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**Short Form  
Return of Organization Exempt From Income Tax**

**2009**

Department of the Treasury  
Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

**Open to Public  
Inspection**

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

**A For the 2009 calendar year, or tax year beginning , 2009, and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> River Pierce Foundation P.O. Box 249 San Ygnacio, TX 78067	<b>D</b> Employer identification number 76-0281751  <b>E</b> Telephone number 956-765-4144  <b>F</b> Group Exemption Number
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• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

**G** Accounting method:  Cash  Accrual  
 Other (specify) ▶

**I Website:** ▶ www.riverpierce.org

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**J Tax-exempt status (check only one)** —  501(c) ( 3 ) ◀ (insert no) | 4947(a)(1) or | 527

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 115,192.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)**

	<b>1</b> Contributions, gifts, grants, and similar amounts received		110,814.
	<b>2</b> Program service revenue including government fees and contracts		1,500.
	<b>3</b> Membership dues and assessments		
	<b>4</b> Investment income		2,878.
REVENUE	<b>5a</b> Gross amount from sale of assets other than inventory	5a	
	<b>5b</b> Less: cost or other basis and sales expenses	5b	
	<b>5c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	<b>6</b> Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	<b>6a</b> Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	<b>6b</b> Less: direct expenses other than fundraising expenses	6b	
	<b>6c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	<b>7a</b> Gross sales of inventory, less returns and allowances	7a	
	<b>7b</b> Less: cost of goods sold	7b	
	<b>7c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	<b>8</b> Other revenue (describe ▶ _____)	8	
	<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	▶ 9	115,192.
EXPENSES	<b>10</b> Grants and similar amounts paid (attach schedule) See Statement 1	10	200.
	<b>11</b> Benefits paid to or for members	11	
	<b>12</b> Salaries, other compensation, and employee benefits	12	
	<b>13</b> Professional fees and other payments to independent contractors	13	5,082.
	<b>14</b> Occupancy, rent, utilities, and maintenance	14	7,100.
	<b>15</b> Printing, publications, postage, and shipping	15	134.
	<b>16</b> Other expenses (describe ▶ See Statement 2)	16	95,186.
	<b>17 Total expenses.</b> Add lines 10 through 16	▶ 17	107,702.
	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	18	7,490.
ASSETS	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	954,373.
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20.	▶ 21	961,863.

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)		(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments		130,184.	137,674.
<b>23</b> Land and buildings		824,189.	824,189.
<b>24</b> Other assets (describe ▶ _____)		24	
<b>25 Total assets</b>		954,373.	961,863.
<b>26 Total liabilities</b> (describe ▶ _____)		0.	0.
<b>27 Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)		954,373.	961,863.

**BAA** For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 990-EZ (2009)

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Part III Statement of Program Service Accomplishments (See the instructions.)		Expenses
What is the organization's primary exempt purpose? <u>Promote cultural programs</u>		(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts; optional for others.)
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	<u>See Statement 3</u> ----- ----- (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	28 a
29	----- ----- (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	29 a
30	----- ----- (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	30 a
31	Other program services (attach schedule) . . . . . (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	31 a
32	<b>Total program service expenses</b> (add lines 28a through 31a) . . . . .	<b>32</b>

**Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instrs.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
<u>Frank Rotnofsky</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	President 5.00	0.	0.	0.
<u>Gustavo Acevedo, Jr</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Vice President 1.00	0.	0.	0.
<u>Jody Blazek</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Treasurer 1.00	0.	0.	0.
<u>Virginia Leberman</u> ----- P.O. Box 249 ----- Houston, TX 77027	Director 1.00	0.	0.	0.
<u>Adriana M. Lopez</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Director 1.00	0.	0.	0.
<u>Don Mullins</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Director 1.00	0.	0.	0.
<u>Adam Tracy</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Director 1.00	0.	0.	0.
<u>Charles Adams</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Director 1.00	0.	0.	0.
<u>John Wotowicz</u> ----- P.O. Box 249 ----- San Ygnacio, TX 78067	Director 1.00	0.	0.	0.
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**Part V Other Information** (Note the statement requirements in the instrs for Part V.)

		Yes	No
<b>33</b>	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity . . . . .		X
<b>34</b>	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes . . . . .		X
<b>35</b>	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. <b>See Statement 4</b>		
<b>35a</b>	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .		X
<b>35b</b>	b If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>36</b>	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N . . . . .		X
<b>37a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> 0.		
<b>37b</b>	b Did the organization file <b>Form 1120-POL</b> for this year? . . . . .		X
<b>38a</b>	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .		X
<b>38b</b>	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved . . . . .		N/A
<b>39</b>	Section 501(c)(7) organizations Enter:		
<b>39a</b>	a Initiation fees and capital contributions included on line 9 . . . . .		N/A
<b>39b</b>	b Gross receipts, included on line 9, for public use of club facilities . . . . .		N/A
<b>40a</b>	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0.		
<b>40b</b>	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 . . . . .		X
<b>40c</b>	c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ 0.		
<b>40d</b>	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ 0.		
<b>40e</b>	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T . . . . .		X
<b>41</b>	List the states with which a copy of this return is filed ▶ <u>None</u>		

**42a** The organization's books are in care of ▶ Jody Blazek Telephone no. ▶ 713-439-5739  
 Located at ▶ 2900 Wesleyan, Ste. 200 Houston TX ZIP + 4 ▶ 77027

		Yes	No
<b>42b</b>	b 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)? If 'Yes,' enter the name of the foreign country: ▶ _____		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.			
<b>42c</b>	c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ▶ _____		X

**43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here . . . . . ▶  N/A  
 and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ **43** N/A

		Yes	No
<b>44</b>	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ . . . . .		X
<b>45</b>	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ . . . . .		X

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51. See Statement 5

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. . . . .		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II. . . . .		X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E . . . . .		X
49a Did the organization make any transfers to an exempt non-charitable related organization? . . . . .		X
b If 'Yes,' was the related organization a section 527 organization? . . . . .		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 . . . . . ▶ \_\_\_\_\_

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000. . . . . ▶ \_\_\_\_\_

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

**Sign Here** Date

▶ Christopher Rincon 5 May 2010

Signature of officer Date

▶ CHRISTOPHER RINCON, EXECUTIVE DIRECTOR

Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature ▶ [Signature] CPA Date 4-21-10

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Blazek & Vetterling

2900 Wesleyan, Suite 200

Houston, TX 77027-5132

Check if self-employed ▶  Preparer's Identifying Number (See instructions) N/A

EIN ▶ N/A

Phone no ▶ (713) 439-5739

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶  Yes  No



**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 beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	6,000.	182,493.	322,049.	346,201.	110,814.	967,557.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 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 the public without charge						0.
4 <b>Total.</b> Add lines 1-through 3	6,000.	182,493.	322,049.	346,201.	110,814.	967,557.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						599,847.
6 <b>Public support.</b> Subtract line 5 from line 4						367,710.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	6,000.	182,493.	322,049.	346,201.	110,814.	967,557.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2.	134.	151.	15.	2,878.	3,180.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
11 <b>Total support.</b> Add lines 7 through 10						970,737.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 <b>First five years.</b> 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						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	37.9 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	35.6 %
16a <b>33-1/3 support test – 2009.</b> 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.	<input checked="" type="checkbox"/>	
b <b>33-1/3 support test – 2008.</b> 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.	<input type="checkbox"/>	
17a <b>10%-facts-and-circumstances test – 2009</b> 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.	<input type="checkbox"/>	
b <b>10%-facts-and-circumstances test – 2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
18 <b>Private foundation.</b> If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

**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	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5.						
<b>7a</b> Amounts included on lines 1, 2, 3 received from disqualified persons						
<b>b</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 year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (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
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (add lns 9, 10c, 11, and 12.)						
<b>14 First five years.</b> 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. <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)).	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2009</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2008</b> Schedule A, Part III, line 17	<b>18</b>	%

- 19a 33-1/3 support tests – 2009.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33-1/3 support tests – 2008.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.



River Pierce Foundation

76-0281751

Statement 3 (continued)  
Form 990-EZ, Part III, Line 28  
Statement of Program Service Accomplishments

Understanding that the area is a destination of choice to ornithologists, the River Pierce Foundation encourages the propagation of indigenous flora, with emphasis on the desert willow flor de mimbres, whose orchid-like flowers are attractive to hummingbirds. The publication Sacrifice II, 13.4.90: The River Pierce (Rice University Press, 1990) documents an international collaboration of artists and a symposium sponsored by the Foundation creatively exploring the bicultural history of the region. In 1998, the Foundation's video Culture, Water, Money: The Passion of the Frontier, concerning the contamination of the Rio Grande, was designated best economic documentary by the New York International Film Video Festival. The River Pierce Foundation welcomes the support of individual donors as well as regional and national organizations similarly devoted to cultural interpretation and historic preservation.

Statement 4  
Form 990-EZ, Part V, Line 35  
Reason for Income Not Reported on Form 990-T

Conference revenue received as a part of the NEA "Your Town" Design Guideline Conference in the Treviño-Urbe Rancho, a National Historic Landmark, a very appropriate setting for a conference of this nature.

Statement 5  
Form 990-EZ, Part VI  
Regarding Transfers Associated with Personal Benefit Contracts

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?..... No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?..... No

River Pierce Foundation

76-0281751

**Statement 1**  
**Form 990-EZ, Part I, Line 10**  
**Grants and Similar Amounts Paid**

Class of Activity:	General Support		
Donee's Name:	A.L. Benavides Elementary		
Donee's Address:	P.O. Box 219		
	Zapata, TX 78076		
Cash Amount Given:		\$	200.

**Statement 2**  
**Form 990-EZ, Part I, Line 16**  
**Other Expenses**

Advertising and Promotion	\$	1,506.
Archeology classes		6,863.
Conferences, Conventions, and Meetings		2,737.
Dues & Subscriptions		731.
Insurance		1,406.
Maintenance-historic property		5,318.
Office Expenses		3,626.
Repairs & Restoration		71,651.
Travel		1,348.
Total	\$	<u>95,186.</u>

**Statement 3**  
**Form 990-EZ, Part III, Line 28**  
**Statement of Program Service Accomplishments**

The River Pierce Foundation works to preserve and make known the colonial character of the historic village of San Ygnacio, Texas, a significant element of the farms, ranches, cities and towns that make up the Los Caminos del Rio Heritage Corridor of the Lower Rio Grande Valley, Texas. Foundation programs and individual contributions from the private sector support the acquisition, preservation, and creative re-use of historic sites, with special emphasis on the early 19th century sandstone complex of the Treviño-Urbe Rancho, sited on a bluff overlooking the Rio Grande. Designated a National Historic Landmark by the National Park System, and as one of the nation's most endangered historic sites by the National Trust for Historic Preservation, the fortified complex is one of the few surviving artifacts of Spanish colonial architecture in South Texas.

The River Pierce Foundation provides site access to the structures in its care to students of architecture, historians, and an interested public, sponsoring educational programs that have included visiting educators, symposia, workshops, and artist residencies in local schools. The Foundation's founder, Michael Tracy, completed the restoration of the important sandstone structures of the historic Zaragosa-Dominguez residence in 1984. Expressing concern for the historic character of the San Ygnacio plaza, the Foundation has undertaken the stabilization and restoration of San Ygnacio National Register District, including the Treviño-Urbe Rancho (1830, National Historic Landmark since 1998), the Manuel Sánchez residence (1874), the Guadalupe Martinez residence (1874) as well as the adaptation of the former Lozano general store nearby, as a possible site for a visitors' center. The Foundation's restoration work is guided by a report it commissioned in 2003 to assess the condition of the Treviño-Urbe Rancho and Sanchez House, and provides an estimate for rehabilitation and selective restoration of these sites.