1 - 2		 	Ad				
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		ıımı	tea	io (f	iose	: IISti	eu a	nove) who receiv	eu more than				

Fai	t vill Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns. b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1 a 1 b 1 c 1 d 1 c 1 d				
ONTRIBUT	f All other contributions, gifts, grants, and similar amounts not included above. g Noncash contribus included in lns 1a-1f: h Total Add lines 1a-1f	0 020 407	1 1 1		
-	ii rotai. Add lilles ra-ri	9,928,407.			
ş	Business Code				
<u> </u>	2a				
2	b				
띨	с				
- ≩	·				
S	d				
ΣŽ	e				
8	f All other program service revenue				
ŠΙ	g Total. Add lines 2a-2f			√¶, τώ	, {,
	3 Investment income (including dividends, interest and other similar amounts)	1,295,899.		,	1,295,899.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties			 	
	(i) Real (ii) Personal	**	, , , , , , , , , , , , , , , , , , , ,	** ,	¥ 5.
	6a Gross Rents				
	b Less: rental expenses	4	**	<i>3</i> .	A
i	·	,	,	<i>'</i>	
	c Rental income or (loss)				
	d Net rental income or (loss) ▶				
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory 15021593.	<i>9</i> *			
	assets other trial investory	da.		* • • • • • • • • • • • • • • • • • • •	\$ 17 S
	b Less cost or other basis				
	and sales expenses . 15612422.	^			8 M
	c Gain or (loss) -590, 829.				, , , , , , , , , , , , , , , , , , , ,
	d Net gain or (loss) ▶	-590,829.			-590,829.
필	8a Gross income from fundraising events (not including \$			2	330,023.
OTHER REVEN	of contributions reported on line 1c).				
Æ					
8	See Part IV, line 18 a				
	b Less direct expenses b				
١	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities				
				-	
	10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b				
-	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a Other Income	18,936.	18,936.		
1	b				
	c				
l	4 All all an arrange	-			
ŀ	d All other revenue				
	e Total. Add lines 11a-11d	18,936.			
	12 Total revenue. See instructions	10,652,413.	18,936.	0.	705,070.

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).

	All other organizations must comp	(A)	(B)	(C)	(D)
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	3,028,579.	3,028,579.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	101,214.	101,214.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	105,100.	73,570.	31,530.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	119,024.	83,317.	35,707.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,815.	4,071.	1,744.	
9	Other employee benefits				
10	Payroll taxes	16,745.	11,722.	5,023.	
11	Fees for services (non-employees)				·
	Management				
	Legal	0.051		0.251	
	Accounting	9,251.		9,251.	
	I Lobbying Prof fundraising svcs See Part IV, In 17				
	Investment management fees	135,027.		135,027.	
	other	2,608.		2,608.	
	Advertising and promotion	2,000.		2,000.	
13	Office expenses	535.		535.	···
14	Information technology	15,813.		15,813.	
15	Royalties				
16	Occupancy	20,031.		20,031.	
17	Travel	3,164.		3,164.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,687.	6,687.		
23 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)	7,491.		7,491.	
	Other Expenses	26,662.		26,662.	
	Printing and Publications	9,271.		9,271.	
	: Supplies	6,714.		6,714.	
	Training	553.		553.	
•					
f	All other expenses.				
_25	Total functional expenses. Add lines 1 through 24f	3,620,284.	3,309,160.	311,124.	0.
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2009)

Part X | Balance Sheet

(B) End of year (A) Beginning of year 1 1 Cash - non-interest-bearing 22,570. 21,857. 2 2 Savings and temporary cash investments 34,200. 60,105. 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 86,733. 10a Land, buildings, and equipment cost or other basis 10a Complete Part VI of Schedule D 59,593. 28,787 27,140. b Less, accumulated depreciation. 10b 10 c 11 Investments - publicly-traded securities 27,766,661 11 39,992,614. 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 9,414. 14 Intangible assets 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 27,852,218 16 40,111,130 -400 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue. 19 20 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties. 23 24 Unsecured notes and loans payable to unrelated third parties 24 3,949,148 25 4,647,767. Other liabilities Complete Part X of Schedule D 25 4,647,767. 3,948,748 26 Total liabilities. Add lines 17 through 25 26 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 844,860 921,772. Unrestricted net assets 27 28 23,058,610 28 34,541,591. Temporarily restricted net assets 29 29 Permanently restricted net assets R Organizations that do not follow SFAS 117, check here and complete 43 250 lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, and equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 23,903,470. 33 33 35,463,363. Total net assets or fund balances 34 Total liabilities and net assets/fund balances. 27,852,218. 40,111,130. BAA Form 990 (2009)

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Form 990 (2009)	East	Texas	Communities	Foundation
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75-2309138

Page 12

Part XI. Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X_
b Were the organization's financial statements audited by an independent accountant?	2b	X	
c 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 see Schedule 0			İ
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
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 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.	3 b		

BAA

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

<u>Eas</u>	t '.		<u>ities Foundati</u>							<u> 309138</u>				
<u>Par</u> l	<u> </u>	Reason for Pu	blic Charity Statu	is (All organizations	must o	comple	te this	part.)	See ı	nstruct	ions			
The c	rgai	nization is not a pri	vate foundation becau	ise it is (For lines 1 thro	ugh 11,	check o	nly one	box)						
1	Ш	A church, convention	on of churches or ass	ociation of churches des	cribed ir	section	170(b)	(1)(A)(i)	١.					
2	Ш	A school described	In section 170(b)(1)(A)(ii). (Attach Schedule I	E)									
3		A hospital or coope	erative hospital servic	e organization described	ın secti	on 170(ьх1хах	iii).						
4		A medical research	n organization operate	ed in conjunction with a h	ospital o	describe	d in sec	tion 17	0(b)(1)(A	A)(iii) . Er	ter the ho	spital's	5	
		name, city, and sta	ate:	•								•		
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1XAXiv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(bX1XAXv).													
6														
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)												
8	닏	-		170(b)(1)(A)(vi). (Comple		•								
9	Ц	An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)												
10		An organization org	ganized and operated	exclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4).					
11		more publicly supp describes the type	orted organizations of	exclusively for the bene described in section 509(zation and complete lines	a)(1) or	section	509(a)(2	ctions (2) See	of, or ca section	rry out th 509(a)(3	ne purpose). Check t	s of or he box	ne or that	
		a Type I	b Type II	с 🗌 Туре III	I — Fund	ctionally	ıntegraf	ted		d 🗌	Type III-	Other		
е	_	By checking this both than foundation ma 509(a)(2)	ox, I certify that the or anagers and other tha	rganization is not controll in one or more publicly s	led direc upportec	tly or in d organi	directly zations	by one describe	or more ed in se	disqualiction 509	fied perso (a)(1) or s	ns oth ection	er	
f		If the organization check this box	received a written det	termination from the IRS	that is a	a Type I	, Type II	or Typ	e III sup	porting	organizatio	n,		
g		Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	oution fro	om any	of the fo	ollowing	persons	?			
		(i) a person who	directly or indirectly	controls, either alone or	tonether	with ne	rsons d	escriber	d in (ii) :	and (m)		Yes	No	
		below, the go	verning body of the s	upported organization?	togoti ioi	mar po		0001100	2 (<i>,</i> .	ana ()	11 g (i)			
		(ii) a family mem	ber of a person desc	cribed in (i) above?							11 g (ii)			
		(iii) a 35% contro	lled entity of a persor	described in (i) or (ii) al	bove?						11 g (iii)			
<u>h</u>		Provide the following	ng information about t	the supported organization	ons									
	(1)	Name of Supported Organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	ls the tion in col d in your erning ment?	the organ	ou notify ization in (i) of upport?	lorganizat	s the ion in col zed in the S ?	(vii) Amour	it of Sup	port	
					Yes	No	Yes	No	Yes	No				
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
									-					
		-												
otal				,										

Schedule A (Form 990 or 990-EZ) 2009 East Texas Communities Foundation 75-2309138 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 6,156,305. 4,119,332. 2,854,705. 2,632,014. 9,928,407. 25,690,763. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 0. The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to 0. the public without charge 2,854,705. 6,156,305. 4,119,332. 2,632,014. 9,928,407. 25,690,763. Total. Add lines 1-through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) sil. 8,230,189. 4 * % Public support. Subtract line 5 17,460,574. from line 4 555 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 🟲 4,119,332. 632,014 6,156,305 2,854,705. 2, 9,928,407 25, 690,763. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 911,946. 1,027,238. 1,239,722 1,295,899 636,239 5,111,044. similar sources Net income from unrelated business activities, whether or not the business is regularly 0. carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV 4,640 11,504 18,936. 35,080. 4 Total support. Add lines 7 through 10 30,836,887. 0. Gross receipts from related activities, etc. (see instructions) 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) organization, check this box and stop here \triangleright Section C. Computation of Public Support Percentage 56.6% Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 59.1% Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box b 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 box and **stop here.** The organization qualifies as a publicly supported organization.

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

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

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

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

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

BAA

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 East Texas Communities Foundation 75-2309138 Page 3 | Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in)► (a) 2005 (d) 2008 **(b)** 2006 (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add ins 9, 10c, 11, and 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) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17. 18 %

b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18

19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule .	A (Fo	rm 990	or 990-E	EZ) 2009	East	Texas	Commu	nities	Found	dation	75-2309138 lons required by Part II, lin nal information. See instru	Page 4
Part IV:	Su	pplem	ental I	nforma	ation. C	omplete	this pai	rt to prov	ide the	explanat	ions required by Part II, lin	e 10:
	⁻¹Pa	rt II, Iir	ne 17a	or 17b	; and F	Part III, li	ne 12. f	Provide a	ny othe	er addıtıo	nal information. See instru	ctions.
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75-2309138

2009 Sched	ule A, Part IV	- Supplem	ental Inform	nation	Page 5
	East Texas C	ommunities Fo	undation		75-230913
Part II, Line 10 - Other Income	•				
Nature and Source	2009	2008	2007	2006	2005
Other Income Total	18,936. \$ 18,936. \$	11,504. 11,504. \$	0. \$	4,640. 4,640. \$	0.

:

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Ea	st Texas Communities Foundatio	n			75-2309138	
Da	rt I * Organizations Maintaining Dono	Advised France on Other	· Cimilar Fran			
Га	rt 1 * Organizations Maintaining Dono the organization answered 'Yes' to	o Form 990 Part IV line	r Similar Fund 6	is or Acco	ounts Complete	: II
	and organization answered 103 t	(a) Donor advised fi		/h) E	unds and other acc	
1	Total number at end of year	(a) Donor advised in	74	(0) (unus and other acc	96
2	Aggregate contributions to (during year)		3,898,430.		<u> </u>	.904,232.
2	, ,,				<u>J,</u>	
3	Aggregate grants from (during year)		2,523,583.		10	901,073.
4	Aggregate value at end of year	20	,097,388.		19,	,091 <u>,9</u> 70.
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the a to the organization's exclusive	assets held in do legal control?	nor advised	XYes	No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or done	g that grant fund or advisor or for	s may be any other	XYes	☐ No
Pa	rt II Conservation Easements Comple	ete if the organization ans	wered 'Yes' t	o Form 99	0, Part IV, line	7.
	Purpose(s) of conservation easements held by				,	
	Preservation of land for public use (e.g., r		¬ ''''	f an historica	ally important land	area
	Protection of natural habitat	' ´ F	Preservation o		• •	
	Preservation of open space					
2		on held a qualified conservation	contribution in	the form of a	a conservation ease	ement on the
					Held at the End of	f the Year
i	a Total number of conservation easements			2a		
- 1	b Total acreage restricted by conservation easei	ments		2b		
	c Number of conservation easements on a certi	fied historic structure included i	n (a).	2c		
	d Number of conservation easements included i	n (c) acquired after 8/17/06		2d		
3	Number of conservation easements modified,	transferred, released, extinguis	hed, or terminat	ed by the org	ganization during th	ne tax
	year ►					
4	Number of states where property subject to co	onservation easement is located	! ►			
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring	, inspection, han	- idling of viola	ations, Yes	□ No
6	Staff and volunteer hours devoted to monitoring the year •		onservation ease	ments		
7		nspecting, and enforcing consei	vation easement	s =		_
8	Does each conservation easement reported or	n line 2(d) above satisfy the rec	uuromonte of cor	-tion	·	
_	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?		•		Yes	☐ No
	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements	to the organization's financial s	tatements that de	escribes the	organization's acco	
Pa	rt III Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical 1 wered 'Yes' to Form 990,	reasures, or Part IV, line t	Other Sim 3.	ilar Assets	
1 :	a If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial stateme	lic exhibition, education, or res	revenue stateme earch in furtherai	ent and balar nce of public	nce sheet works of service, provide, ii	art, historical n Part XIV,
i	b If the organization elected, as permitted under treasures, or other similar assets held for pub amounts relating to these items:	r SFAS 116, to report in its revolution, education, or resolution, education, or resolution.	enue statement a earch in furtherai	and balance s ace of public	sheet works of art, service, provide th	historical ne following
	(i) Revenues included in Form 990, Part VIII,	line 1			►\$ ►\$	
	(ii) Assets included in Form 990, Part X				► \$	
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other 116 relating to these items.	sımılar assets fo	or financial g	ain, provide the fol	llowing
;	a Revenues included in Form 990, Part VIII, line				► \$	
1	b Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2009 East							75-230			Page 2
Part III Organizations Mainta						r Othe	r Similar Ass	ets (c	ontinu	ıed)
3 Using the organization's acquisiting tems (check all that apply):	on accession	and other reco	ords, che	ck any	of the following	that are	a significant us	e of its	collecti	on
a Public exhibition		a [Loan	or exch	nange programs					
b Scholarly research		e	Other		g. p g					
c Preservation for future gener	ations	- 1						-		
Provide a description of the orga Part XIV		ections and ex	plain ho	w they	further the orgar	nization':	s exempt purpo	se in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or i ather than to l	receive donati be maintained	ons of ar as part	rt, histo	rical treasures, o organization's co	or other	sımılar	Yes		No
Part IV Escrow and Custodia 9, or reported an amo	l Arrangem unt on Forn	ents Comp n 990, Part	lete if c X, line	organı 21.	zation answe	red 'Ye	es' to Form 9	90, Pa	art IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	itee, custodiar	n, or other inte	ermediary	y for co	ntributions or otl	her asse	ets not	Yes	Г	 ∏No
b If 'Yes,' explain the arrangement									L	
bir res, explain the arrangement	iii i ait Xiv ai	na complete ti	ic ionow	ing tab			1	Amoun	ıt	
c Beginning balance						1	<u></u>	Airiour		
d Additions during the year						1	•			_
e Distributions during the year						1				
- ,						1				
f Ending balance2a Did the organization include an a	mount on For	m QQN Part Y	lina 213	2			·	Yes	· · ·	No
<u> </u>		III 990, Fait A	, 1116 21	•				res	L	
b If 'Yes,' explain the arrangement Part V Endowment Funds Co		ganization	answar	'A' 'V	as' to Form 90	an Pai	rt IV line 10			
Fait V Lindowillent Funds Co	(a) Current) Prior yea		(c) Two years bac		Three years back	(0)	Four year	re hack
1 - December of year belones	(a) Current	yeai (L) Filor yea	<u>" </u>	(c) Two years bac) Tillee years back			S Dack
1a Beginning of year balance						<u> </u>	,			
b Contributions						* 1		- 3	<u> </u>	
c Net Investment earnings, gains, and losses					, , , , , , , , , , , , , , , , , , ,	* 4 .		.,,	<u> </u>	
d Grants or scholarships.					· · · · · · · · · · · · · · · · · · ·			* 1	<u>* </u>	. ,. , , ,
 Other expenditures for facilities and programs 	· · ·					% - (§ ,		* 5	<u> </u>	ke'** - 8 √ 4m -
f Administrative expenses					~**-			A 8 8	<u> </u>	» ^ ×
g End of year balance				,	**# 3 *\$.		. 🐧 .	<u> </u>	8 t w
2 Provide the estimated percentag	e of the year e	end balance h	eld as:							
a Board designated or quasi-endov	vment 🟲		\$							
b Permanent endowment ▶	ક									
c Term endowment ►	 %									
3a Are there endowment funds not organization by	n the possess	sion of the org	anızatıon	that a	re held and adm	ınıstered	d for the		Yes	No
(i) unrelated organizations								3a(i)		
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(ii), are the related of	organizations l	isted as requi	red on S	chedul	e R?			3b		T
4 Describe in Part XIV the intender	_									<u> </u>
Part VI Investments-Land, B						. line	10.			
Description of investment		(a) Cost or oth	ner basis	(b)	Cost or other asis (other)	(c) A	Accumulated preciation	(d)	Book V	alue
1a Land										
b Buildings	.									
c Leasehold improvements					13,398.		1,591.		11	,807.
d Equipment.	ľ				73,335.		58,002.			,333.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

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e Other

Schedule **D** (Form 990) 2009

27,140.

for uncertain tax positions under FIN 48

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75-2309138

Sche	dule D (Form 990) 2009 East Texas Communities Foundation	75-23091	38 Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	5	
	Total revenue (Form 990, Part VIII,column (A), line 12)		10,652,413.
2	Total expenses (Form 990, Part IX, column (A), line 25)		3,620,284.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		7,032,129.
4	Net unrealized gains (losses) on investments		4,721,831.
5	Donated services and use of facilities		
6	Investment expenses	<u> </u>	
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		4,721,831.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		11,753,960.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return	11,700,500.
1	Total revenue, gains, and other support per audited financial statements	1	15,374,244.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	*	10,011,211.
	Net unrealized gains on investments 2a 4,721,83	31 5	
	Donated services and use of facilities 2b		
	Recoveries of prior year grants.	 2	
		 	
			4 701 001
	Add lines 2a through 2d	2e	4,721,831.
	Subtract line 2e from line 1	3	10,652,413.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	W. W.	
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
-	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	10,652,413.
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	<u>per Return</u>	
1	Total expenses and losses per audited financial statements.	1	3,620,284.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a	' ' .	
b	Prior year adjustments 2b		
C	Other losses 2c		
c	Other (Describe in Part XIV)	,	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,620,284.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4 4	
а	Investments expenses not included on Form 990, Part VIII, line 7b	3 -	
b	Other (Describe in Part XIV)	2.4	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	3,620,284.
Par	t*XIV Supplemental Information		
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete thi mation	t IV, lines 1b	and 2b, Part V, de any additional
			-

Schedule D (Form 990) 2009 East Texas Communities Foundation	75-2309138	Page 5
Schedule D (Form 990) 2009 East Texas Communities Foundation Part XIV Supplemental Information (continued)		
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990. Governments and Individuals in the United States

OMB No 1545-0047

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70	pen t
))

ջ □ (h) Purpose of grant or assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV

Partill Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form Employer Identification number XYes 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 75-2309138 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) 。 (e) Amount of non-cash assistance 3,028,579 (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable Part্যাস্থ্ৰ General Information on Grants and Assistance (p) EIN East Texas Communities Foundation 1 1 (a) Name and address of organization or government 1 1 1 1 See attached schedule 1 1 1 Name of the organization 1 1 1 1 1 1 ١ 1 1 1 1 1

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

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Schedule I (Form 990) 2009

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Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. 75-2309138 East Texas Communities Foundation Schedule I (Form 990) 2009

Part III Grants and O

. Page 2

(f) Description of non-cash assistance						line 2, and any other additional information.								l		
(e) Method of valuation (book, FMV, appraisal, other)						rt I, line 2, and any oth	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ion, the	mbers must	ommittees	.a <u>l</u> _app <u>roval</u>	1				.
(d) Amount of non-cash assistance						ion required in Pa		nities Foundat	Committee_me	statementC	Board has fin	 				
(c) Amount of cash grant	85, 214.	16,000.				ovide the informat	a <u>re Used</u>	East_Texas_Communities_Foundation, the	of Directors.	onfidentiality	cants, but the] 	
(b) Number of recipients	51	13				lete this part to pr	<u>an of How Grants.</u>		d_by_the_Board	ements and a c	s <u>idering appli</u>	 	i !] 		
(a) Type of grant or assistance	College Scholarships	Jr. College Scholarships	Vocational/Technical Scholarships			Part IV Supplemental Information. Complete this part to provide the information required in Part I,	<u>Part I, Line 2 - Grantmaker's Description of How Grants are Used</u>	For_Scholarship_Funds_administered_by_the_	Selection_Committee_is_approved_by_the_Board_of_DirectorsCommittee_members_must_	sign_conflict_of_interest_statements_and_a_confidentiality_statementCommittees_	make_recommendations_after_considering_applicants,_but_the_Board_has_final_approval	of_grant_recipients				

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Schedule I (Form 990) 2009

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service

East Texas Communities Foundation

Employer identification number 75-2309138

Par	t I Types of Property									
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	od of o	determin	iing		
1	Art—Works of art									
2	Art-Historical treasures									
3	Art-Fractional interests									
4	Books and publications									
5	Clothing and household goods		λ							
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property			<u> </u>						
9	Securities—Publicly traded	Х	13	2,416,217.						
10	Securities—Closely held stock	Х	1	500,000.	Sellin	ng Pi	rice			
11	Securities-Partnership, LLC, or trust interests									
12	Securities-Miscellaneous									
13	Qualified conservation contribution— Historic structures									
14	Qualified conservation contribution—Other									
15	Real estate—Residential									
16	Real estate—Commercial									
17	Real estate—Other	Х	1	9,414.	Sellin	ng Pi	rice			
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies.									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens				-					
24	Archeological artifacts									
25	Other ► ()									
26	Other ► ()									
27	Other • ()			 						
28	Other ► (
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	on during the e Acknowled	e tax year for contributi Igement	ons for which the	29					
							Yes	No		
30 a	During the year, did the organization receive by co	ontribution a	ny property reported in	Part I lines 1-28 that	ıt must					
-	hold for at least three years from the date of the i	nitial contrib	ution, and which is not	required to be used fo	r exempt					
	purposes for the entire holding period?					30 a		<u> X</u>		
	If 'Yes,' describe the arrangement in Part II					34				
	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X a Does the organization hire or use third parties or related organizations to solicit, process, or sell									
	noncash contributions?									
	b If 'Yes,' describe in Part II See Part II									
33	If the organization did not report revenues in colu	mn (c) for a	type of property for wh	ich column (a) is checl	ked,					
	describe in Part II									

Schedule M (Form 990) 2009 East Texas Communities Foundation	75-2309138	Page 2
Part II Supplemental Information. Complete this part to provide the information requi	red by Part I, lines 30b	
and 33. Also complete this part for any additional information.		
Part I, Line 32 - Hire and Use of Third Parties		_
The Foundation engages brokerage firms and real estate companies	as necessary to	-
sell non-cash contributions. The policy of the Foundation is to	sell non-cash gi	fts
as soon as practicable after receipt.		
		- -
		
		.
	- 	. – – –
		
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		.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

;

Open to Public

Employer identification number 75-2309138

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 ► Attach to Form 990. ► See separate instructions.

East Texas Communities Foundation

(F)
Direct controlling
entity (E) End-of-year assets Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (**D)** Total income (C) Legal domicile (state or foreign country) (B) Primary activity (A) Name, address, and EIN of disregarded entity Part

Partill Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 9 9 6 9

(A) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	Exempt Code section Public charity status (if section 501(c)(3))	(E) (If section 501 (c)(3))	(r) Direct controlling entity
EICE Support Foundation	The corporation				
315 N. Broadway, Suite 210	will hold assets				East Texas
Tyler, TX 75702	with inherent				Communities
	liabilities	TX	501 (c) (3)	509(a)(3)	Foundation

Schedule R (Form 990) (2009)

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75-2309138

Schedule R (Form 990) 2009 East Texas Communities Foundation

Paritimal Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

	ō	ır.?	٩							
	(J) General or	manaç partne	Yes		 				_	
	Code V-UBI	amount in box 20 of Schedule	K-I (Form 1065)				•			
	(H) Dispropor-	tionate ocations?	Yes No						 	
ar.)	(G) Share of end-of-year	assets	<u> </u>							
— pecause it nad one of more related organizations treated as a partifership during the tax year.)	(F) (G) Share of total income Share of end-of-year									
eu as a partifersifi	(E) Predominant	income (related, unrelated, excluded	from tax under sections 512-514)							
anizations trea	(C) (D) Legal Direct	controlling entity					-			
iateu orga	(C) Legal	domicile (state or	foreign country)							
orie or more re	(B) Primary Activity									
	(A) Name, address, and EIN of	related organization		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 				 	

Partive Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	axable as a Cor ed organizations	poration or Trust (Complete as a corporation	ete if the organizor pr trust during th	zation answered 'Ye tax year.)	ss' to Form 990, Pa	ırt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	Activity Legal domicile Direct Type of entity (state or foreign controlling entity country)	Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
	,					

Schedule R (Form 990) (2009)

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75-2309138

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

(2009)	Form 990)	Schedule R (Form 990) (2009)	BAA TEEA5003L 02/05/10
			9
			(5)
	:		(4)
			(3)
			(2)
			(1)
ved	(C) Amount involved	(B) Transaction type (a-r)	(A) Name of other organization
		ships and transaction thresholds	2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
×	1-1		Other transfer of cash or property from other organization(s)
>			- Other transfer of each or present to other eventuation(e)
×	1p		p Reimbursement paid by other organization for expenses
×	10		o Reimbursement paid to other organization for expenses
×	1 1		n Sharing of paid employees
×	1m		m Sharing of facilities, equipment, mailing lists, or other assets
×	=		l Performance of services or membership or fundraising solicitations by other organization(s)
×	\ <u>+</u>		k Performance of services or membership or fundraising solicitations for other organization(s)
×] <u>i</u>		j Lease of facilities, equipment, or other assets from other organization(s)
×	=		i Lease of facilities, equipment, or other assets to other organization(s)
×	1 h		h Exchange of assets
×	1g		g Purchase of assets from other organization(s)
×	16	-	f Sale of assets to other organization(s)
		-	
×] e		e Loans or loan quarantees by other organization(s)
< ×	ט ד		c ant, grant, or capital contribution from other organization(s)
: >	2 ,		
< ×	 		a receipt of (I) interest (II) annuities (III) royanties (IV) rent from a controlled entity b Citt grant or capital contribution to other organization(s)
]:		.>I-II s	1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV:
S _N	Yes		Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

· Page 4

Schedule R (Form 990) 2009 East Texas Communities Foundation

Partivin Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	(G) Code V-UBI amount In box 20 of Schedule K-1 Form (1055)	(H) General or managing partner?	al or ling
			Yes No		Yes No		Yes	٤
								
BAA		TEEA5004L 02/05/10				Schedule R (Form 990) (2009)) (066 1	(6003

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

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.

East Texas Communities Foundation [75-2309138]	
Form 990, Part III, Line 1 - Organization Mission	-
East Texas Communities Foundation supports philanthopy by offering simple ways for	
donors to achieve their long-term charitable objectives. We manage and distribute	
charitable_funds_including_scholarships,_endowments,_designated_and_donor-advised	
funds.	
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.	
Professional service relationships such as accounting, legal, and financial services	
are carried on in the normal course of business.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
A draft copy of the Form 990 is reviewed by the Board. The Board discusses any	
questions or issues via conference call.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts	
The directors must disclose any conflict of interest on an annual basis.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Exec. Dir., or Top Mgtment	
The Board conducts an annual review of compensation paid and comparable salaries.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees	
The Board conducts an annual review of compensation paid and comparable salaries.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Financial statements are made available on the Foundation's website. The	
Foundation's governing documents, conflict of interest policy, and financial	_
statements are made available at the Foundation's office by request.	
Form 990, Part XI, Line 2 - Change of Oversight or Selection Process	
The Board of Directors added an Audit Committee as a standing committee of the	
board.	
	_

Schedu	le O (For	n 990) 2009	Page 2
Name of I	the organizati	on	Employer identification number
East	Texas	Communities Foundation	75-2309138
			-
			
			_
			
			
			_ _
			.
			.

Form 990 Schedule 1 - Part 2 Grants and Other Assistanct to Governmetns and Organziations in the United States EIN: 75-239138

Grantee Receiving \$5,000 or more

Alzheimer's Alliance of NE Texas Inc ,211 Winchester Drive Tyler, TX 75701 Total American Red Cross, Smith County Chapter, P O Box 8588 Tyler TX 75711 Total All Saints Episcopal School of Tyler, 2695 SSW Loop 323 Tyler, TX 75701 Total Ark United Campus Ministry at TVCC, P O Box 1802 Athens, TX 75751 Total Alliance Defense Fund Inc., 15100 N 90th Street Scottsdale, AZ 85260 Total American Cancer Society, 1301 S Broadway Tyler, TX 75701 Total Name and Address of organization or government Region All Regions Fax Year 2009

Association of Fundraising Professionals, P.O. Box 79099 Baltimore, MD 21279-0099 Total Baptist Missionary Association of America, PO Box 30910 Little Rock, AR 72260 Total

Baylor Healthcare System Foundation, 3600 Gaston Ave Suite 100 Dallas, TX 75246, 1800 Total Baylor University Financial Ald, Financial Ald Office PO Box #97028 Waco, TX 76798-7028 Total Athens Samaritans, Inc., P O Box 350 Athens, TX 75751 Total

Boy Scouts of America Council- East Texas, 1331 E Fifth Street Tyler, TX 75701-3415 Total Bethesda Health Clinic, 409 W Ferguson Tyler, TX 75702 Total

Brook Hill School Inc., 1051 N Houston St. Bullard, TX 75757 Total Cain Center Inc ,915 S Palestine Athens, TX 75751 Total

Campus Crusade for Christ Inc., 100 Lake Hart Dr., #2400 Orlando, Ft. 32832 Total

Children's Advocacy Center of Smith County, 2210 Frankston Highway Tyler, TX 75701 8900 Tota Childrens Village and Family Service Agency Inc. P O Box 6564 Tyler, TX 75711-6564 Total Christ Episcopal Church, 118 S Bols D'Arc Tyler, TX 75702 Total

Cystic Fibrosis Foundation, NE TX Chapter-Tyler,305 S Broadway, Ste 1000 Tyler, TX 75702 Total Crosswind Ministries, 5543 Edmondson Pike No 65 Nashville, TN 37211 Total City Of Tyler, 212 N Bonner Ave Tyler, TX 75702 Total

Disciples Clinic of Athens, Texas Inc., P.O. Box 1757 Athens, TX 75751 Total

East Texas Communities Foundation, 315 N Broadway, Suite 210 Tyler, TX 75702 Total Discovery Science Place Inc., 308 N Broadway Tyler, TX 75702 Total

East Texas Medical Center Foundation, PO Box 6400 Tyler, TX 75711 Total East Texas Regional Food Bank, 3201 Robertson Rd Tyler, TX 75701 Total East Texas Crisis Center, P O Box 7060 Tyler, TX 75711 Total

Educational Radio Foundation of East Texas Inc ,2721 € Erwin Tyler, TX 75708 Total East Texas Symphony Orchestra Association, PO Box 6323 Tyler, TX 75711 Total East Texas Rescue Mission, PO Box 5329 Tyler, TX 75712 Total

First Baptist Church of Athens, 105 S Carroll St Athens, TX 75751-2559 Total First Baptist Church of Carthage, 256 5 Market Carthage, TX 75633 Total

Fourth Partner Foundation, 601 Shelley Orlve, Ste 201 Tyler, TX 75701 Total First Baptist Church of Longview, 209 E. South St. Longview, TX 75601 Total First Presbyterian Church of Tyler, 230 West Rusk. Tyler, TX 75702 Total Focus on the Family,8605 Explorer Dr. Colorado Springs, CO 80920 Total

Grace Community Church, 3215 Old Jacksonville Highway Tyler, TX 75701 Total Girl Scouts of Hortheast Texas, 6001 Summerside Drive Dallas, TX 75252 Total Green Acres Baptist Church, 1607 Troup Highway 110 Tyler, TX 75701 Total Helping a Hero Org.5300 Memorial Dr. Ste 1070 Houston, TX 77007 Total Hospice Of East Texas, 4111 University Blvd Tyler, TX 75701 Total

Jean Cadet Restavek Freedom Foundation, 11160 Kenwood Dr. Cincinatti, OH 45242 Total Immaculate Conception Church, 423 S Broadway Ave Tyter, TX 75702 Total Junior League of Tyler, 1919 S Donnybrook Tyler, TX 75701 Total

Koinonia House, Inc., 4055 East 3rd Ave Post Falls, tD 83854 Total KCBI, PO Box 619000 Dallas, TX 75261-9000 Total

Make A-Wish Foundation of North Texas, 215 Winchester Or Suite 109 Tyler, TX 75701 Total Marvin United Methodist Church, 300 W Erwin Tyler, TX 75702 Total Mercy Ships, P O Box 2020 Garden Valley, TX 75771-2020 Total Meals on Wheels, P O Box 5475 Tyler, TX 75712-5475 Total

Methodist Children's Center of First UMC Athens, PO Box 911 Athens, TX 75751 Total

Northeast Texas Community College Foundation, PO Box 1307 Mount Pleasant, TX 75456 Total Pine Cove, Inc., P.O. Box 9055 Tyler, TX 75711-9055 Total PATH,402 W Front Street Tyler, TX 75702 Total

Poolville United Methodist Church, 230 North Church Street Poolville, TX 76487 Total Pittsburg-Camp County Public Library, 613 Quitman St. Pittsburg, TX 75686 Total Preston Hollow Presbyterian Church, 9800 Preston Road Dallas, TX 75230 Total Pleasant Hill Missionary Baptist Church, PO Box 131355 Tyler, TX 75713 Total

Regional East Texas Food Bank, P.O. Box 6974 Tyler, TX 75711 Total

Retina Foundation of the Southwest, 9900 N. Central Expwy. Dallas, TX 75231 Total SAFE-T PO Box 2337 Mount Pleasant, TX 75456 Total

Salvation Army, 633 North Broadway Tyler, TX 75702 Total

social Enterprise Fund, Inc., 114 Camphor Tree Ln. Alta Mount Springs, FL 32714 Total SI Paul Lutheran Church,4715 Frederick Ave St Joseph, MO 64506 Total Susan G Komen for the Cure Tyler Affiliate,PO Box 6217 Tyler, TX 75711 Total SIM,P O Box 7900 Charlotte, NC 28241 7900 Total

Amount of Cas Non-Cash Grant Valuation Descr Non-cash Assistance 10,100 00 5,000 00 13,100 00 501(C)3 54-1660459 75-2486061 23-7040934 75-0800605 58-1906647 36-4635594

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general operating support and capital projects

general operating and capital support

general operating support

general operating support

program support

general operating and program support

general operating support

scholarship fund

annual fund and capital projects

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75-1606705

26-0036674 75-0808767

75-2267838 71-0291297 55,000 00 31,200 00 5,000 00

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95 6006173 75-2748697 75-1634826 75-0926758

75-2514503

72,825 00 13,229 83

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75-6000697 75 2622043 13-1930701

general operating support and endowment support

general operating and annual support

eneral operating support

program support

city park improvements, capital projects

general operating support general operating support eneral operating support general operating support

5,000 00 12,100 00

5,000 00

77,603 38 141,365 10 28,300 00 501(C)3 501(C)3

75-2309138

75-2392134

26-3051949

26,200 00 10,000 00 31,060 68 501(C)3 501(C)3 501(C)3 501(C)3

44,375 92 23,000 00 75-0917405 501(C)3 751596264 501(C)3 501(C)3 0 S01(C)3 75-1641173 5 75-2695524 5 75-2222686 5 01-0850776 5

75-6013387

eneral operating support, endowment distribution and annual fund

general operating support

program support

general operating support and equipment

general operating and scholarship support

cneral operating support

eneral operating support eneral operating support eneral operating support general operating support

eneral operating support

leneral operating support, scholarship funds, program support

capital projects

general operating support and capital projects

disaster refief and operating support

8,000 00 7,500 00 16,250 00 45,000 00 501(C)3 0 501(C)3 75-0818161 95-3188150

5,000 00 304,972 00 30,000 00 45,000 00 501(C)3 501(C)3 501(C)3 751101571 75-1245705 75-2666792

eneral operating, grant and scholarship support

general operating support general operating support

general operating support

capital projects capital projects project support

12,500 00 5,000 00 5,250 00 501(C)3 501(C)3 20-1394387

501(C)3 501(C)3 75-6004616 75-1851420 20-5433598

7,957 38 5,000 00

5,500 00 501(C)3 501(C)3 20-8334578 75-0884075

5,000 00 13,000 00 501(C)3 237292636 501(C)3 0 501(C)3 75-6114836

25,500 00 5,100 00 75-2578237 23-7313019

general operating and scholarship support

eneral operating suppor

general operating support general operating support general operating support

eneral operating support

6,000 00 5,000 00 134,762 72 0 501(C)3 501(C)3 26-2414132

69,660 67 501(C)3 501(C)3 75-2008835

22,500 00 5,500 00 25,000 00 501(C)3 501(C)3 75-2422921 75-2033113 75-1379945 75-1254353

10,000 00 20,000 00 501(C)3 0 501(C)3

5,000 00 7,500 00 501(C)3 501(C)3 501(C)3 75 2631330 75-2361810 51-0151514 75-2222686 13-2923701 22-1936391

36,408 76 501(C)3 26-0431935

eneral operating support eneral operating support general operating support

general operating support

general operating support

general operating and program support

eneral operating support

general operating support

general operating support

program support

capital projects capital projects

scholarship and capital projects

general operating support

scholarship fund

cholarship, Founders Day, capital and annual fund

Purpose of Grant or Assistance

general operating support and annual Fund general operating support and annual Fund general operating support and disaster relie

Es 1 Texas Communities Foundation

Form 990 Schedule 1 · Part 2 Grants and Other Assistanct to Governmetns and Organziations in the United States

Grantee Receiving \$5,000 or more Region All Regions Tax Year 2009

Treas some recommendations in mine. Some asserting in the control of the control Texas A&M Foundation,1234 TAMU College Station, TX 77843-1234 Total

Texas A & M University, Financial Aid Office P O Box 30016 College Station TX 77842-3016 Total

Temple Beth El, 1010 Charleston Orive Tyler, TX 75703 Total

Tyler Day Nursery, 2901 West Gentry Parkway Tyler, TX 75702 Total Tyler Economic Development Council, PO Box 2004 Tyler, TX 75710-2004 Total

Tyler Junior College Foundation, P.O. Box 9020 Tyler, TX 75711 Total Tyler Museum of Art, 1300 S Mahon Ave Tyler, TX 75701 Total Tyler Junior College, P.O. Box 9020 Tyler, TX 75711 Total

United Way of Tyler/Smith County, 4000 Southpark Drive Suite 1200 Tyler, TX 75703 Total

75-0957331 501(C)3 74-6000203 501(C)3 75-1393366 501(C)3

75 6046816 :

University of Texas at Austin OSFS, Financial AId Office PO Box 7758. UTT Station Austin, TX 78713-7758 Total University of Texas at Tyler, 3900 University BM Tyler, TX 75799 Total

University of Texas at Tyler, 3900 University Blvd FAC 2100 Tyler, TX 75799 Total University of Texas at Tyler Foundation, Inc., P.O. Box 88 Tyler, TX 75710 Total University of Texas at Tyler, 3900 University Blvd Tyler, TX 75799 Total

Women's Symphony League, P.O. Box 6823. Tyler, TX 75711 Total Wycliffe Bible Translators, P.O. Box 628200 Orlando, Ft. 32862-8200 Total Youth With a Misson, P.O. Box 3000 Garden Valley, TX 75771-3000 Total

Grand Total

7,669 87 5,000 00 34,000 00 7,000 00 14,750 00 7,000 00 11,518 00 48,033 65 367,445 50 33,388 90 11,750 00 30,000 00 0 501(C)3 0 501(C)3 75-6027575

95-3494561 501(C)3 23 7136015 501(C)3

13,600 00

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general operating support program support

scholarship and general operating support general operating support

general operating and annual support

scholarship fund

scholarship funds

general operating support annual fund

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7,600 00 5,800 00 54,700 00 9,000 00

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75-0827467 75-6002676

75-2142549

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75 1152677 501(C)3 74 2245072 501(C)3 74 2245072 501(C)3 75 2541408 501(C)3 75 2541408 501(C)3 75 2726170 501(C)3

endowment distribution, general operating and program support scholarship fund

endowment distribution, general operating and capital project support

general operating support

scholarship and annual support scholarship funds

general operating and scholarship support

general operating support general operating support general operating support general operating support general operating support

general operating support cholarship funds

general operating support