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Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

<u> 2009</u> Open to Public Inspection

A	For the 200	9 calendar year, or tax year beginning 09/01/09 , and ending 08/31/1	.0		
_	Check if applica Address change	use IRS		·	loyer identification number
	Name change	print or Doing Business As		76	-0512266
$\exists$	Initial return	type. Number and street (or P O box if mail is not delivered to street address)  See 4015 Avenue Q	Room/suite		ohone number 9-944-1302
	Termination	Specific City or town, state or country, and ZIP + 4		<b>G</b> Gross re	ceipts \$ 472,117
	Amended return				
Ī	Application pen	F Name and address of principal officer		H(a) Is the	s a group return for
	,	Joe Huff			ates? Yes X No
		same as C above		H(b) Are a	
				If "No	o," attach a list (see instructions)
	Tax-exempt	<del></del>		11(-) 0	
		www.gc.edu  tation X Corporation Trust Association Other ► L	Van of farmelias 1	996	M State of legal domicile TX
	Part I	xation   X   Corporation   Trust   Association   Other ▶   L   Summary	Year of formation 1	<u> </u>	M State of legal domicile TX
<u> </u>	1	ly describe the organization's mission or most significant activities			
_		UPPORT FOR COMMUNITY COLLEGE			
2	-				
ž,	•				
Activities & Governance	2 Che	ck this box	5% of its net ass	ets	
,Õ,	3 Num	ber of voting members of the governing body (Part VI, line 1a)	.0 /0 01 113 1101 030	з	21
جي 1	4 Num	ber of independent voting members of the governing body (Part VI, line 1b)		4	21
říě	5 Tota	I number of employees (Part V, line 2a)		5	0
7 <u>ê</u>	6 Tota	I number of volunteers (estimate if necessary)		6	0
		I gross unrelated business revenue from Part VIII, column (C), line 12		7a	
H		unrelated business taxable income from Form 990-T, June 34		7b	0
		;_ WED	Prior Yea		Current Year
5	1	ributions and grants (Part-VIII, line 1h)	124	<b>1,</b> 089	297,527
Revenue TEL	9 Prog	ram service revenue (Part VIII, line 2g)	44.	010	150 101
ۿۣۅ		stment income (Part VIII, column (A), lines 3, 4, and 7d)		3,919	<del></del>
_		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,026	
		I revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<del>•</del>	1,196	
	1	nts and similar amounts paid (Part. IX, column (A), lines 1-3)	184	4,291	1,443,604
	1 45 0-1-	efits paid to or for members (Part IX, column (A), line 4)			-
penses	15 Sala	nes, other compensation, employee benefits (Part IX, column (A), lines 5–10) essional fundraising fees (Part IX, column (A), line 11e)			<del></del>
en en	h Tota	I fundraising expenses (Part IX, column (D), line 25) ▶			
Ĕ	1	er expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	7	3,288	130,788
	l	I expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		7,579	
		enue less expenses Subtract line 18 from line 12		5,383	<del></del>
5	2	5.11.5 10.5 0.5 0.5 0.5 0.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1	Beginning of Cur		End of Year
Net Assets or	<b>20</b> Tota	l assets (Part X, line 16)		2,350	
A A	<b>21</b> Tota	I tiabilities (Part X, line 26)		3,035	
		assets or fund balances Subtract line 21 from line 20	6,40	9,315	5,481,290
<u>_</u> F	Part II	Signature Block			
		Under penalties of penjury, I declare that I have examined this return, including accompanying schedule and belief, it is true, correct and complete Declaration of preparation than officer) is based on all in	s and statements, a	ind to the b	pest of my knowledge
٥.		Jan of F. W. Atori		1 4	3-22-2011
	gn	- YIMEEN SHELLING			
пе	ere	Signature of officer		Dat	e
		Type or print rame and title			<del></del>
		A A A PA Data	Check	.f	Preparer's identifying number
Pa	nid	Preparers	self-	Г	(see instructions)
	eparer's		21/11 employ		<u> </u>
	se Only	Firm's name (or yours of self-employed).  DRDA, PLLC  1011 Tremont	-	EIN	
	•	if self-employed), address, and ZIP + 4 Galveston, TX 77550		Phone	• ▶ 409-765-9311
<u></u>	v the IDS d	scuss this return with the preparer shown above? (see instructions)		no	
_	<del></del>	ct and Paperwork Reduction Act Notice, see the separate instructions.	_	<u> </u>	Yes   No   Foftn 990 (2009)
DA		os ana i aparmoni nocucioni nocutori sociale dio separate metrolici.			M 330 (20/3)

Form 990 (2009)	Galveston College F	oundation	76-0512266	Page 2
Part III S	tatement of Program Service	Accomplishments		
•	tibe the organization's mission			
SUPPORT	FOR COMMUNITY COLLI	EGE		
2 Did the orga	nization undertake any significant progr	am services during the year which v	vere not listed on	
the pnor For	m 990 or 990-EZ?			Yes X No
	cribe these new services on Schedule (			
-	nization cease conducting, or make sig	nificant changes in how it conducts,	any program	
services?	cribe these changes on Schedule O			Yes X No
	e exempt purpose achievements for each	h of the organization's three largest	program services by expenses	
	(c)(3) and 501(c)(4) organizations and s			
	o others, the total expenses, and reveni			
4a (Code		094 including grants of \$	1,443,604 ) (Revenue \$	<b>458,756</b> )
•	ATION FORMED TO GENT			
	, GALVESTON, TEXAS, NG UNIVERSAL ACCESS			
	WILL ENSURE THAT E			
	LVESTON RESIDENT WIL			
	, REGARDLESS OF THE			
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
(5555	, (=:\$0::000 \$	water and grante at t	, (	•
		•		
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
•				••
	•	•		•
	•		•	•
		·		•
			•	
Ad Other press	am services (Describe in Schedule O.)			
(Expenses	,	grants of \$	) (Revenue \$	)
	am service expenses 1	445.094	, (	

<u> </u>	attra Checkhat of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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,"	6		x
7	complete Schedule D, Part I  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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			<del></del>
U	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	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? If "Yes," complete Schedule D, Part V	10	x	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
-	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
4.0	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12	x	
42A	Schedule D, Parts XI, XII, and XIII  Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	12		
124	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	-	14a	_	X
b				
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1		l .
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	]		
	If "Yes," complete Schedule G, Part III	19	-	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	X
		For	n <b>990</b>	<i>t</i> (2009

			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 12 if "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u>x</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		į	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		1		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		<u> </u>
29	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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			<b>.</b>
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			٠,,
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related	l		٠,
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			,,
	Part VI	37		X
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	X	(0000)

Pa	int v Statements Regarding Other IKS Filings and Tax Compliance				<del>- 1</del>		
4.	Fater the number recorded in Day 2 of Farm 1000. Applied Summers and Transmitted of			Г		Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	.					+
L	U.S. Information Returns. Enter -0- if not applicable	1a				ł	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable payments to vendors and reportable payments to vendors and reportable payments.	ortabi	е	Į.	4.		x
2a	gaming (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			<u> </u>	1c		
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns				2b	İ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	113					
	instructions)				1		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d bv					
-	this return?	,			3а		x
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 a	authori	tv		-		
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		•	İ			
	account)?				4a		x
b	If "Yes," enter the name of the foreign country			Ī	7		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank		Į		ŀ	
	and Financial Accounts			-			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?			5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarders.	arding					
	Prohibited Tax Shelter Transaction?		•	L	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е			ŀ		
	organization solicit any contributions that were not tax deductible?			L	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or					
	gifts were not tax deductible?			Ļ	6b		
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods					
	and services provided to the payor?				7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S			_		
	required to file Form 8282?			-	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	31		_		
f	benefit contract?	2012			7e 7f		
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contributions of qualified intellectual property, did the organization file Form 8899 as required?	dC( '		-	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	` ac		<u> </u>	<u>/ y</u>		
"	required?			İ	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					1	
	organization, have excess business holdings at any time during the year?				8	1	
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?				9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b		
10	Section 501(c)(7) organizations. Enter			·			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter			7			
а	Gross income from members or shareholders	11a				l	
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1			
	amounts due or received from them.)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		) I		12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>			200	
					Form	990	(2009)

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. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct x supervision of officers, directors or trustees, or key employees to a management company or other person? 3 x 4 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members 7a of the governing body? 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Яa X Each committee with authority to act on behalf of the governing body? 8b is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a X 10a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X 11 Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a X Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests that could give X rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions ) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ JOE HUFF 4015 AVE Q TX 77550 409-944-1302 **GALVESTON** 

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

K Check this box if the organization (A)  Name and Title	(B) Average			(0	C) k all 1	that a	(vlgo	(D) Reportable	(E) Reportable	(F) Estimated		
	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
ALL OFFICERS AND	DIRECTO	RS						0	0			
ARE VOLUNTEERS AN	TD							0	o			
SERVE WITH -0-								0	0			
COMPENSATION0-								0				
EXPENSE ACCOUNTS	AND							0		ı		
-0- BENEFITS	-							0				
SEE ATTACHED LIST	•							0				
								•	,			
•												
									-	-		
									-			
			-									
		-										

<u>Part</u>		Γ	tees	, K <u>e</u>	-		yees	, an	d Highest Compensated	· · · · · · · · · · · · · · · · · · ·						
	(A) Name and Title	(B) Average hours per	Posi	tion (	checl Officer		Highest compensated employee		(D) Reportable compensation	(E) Reportable compensation		(F) stimated nount of				
		week	or director					Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	com fr org and	other pensation om the anization direlated anizations	I			
						ļ 										
		1														
		<u> </u>														
	Total	<u>i</u>						L								
2	Total number of individuals (in reportable compensation from	-		_	thos	e lıs	ted a	bov	e) who received more than	\$100,000 in						
	•								nua ar bishaat aamaana	to d		Ye	s No			
4	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on lin	" complete Scheen e 1a, is the sum	dule of re	J for	suc able	h ind	dıvıdı ipens	ial satio	on and other compensation	from		3	x			
	the organization and related or individual Did any person listed on line										_	4	x			
	services rendered to the orga ion B. Independent Contract	nızatıon? If "Yes,										5	X			
1	Complete this table for your fi compensation from the organ	ve highest comp	ensa	ted i	nde	pend	lent o	cont	ractors that received more	than \$100,000 of						
	Name and	(A) d business address							Descrip	(B) blion of services		(C) Comper	) isation			
								ļ .								
			_					_								
	<del></del>															
								-		<del>-</del>						
	Total number of independent	contractors (incli	uding	but	not	lımıt	ed to	tho	se listed above) who receiv	ved						
DAA	more than \$100,000 in compo	ensation from the	orga	aniza	ation	<u> </u>						0 Form <b>9</b> 9	<b>30</b> (2009)			

		ent of Reve				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated can	paigns	1a		9,885				
b	Membership di	ues	1b						
С	Fundraising ev	ents	1c						
	Related organi		1d						
	Government grants (		1e		182,129				1
f	All other contribution and similar amounts		1f		105,513	•			
^	Noncash contribution	ne included in lines 1s	·		42,129				-
_	Total. Add line		rii <b>y</b>		<b>D</b>	297,527			
	TOTAL TITLE	<u> </u>		1	Busn. Code		-	<del>.</del>	<u> </u>
2a				Ì	Busin: Gode		· <del>-</del> · · · · · · · · · · · · · · · · · · ·	···	<del></del>
b				Ì		-			
c				İ	<u> </u>				<u> </u>
d				İ					_
				Ì					-
f	All other progra	am service reve	nue	ŀ					<del></del>
	Total. Add line			·	<b>•</b>				
	Investment inc		dividend	ls interes				· · · · · · · · · · · · · · · · · · ·	
_	other similar a		dividend	13, IIICT C.	,, and	173,765			173,70
4	Income from in		v-evemn	t bond or	nceeds -	270,700			
	Royalties	ivestillent of tax	v-evenib	t bond pr	b ceeds				<u> </u>
	rtoyanies	(ı) Real		(u) Pe	ersonal			· · · -	<u> </u>
6a	Gross Rents	(1) 1 (6.1)		(,	Journal				
	ł								
	Less rental exps Rental inc or (loss)		<del>-  </del> -						
	Net rental inco	me or (loss)			•				
	Gross amount from	(i) Securitie	, T	(u) (	Other				
	sales of assets	(i) Godania							
h	other than inventory Less cost or other								
	basis & sales exps	13	, 361						
_	Gain or (loss)		,361						
	Net gain or (los		, , , ,		•	-13,361	-13,361		
	Gross income from		ante [				23,302		
Va	(not including \$	in randialsing eve							
		eported on line 1c	, l						
	See Part IV, line		" a						
h	Less direct ex		ъ Г						
	Net income or	•		events					
	Gross income fro			0.0/0			· · · ·		
"	See Part IV, line		a						
h	Less direct ex		БÌ						
	Net income or	-		vities	<b>•</b>				
	Gross sales of		·	***************************************					
	returns and all	-	a						
Ь	Less: cost of g		ъ́Г			İ			
	Net income or			entory	▶				
<del>-</del> ٽ		ellaneous Revenu			Busn. Code				
11a						825	825		
b		•							
°			-						
	All other rever								-
	Total. Add line	-		. 1	<b>•</b>	825			•
6		e. See instruction				458,756	-12,536		0 173,7

Form 990 (2009)

#### 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 o				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D)</b> Fundraising
_7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	1,443,604	1,443,604		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
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,				
5	· · ·				
_	trustees, and key employees		<del></del>		<del>_</del> _
6	Compensation not included above, to disqualified		ļ.	İ	
	persons (as defined under section 4958(f)(1)) and	İ			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	14,453		14,453	
d	Lobbying		·		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	44,547		44,547	
g g	Other				
12	Advertising and promotion	1,490	1,490		
13	Office expenses	44,977		44,977	
14	Information technology			32/3//	
	~ · · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
15	Royalties				
16	Occupancy	1,195	•	1,195	
17	Travel	1,195		1,195	
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			<u> </u>	
23	Insurance				
24	Other expenses. Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
a	UA and GC Bookstore	17,668		17,668	
b	Business Expenses - Other	4,365		4,365	
c	Miscellaneous Expense	1,293		1,293	
d	Foreign Taxes	593		593	
e	Books, Subscriptions, Ref	182	· · · · ·	182	
f	All other expenses	25	+	25	
25	. <u> </u>	1,574,392	1,445,094	129,298	
26		-,0.2,002	-,, 0, 2		
20	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
DAA	fundraising solicitation .				Form <b>990</b> (2009)
					rom 330 (2003)

_	art X	<del></del>	uacion			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			1	39,159
	2	Savings and temporary cash investments		2,502,581	2	1,578,114
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors,	trustees, key			
		employees, and highest compensated employees Com	plete Part II of	ļ		
		Schedule L			5	
4.5	6	Receivables from other disqualified persons (as defined	under section			
		4958(f)(1)) and persons described in section 4958(c)(3)	(B) Complete			
		Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
SS	8	Inventories for sale or use		8		
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities		3,969,769	11	3,897,402
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		15	40,794	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)	6,472,350	16	5,555,469
	17	Accounts payable and accrued expenses		59,541	17	23,685
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, truste	ees, key			
Ē		employees, highest compensated employees, and disq	ualified			
Ë		persons Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrelated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated third p	parties		24	
	25	Other liabilities Complete Part X of Schedule D		3,494	25	50,494
	26	Total liabilities. Add lines 17 through 25		63,035	26	74,179
S		Organizations that follow SFAS 117, check here ▶ 2	K and			
ဋ		complete lines 27 through 29, and lines 33 and 34.				
<u>ā</u>	27	Unrestricted net assets		898,201		951,740
B	28	Temporarily restricted net assets		2,179,802		1,168,238
Þ	29	Permanently restricted net assets		3,331,312	29	3,361,312
Ē		Organizations that do not follow SFAS 117, check he	ere 🕨 🗍			
Ξ		and complete lines 30 through 34.	_			
S	30	Capital stock or trust principal, or current funds			30	
set	31	Paid-in or capital surplus, or land, building, or equipmen	nt fund		31	
AS	32	Retained earnings, endowment, accumulated income, of			32	
Net Assets or Fund Balances	33	Total net assets or fund balances		6,409,315		5,481,290
ž	34	Total liabilities and net assets/fund balances		6,472,350	34	5,555,469

Form **990** (2009)

orm	n 990 (2009) Galveston College Foundation 76-0512266		Pag	ge <b>12</b>
Pa	art 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	Х	
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	_X_	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	I 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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or guidite, evalure why in Schodulo O and decembs any stone token to undergo such guidite	25		l

Form **990** (2009)

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

**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

Department of the Treasury Internal Revenue Service Name of the organization

Galveston College Foundation

Employer identification number

76-0512266 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c | Type III-Functionally integrated a Type I Type II d | Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes Nο and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(ııı Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (rv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of the organization in nanization in col organization (described on lines 1-9 in col (i) listed in your support col (I) of your (i) organized in the above or IRC section governing document? US? (see instructions)) support? Yes Yes No No No Yes

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Galveston College Foundation 76-0512266 Page 3 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 year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 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 Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (c) 2007 (a) 2005 **(b)** 2006 (d) 2008 (e) 2009 (f) Total Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carned on Other income Do not include gain or 12 loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (Add lines 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 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 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 Investment income percentage from 2008 Schedule A, Part III, line 17 18 18 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

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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Galveston College Foundation

76-0512266

Page 4

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

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public

Inspection Employer identification number Name of the organization Galveston College Foundation 76-0512266 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ \_ \_ \_ \_ \_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items. Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

sche	dule D (Form 990) 2009 Galveston	Correge For	ndation	76-03	12200			Page	<u> </u>
Pa	rt III Organizations Maintaining (	Collections of Art,	Historical Treas	ures, or Other	Similar A	ssets (	continu	ed)	_
3	Using the organization's acquisition, accession collection items (check all that apply).	, and other records, che	eck any of the followin	g that are a signific	ant use of its		· -	·	
а	Public exhibition	<b>d</b> Loan	or exchange program	ıs					
b	Scholarly research	e Othe							
c	Preservation for future generations	- 🗀	·			_			
	Provide a description of the organization's colle	ections and explain how	they further the organ	nization's exempt p	urpose in				
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be	eceive donations of art,	, historical treasures, of the organization's co	or other similar			Yes	□ No	•
Pa	rt IV Escrow and Custodial Arrar		<u> </u>		"Yes" to F	orm 9			<u>_</u>
	IV, line 9, or reported an amo				100 101	01111 01	oo, r ar	•	
12	Is the organization an agent, trustee, custodian			er assets not	. —				_
ıa	included on Form 990, Part X?	or other intermediary i	or contributions of our	ici assets not			Yes	□ No	•
h	If "Yes," explain the arrangement in Part XIV ar	nd complete the follows	na tahle					···	•
b	in res, explain the analogement in rait XIV at	ia complete the lonown	ig table				Amount		
_	Beginning balance				1c				
	Additions during the year				1d				
	Distributions during the year				1e				
	Ending balance				1f				
f 20	Did the organization include an amount on Forr	m 000 Part V line 212						N	_
	If "Yes," explain the arrangement in Part XIV	11 550, Falt X, IIIIe 217					∐ Yes	NO	,
	rt V Endowment Funds. Comple	te if organization :	answered "Yes" t	o Form 990 Pa	art IV line	10			-
	Litte Engowinent i unus. Compic	(a) Current year	(b) Prior year	(c) Two years back	(d) Three yea		(e) Four y	ears back	_
12	Beginning of year balance	5,511,113	5,466,643	(0)	(4)		(-//		_
	Contributions	336,105	110,750						_
	Net investment earnings, gains,	000,200	220,700						_
·	and losses								
٨	Grants or scholarships	1,317,668	66,280						_
	Other expenditures for facilities	2,027,000	00,200						-
-	and programs					ŀ			
	Administrative expenses								_
	End of year balance	4,529,551	5,511,113						-
2	Provide the estimated percentage of the year e		3,322,223		<u> </u>				_
	Board designated or quasi-endowment	%							
	Permanent endowment > 74.21 %	· ·							
	Term endowment ▶ 25.79 %								
	Are there endowment funds not in the possess	ion of the organization	that are held and adm	unistered for the					
Ja	organization by	on or the organization	and and field and adm				[	res No	<u> </u>
	(i) unrelated organizations						3a(i)	X	
	(ii) related organizations	•			•		3a(ii)	X	
b	If "Yes" to 3a(ii), are the related organizations li	isted as required on So	hedule R?				3b		_
	Describe in Part XIV the intended uses of the co	•							_
	rt VI Investments—Land, Buildin			0. Part X. line 1	0.				_
	Description of investment	(a) Cost or other basis	(b) Cost or oth	ner (c) Ac	cumulated	T	(d) Book v	alue	_
		(investment)	basis (other)	, dep	reciation	<del></del>			_
	Land			<del></del>		+		-	_
	Buildings					+			_
	Leasehold improvements					+-		_	_
	Equipment .		+			+			_
	Other		-1 (D) 1 - 40( ) )					-	_
Tota	. Add lines 1a through 1e (Column (d) must eq	uai Form 990, Part X, c	olumn (B), line 10(c).)	· .	<u> </u>	<u> </u>			_

Schedule D (Form 990) 2009 Galveston College For	mation	/0-0312200	Page <b>3</b>
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	/alue
Financial derivatives			<del>-</del>
Closely-held equity interests			-
Other			
			<del></del>
<b></b>			
<del> </del>		·	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 9	1		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market	
·			
· · · · · · · · · · · · · · · · · · ·			
	ļ		
		<del></del>	<u>.</u>
	<del> </del>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.	<del></del>		
(a) Description		(b	) Book value
	<u> </u>		
T. 1. 1 (O.1 (5) 1 (5 000 Pert V est (P) tree 45)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )  Part X Other Liabilities. See Form 990, Part X, line 3	25		<del></del>
1 (a) Description of liability	(b) Amount		<u>-</u>
Federal income taxes	(0) /		
Agency Transactions Due to Others	50,494		
11301103 1141111111111111111111111111111	1		
······································			
· _			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	50,494		
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the org	anızatıon's financıal statemer	nts that reports the	

organization's liability for uncertain tax positions under FIN 48

Schedule D (Form 990) 2009

	dule D (Form 990) 2009 Galveston College Foundation		76-051226		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audi</u>	ted Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	458,756
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	1,574,392
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-1,115,636
4	Net unrealized gains (losses) on investments			4	132,517
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV )			8	
9	Total adjustments (net) Add lines 4 through 8			9	132,517
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	-983,119
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts V	Vith Revenue per Re	turn	<u> </u>
1	Total revenue, gains, and other support per audited financial statements			1	591,273
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1	1 400 -4-		
а	Net unrealized gains on investments	2a	132,517		
Ь	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
е	Add lines 2a through 2d			2e	132,517
3	Subtract line 2e from line 1	r	1	3	458,756
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
•	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	458,756
<u>Pa</u>	rt XIII Reconciliation of Expenses per Audited Financial Statement	ents '	With Expenses per F	Retur	
1	Total expenses and losses per audited financial statements			1_	1,574,392
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	t		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c		ļ	
d	Other (Describe in Part XIV)	2d		l	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	r	1	3_	1,574,392
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,574,392
	nt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lii				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lin	nes 2d	and 4b. Also complete		
this p	part to provide any additional information.				
	<b></b>				
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Schedu Part	XIV	j	Sun	nler	nen	tal I	Info	rma	ation	(co	ntinu	ed)							•										
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SCHEDULE I (Form 990) epartment of the Treasury

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States

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

► Attach to Form 990.

Employer identification number

2009 Open to Public Inspection

OMB No 1545-0047

ŝ New Student Center X Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (h) Purpose of grant Scholarship Scholarship or assistance ☐ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to NA D ပ္ပ non-cash assistance (g) Description of 76-0512266 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant assistance (book, FMV, appraisa). 147,955 44,372 1,250,000 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable 200 9 9 Galveston College Foundation General Information on Grants and Assistance (p) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? The Abe and Annie Siebel Foundation TX 77550 TX 77550 TX 77550 (a) Name and address of organization UA Scholarship Expenses or government GC Scholarships 4015 Avenue Q O 4015 Avenue Q 4015 Avenue Galveston Galveston Galveston Part II Part I

3 Enter total number of other organizations

Experience Are and Panerwork Reduction Act Notice see the Instructions for Fo

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) 2009

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 Name of the organization

Part I

Galveston College Foundation Types of Property

Employer identification number 76-0512266

		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues	9		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles					_		
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation	1						
	contribution—Historic							
	structures							
14	Qualified conservation		1					
	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶( Office Space	<u> </u>	1	42,129				
26	Other ►(	) <u> </u>						
27	Other ►(	)			<u></u>			
28_	Other ►(							
29	Number of Forms 8283 received by							
	which the organization completed F	om 8283,	Part IV, Donee Acknowl	edgement	29			
							Yes	No
30a	• •		• • • •	• •				ĺ
	it must hold for at least three years	from the da	ate of the initial contribut	ion, and which is not requir	red to be	]		
	used for exempt purposes for the e	ntire holdın	g penod?	•		30a	<b>—</b> —	X
b	If "Yes," describe the arrangement							
31	Does the organization have a gift a	cceptance	policy that requires the r	eview of any non-standard				
	contributions?					31	igsquare	X
32a	Does the organization hire or use the	nird parties	or related organizations	to solicit, process, or sell r	noncash			
	contributions?	,				32a	igspace	X
b	If "Yes," describe in Part II							1
33	If the organization did not report rev	enues in c	column (c) for a type of p	roperty for which column (a	i) is checked,			
	describe in Part II					<u> </u>	ш	<u> </u>
For F	Privacy Act and Paperwork Reduction	Act Notice,	see the Instructions for F	orm 990.	Schedule	∌M (Fo	rm 990	)) 2009

Page 2

Schedule M (Form 990) 2009 Galveston College Foundation 76-0512266

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

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Galveston College Foundation

Employer identification number

76-0512266

Form 990, Part III, Line 4d - All Other Achievements
To generate support for Galveston College.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 Review of Form 990 upon signing of return.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are available on the website.

## 2010 Galveston College Foundation Board of Directors

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## 79 01/14/2011 1 54 PM

# (Rev April 2009)

## Mailed via U S CRRR 7008 3230 0002 1090 6223 Application for Extension of Time To File an

**Exempt Organization Return** 

OMB No 1545-1709

Internal Revenu	e Service		File a Separate app	incation for each ret	urn. 			_		
		tomatic 3-Month Extension,	complete only Part I a	nd check this box				<b>▶</b> X		
_	_	Iditional (Not Automatic) 3-M			age 2 of this fo	m)		_		
-	•	ess you have already been gr		•	=		68			
Part I		c 3-Month Extension o								
			•	•						
•	required to file	Form 990-T and requesting a	in automatic 6-month ex	tension—check this l	box and comple	ete		<b>,</b> $\Box$		
Part I only	Part I only									
All other corpo	orations (includ	ling 1120-C filers), partnership	s, REMICs, and trusts i	must use Form 7004	to request an e	xtension	of			
time to file inc	ome tax return	S								
Electronic Fil	ling (e-file). Ge	enerally, you can electronically	file Form 8868 if you w	ant a 3-month autom	atic extension o	of time to	file			
one of the retu	urns noted belo	ow (6 months for a corporation	required to file Form 99	90-T) However, you o	cannot file Form	1 8868				
electronically	ıf (1) you want	the additional (not automatic)	3-month extension or (2	) you file Forms 990-	BL, 6069, or 88	370, grou	dτ			
returns, or a c	composite or co	onsolidated Form 990-T Inste	ad, you must submit the	fully completed and	signed page 2 (	(Part II) c	of Form			
8868 For moi	re details on th	e electronic filing of this form,	visit www irs gov/efile a	nd click on e-file for C	Charities & Non	profits				
Type or	T	empt Organization	<del>-</del>		Ī		yer identification r	number		
print		p. e.gaa								
File by the	Galves	ton College For	undation		1	76-0	512266			
due date for		eet, and room or suite no. If a		ns	<b>.</b>					
filing your		venue Q	, o box, occ motractio							
return See instructions	*	post office, state, and ZIP co	de. For a foreign addres	s see instructions						
	Galves		TX 77550	o, oco mondonomo						
Check type of		filed (file a separate application								
X Form 99		( и ображие ирр	Form 990-T (cd	ornoration)			☐ Form 472	0		
Form 99				ec 401(a) or 408(a) tr	ruet)		Form 522	=		
Form 99				ust other than above)	usty		Form 606			
Form 99			Form 1041-A	ist office than above;			Form 887			
								O		
Telephone  If the orga  If this is fo for the whole galist with the radiust until Offer the o	nization does r r a Group Retu group, check th names and EIN t an automatic 4/15/11 rganization's re calendar year tax year beginn	9-944-1302 not have an office or place of both are the organization's form is box  If it is less of all members the extension 3-month (6 months for a corporate to file the exempt organization or or or or or or or or or or or or or	ur digit Group Exemption for part of the group, chen will cover pration required to file Filon return for the organisming 08/31/10	tates, check this box n Number (GEN) eck this box orm 990-T) extension zation named above	and a	If this is attach		▶□		
		s than 12 months, check reas		Final return	Change ii	n accoun	iting period			
		Form 990-BL, 990-PF, 990-T,	4720, or 6069, enter th	e tentative tax,		1				
		credits See instructions.			<del></del>	3a	\$			
		Form 990-PF or 990-T, enter		ind estimated tax		ł				
		le any prior year overpayment				3b	\$			
		line 3b from line 3a. Include y								
		on or, if required, by using EFT	TPS (Electronic Federal	Tax Payment						
	See instruction					3с	\$			
for payment in:		nake an electronic fund withdr	awal with this Form 886	8, see Form 8453-E0	and Form 887	'9-EO				
		ork Poduction Act Notice					-	<del></del>		
For Privacy A	and Paperw	ork Reduction Act Notice, se	e instructions.				Form <b>8868</b>	(Rev 4-2009)		