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Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

OMB No 1545-0047

Open to Public Inspection

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

AUG

benefit trust or private foundation) 2011 and ending JUL 31,

	Вс	neck if pplicable	C Name of organization		D Employer identification	ation number
		⊓Address	HEADLINERS FOUNDATION OF TEXAS			
	\vdash	_change _Name	Doing Business As		74-22	81076
	<u> </u>	change Initial return		om/suite	E Telephone number	
	\vdash	Termin-	221 WEST 6TH STREET 210			79-8080
	\vdash	Jated]Amended Jretum	City or town, state or country, and ZIP + 4		G Gross receipts \$	397,187.
	$\overline{\Box}$	Applica-	AUSTIN, TX 78701		H(a) Is this a group ret	
		pending	F Name and address of principal officer.		for affiliates?	Yes X No
			SAME AS C ABOVE		H(b) Are all affiliates inclu	ided? Yes No
•	1 7	ax-exem	pt status. X 501(c)(3) 501(c) ()	527	If "No," attach a li	st. (see instructions)
	JV	Vebsite:	▶ WWW.HEADLINERSFOUNDATION.ORG		H(c) Group exemption	
			ganization X Corporation Trust Association Other ▶	L Year	of formation 1983 M	State of legal domicile TX
	Pε		ummary			
	به	1 Bri			& SUPPORT J	·
<u></u>	Governance	$\mathbf{E}^{\mathbf{z}}$	XCELLENCE AND EDUCATION THROUGH AWARD & SO	CHOL.	ARSHIP PROGR	AMS.
2013	eru	2 Ch	eck this box 🕨 🔲 if the organization discontinued its operations or disposed of	of more	than 25% of its net ass	
ക	Šo.	3 Nu	mber of voting members of the governing body (Part VI, line 1a)		3	21
(3)	≪ ∣		mber of independent voting members of the governing body (Part VI, line 1b)		4	0
œ	Activities		tal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
APR	ivit		tal number of volunteers (estimate if necessary)		6	0
0	Aci		tal unrelated business revenue from Part VIII, column (C), line 12		7a	61,645.
<u>u</u> -		b Ne	t unrelated business taxable income from Form 990-T, line 34		7ь	0.
SCANNED		•	t unrelated business taxable income from Form 990-T, line 34 ntributions and grants (Part VIII, line 1h)		Prior Year 102,358.	Current Year 210,542.
\$	an l		intributions and grants (Part VIII, line 1h)	<i>/</i> ->	0.	0.
	Revenue		ogram service revenue (Part VIII, line 2g)	70/	44,288.	64,480.
90	Re		pogram service revenue (Part VIII, line 2g) MAR Pestment income (Part VIII, column (A), lines 3, 4, and 7d) Per revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	78	0.	<1,098.>
			OCA	13/	146,646.	273,924.
-			tal revenue - add lines 8 through 11 (must equal Part VIII, column (4), line 12) ants and similar amounts paid (Part IX, column (A), lines 1-3)	/ 🚭 /	32,250.	41,250.
			nefits paid to or for members (Part IX, column (A), line 4)	_ /	0.	0.
	<u>"</u>		laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	~ -	0.	59,327.
	Expenses		ofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
	be		tal fundraising expenses (Part IX, column (D), line 25)			
	ω̈	47 04	Open IV polymer (A) lines 11 del 11 CATA	-	94,933.	74,988.
		18 Tot	tal expenses. Add lines 13-17 (must equal PartilX-column (A) line-25)		127,183.	175,565.
	l		venue less expenses. Subtract line 18 from line 12		19,463.	98,359.
7	်မွှင် ဗိ		1 - 0.0 and 9	Beg	inning of Current Year	End of Year
ł	ajau	20 Tot	tal assets (Part X, line 16)		2,280,943.	2,476,673.
	38	21 Tot	tal liabilities (Part X, line 26)		210.	93.
2	Fund Balances	22 Ne	t assets or fund balances. Subtract line 21 trom-line 20		2,280,733.	2,476,580.
		rt II S	Signature Block			
ι	Jnde	r penalties	s of perjury, I declare that I have examined this return, including accompanying schedules and	d staterne	nts, and to the best of my l	knowledge and belief, it is
ţ	rue,	correct, a	nd complete. Declaration of preparer (other than officer) is based on all information of which p			
			Mark Monus		Ma	F GOVERNORS
	Sigr		Signature of officer		Date	,
ŀ	Here	•	V MARK MORRISON, CH	4A1	R, BOARD O	F GOLRNORS
-			Type or print name and title			
	1-10	1	Int/Type preparer's name Presarer's agnature		ate Check Check	PTIN
	aid		AVID E ERICKSON, JR		-//-/3 If self-employed	P01080303
	rep		m's name ERICKSON DEMEL & CO., P.C.		Firm's EIN ▶	74-2332708
•	Jse (YIIIY Fir	m's address 7800 N. MOPAC, SUITE 105 AUSTIN, TX 78759		Dh / E	121/02 0602
-	Mar.	the IDS	discuss this return with the preparer shown above? (see instructions)		Phone no (5	12)482-8682

	n 990 (2011) HEADLINERS FOUNDATION OF TEXAS 74-2281	076	Р	age 3
Pa	rt IV Checklist of Required Schedules		T	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		J	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3	i	Х
	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
4	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	1		
	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 temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			X
_	Part VI	11a		Α
Đ	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	116	х	
_	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total	5		
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	_	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		$-\frac{X}{X}$
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{X}{X}$
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	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, Parts II and IV	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		1	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	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 Part VIII. lines			_

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2011)

18

19

20a

20b

19

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

Form 990 (2011) HEADLINERS FOUNDAT

Part IV Checklist of Required Schedules (continued)

United States on Part IX, column (A), line 17 // "Yes," complete Schedule I, Parts I and II 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			ĺ	Yes	No
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 27 if "Yes," complete Schedule I, Part I and III 2 2 X 2 Dut the organization assers "Yes" to Part IVI, 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 I, Part IVI and former officers, directors, trustees, key employees, and highest compensated employees" IVI "Yes," complete Schedule I, Part IVI 2 Dut the organization writest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Dut the organization mavest any proceeds of tax-exempt bonds beyond a temporary period exception? 25c Dut the organization mavest any proceeds of tax-exempt bonds beyond a temporary period exception? 25d Dut the organization mavest any an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 25d Dut the organization mavest and an escrow account other than a refunding secrow at any time during the year? 25d Section 601(e)(3) and 501(e)(4) organizations. Dut the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction wave 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 expanization's broof Forms 990 or 990-227 if "Yes," complete Schedule I, Part IVI 2 but the organization provide a grant or other assistance to an officer, director, trustee, key employee, or disqualified person in the proper or explose thereof, a grant selection committee member, or to a 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule II, Part IVI 2 but the organization receive more than 325,000 in on-cash controllutors? If "Yes," complete Schedule II, Part IVI 2 but the organization receive are than 3	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			l
column (A), line 21 if "Yes," complete Schedule I, Parts I and III 20 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, flustees, key employees, and impress compensated employees? If "Yes," complete Schedule J and 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 24th through 24d and complete Schedule I, "Wo", or to line 25 b. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d. Did the organization act as an "on behalf of" issuer for bonds outstanding et any time during the year? 24c			21		<u> X</u>
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 K, If "Wo", go to line 25 23	22		l	, I	
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedulie J 23			22	X.	
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 lans 24b through 24d and complete Schedule K. If "No", go to line 25 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? 25c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding as on the reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization should person outstanding as of the end of the organization's prior Forms 990 or 990-EZ7 If "Yes," complete Schedule L, Part IV 25d Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person on unstanding as of the end of the organization to tax year? If "Yes," complete Schedule It., Part IV 25d Was the organization provide a grant or other assistance to an officer, director, trustee, expemployee, substantial contributions of a party to a business transaction with one of the following parties (see Schedule It., Part IV 25d A tainty member of a current or former officer, director, trustee, or key employees, if "Yes," complete S	23		ĺ		
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 240 through 24d and complete Schedule I. If "No", por this 25 bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? city the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? did but the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? did but the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? did but the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? did but the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? did but the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? did but the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? Is the organization are during the year? If "Yes," complete Schedule L. Part II If If I I I I I I I I I I I I I I I					v
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Schedule K. If "No"; go to line 25 b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? bid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization as of the organizations. D Did the organization has not been reported on any of the organization is an excess benefit transaction with a disqualified person in a prior year, and that the transaction is an excess benefit transaction with a good provide a grant or other seasistance to an office, director, trustee, key employee, substantial contributions of for applicable filing thresholds, conditions and office, director, trustee, key employee, substantial contributions of foreaprofitically for the member, or to a Schedule L. Part IV 28 A care that of organization aparty to a business transaction with one of the following parties (see Schedule L., Part IV 28 Did the organization r	24a				
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c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage 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-E27 If "Yes," complete Schedule L, Part II 25b X 26b 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 Usinstructions for applicable filing thresholds, conditions, and exceptions): 27a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and a family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV And A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV And A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV And A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV And A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV And A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV And A family member of a current					_^_
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Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 256 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X 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-E27 if "Yes," complete Schedule L, Part II 25b X 26c X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, by the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 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): A current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive organized for a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule M 29 Did the organization liquidate, terminate, or dissolve and cease operations? 29 If "Yes," complete Schedule M 20 Did the organization organized for an entity disregarded as separate from the organization under Regulations section	С	-			
Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization 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 II 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 b 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 III contributor or employee thereof, a grain selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28b X		·	-		
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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? /f "Yes," complete Schedule L, Part I 25b X 25b X 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? /f "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, cirrector, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II/ 27 II/ 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 27 II/ 28 II/ 27 II/ 28 II	25a		05-		v
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part i 25b			258		
Schedule L, Part I 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 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II 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 II, III, IV, and V, line 1 34 Was the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	D				
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person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26	26	,	230		
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contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 8 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): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28b X 6 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 6 A can entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 7 28c X 28b X 9 Did the organization receive more? If "Yes," complete Schedule L, Part IV 8 28c X 9 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 8 29 X 9 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 9 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 9 31 X 9 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 9 31 X 9 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 9 3 3 X 9 3 X 9 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, IV, and V, line 1 9 3 3 3 X 9 3 3 3 X 9 3 3 3 3 3 3 3 3 3	97				_==
of any of these persons? If "Yes," complete Schedule L, Part III 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): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29d X 29d Did the organization receive contributions of art, instorical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30			1		
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a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or drey employee (or a family member thereof) was an officer, director, trustee, or drey employee (or a family member thereof) was an officer, director, trustee, or drey employee (or a family member thereof) was an officer, director, trustee, or drey employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer. 28c					
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Form 990 (2011) HEADLINERS FOUNDATION OF TEXAS

Part V Statements Regarding Other IRS Filings and Tax Compliance HEADLINERS FOUNDATION OF TEXAS

ab Enter the number reported in Box 3 of Form 1096. Enter -0°-d find applicable Enter the number of Forms W-26 included in line 1 a Enter -0°-f not applicable Dot the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming decidence of the complex of the properties o		Check if Schedule O contains a response to any question in this Part V			
Enter the number of Forms W2Q included in line 1a. Enter 0-d not applicable to De the organization compty with backup withholding rules for reportable payments to vendors and reportable garning (gambiling) with making with parking rules for reportable payments to vendors and reportable garning (gambiling) with making with or within the year covered by this return. 22 Enter the number of employees reported on Form W3, Transmittal of Wape and Tax Stafements, filed of the celeshedry are androlly with or within the year covered by this return. b If at least one is reported on line 2a, did the organization file all required feedal employment tax returns? Able If the sum of lines 1a and 2a is greater than 250, you may be required to e-five (see instructions) b If Yes's has it filed a Form 990-T for this year? If Yo', provide an explanation in Schedule O 4a. At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account, and the file of the file of the file of the program of the file				Yes	No
b Enter the number of Forms WSG included in line 1a. Enter 0-fi not applicable D oft the organization comply with backing withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a. Enter the number of prize winners? 2b. If all least one is reported on line 2a, did the organization file all required feeding draws from the calendar year ending with or within the year covered by this return b if all least one is reported on line 2a, did the organization file all required feeding employment tax feetures? Note: If the sum of lines 1a and 2a greater than 260, you may be required to e-file (see instructions) b if the organization have unrelated business gross income of \$1,000 or more during the year? 3b. Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b. If if Yeas, 1 and 1 filed a form 900 of for this year? If "No, "provide an explanation in Schedule 0 4c. At any time during the calendar year, did the organization have an interest in, or a signiture or other authority over, a financial account in a foreign country. "If "No, "provide an explanation in Schedule 0 b if Yeas, 1 and 1 filed a form 900 from 10 F 90°22 1. Report of Foreign Bank and Financial Accounts. See what the organization of Form 10 F 90°22 1. Report of Foreign Bank and Financial Accounts. See Was the organization have for grom 10 F 90°22 1. Report of Foreign Bank and Financial Accounts. 5c. If Yeas, 1 one 5a or 5b, did the organization that was or as party to a prohibited tax sheller transaction? 5c. If Yeas, 1 one 5a or 5b, did the organization that was or as party to a prohibited tax sheller transaction? 5c. If Yeas, 1 one 5a or 5b, did the organization mice of the mice of the section of the foreign the section of	1a				
a Earter then number of employees reported on Form W.S. Transmittal of Wage and Tax Statements. **Relief for the calendar year ending with or within the year covered by this return **Description** **Initial least one is reported on line 2a, did the organization fills all required federal employment tax returns?** **Note.! If the sum of lines is 1 and 2 as ginater time 250, you may be required to e-file (see instructions) **30** **Do the organization have unrelated business gross incorne of \$1,000 or more during the year?** **30** **Description** **Best of 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 accounts) **Best of the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accounts in organization and proposed that is a bank account, securities account, or other financial accounts. **Best of the financial accounts** **Best of the	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b. 0			
a Earter then number of employees reported on Form W.S. Transmittal of Wage and Tax Statements. **Relief for the calendar year ending with or within the year covered by this return **Description** **Initial least one is reported on line 2a, did the organization fills all required federal employment tax returns?** **Note.! If the sum of lines is 1 and 2 as ginater time 250, you may be required to e-file (see instructions) **30** **Do the organization have unrelated business gross incorne of \$1,000 or more during the year?** **30** **Description** **Best of 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 accounts) **Best of the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accounts in organization and proposed that is a bank account, securities account, or other financial accounts. **Best of the financial accounts** **Best of the	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
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D IT TES, has it liled a form 120 to report these payments? It "Ivo," provide an explanation in Schedule O 174b		If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

74-2281076 HEADLINERS FOUNDATION OF TEXAS Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 21 1a 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 0 1b b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х 7a more members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х 8a a The governing body? Х 8ь **b** Each committee with authority to act on behalf of the governing body? is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached 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.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 15 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? 15a a The organization's CEO, Executive Director, or top management official 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization. CINDY KEEBLER - 512-479-8080

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W. 6TH ST., STE 2100, AUSTIN,

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HEADLINERS FOUNDATION OF TEXAS

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Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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
- 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, if any. 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

- 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.

(A)	(B)	<u> </u>			C)		.,	(D)	(E)	(F)
Name and Title	Average hours per week	box	not c	Pos heck ss pe	ition more rson	than is bot or/trus	h an	Reportable	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) GREG CURTIS		1								
VICE-CHAIR	0.00	X	ļ	X			<u> </u>	0.	0.	0.
(2) GARY PICKLE CHAIRMAN	0.00	х		Х				0.	0.	0.
(3) JANE GRIEG	1						ľ			
SECRETARY	0.00	X		X				0.	0.	0.
(4) JOANNE MIDWIKIS							ĺ		_	_
TREASURER	0.00	X		Х				0.	0.	0.
(5) ELIZABETH CHRISTIAN		1								
MEMBER	0.00	X						0.	0.	0.
(6) TRACY DAHLBY	0.00				!		ĺ		•	•
MEMBER	0.00	X	_					0.	0.	0.
(7) DAVID DUNHAM MEMBER	0.00	x	'					0.	0.	0.
(8) HOWARD FALKENBERG MEMBER	0.00	Х						0.	0.	0.
(9) ARNOLD GARCIA MEMBER	0.00	Х						0.	0.	0.
(10) CLARKE HEIDRICK										
MEMBER	0.00	X	_			_		0.	0.	0.
(11) DAN HERD MEMBER	0.00	х						0.	0.	0.
(12) BOB HUGHES MEMBER	0.00	x						0.	0.	0.
(13) RANDA SAFADY MEMBER	0.00	х						0.	0.	0.
(14) QUEN GARZA	0.00				-					
MEMBER	0.00	Х						0.	0.	0.
(15) MARK MORRISON								_	_	
VICE-CHAIR	0.00	X		Х				0.	0.	0.
(16) STEVE WEINBERG	0.00			1	- [[•
MEMBER	0.00	Х						0.	0,	0.
(17) HARVEY KRONBERG	0.00	,						[_	•
MEMBER	0.00	[X]						0.	0.	0.

HEADLINERS FOUNDATION OF TEXAS

Part VII Section A. Officers, Directors, Tr	ustees, Key E	<u>mpi</u>	oye	es, a	and	Higt	nest	t Compensated Employ	rees (continued)						
(A)	(B)				C)			(D)	(E)		(F)				
Name and title	l have a later of too no		Position do not check more than one				one	Reportable	Reportable	-	Estima				
	hours per	box	k, unie	ess p	erson	ıs bo or/tru:	th an	compensation	compensation		amoun				
•	week	\vdash	T	1	7	1	T	-	from related	1.	othe				
	hours for	. 181									compens				
	related	5	<u>1</u> 28			Sage	1	(W-2/1099-MISC)	1 '						
•	organizations	PS .	1		8	ā		(44-21099-141100)	and related						
	in Schedule		tona	١.	g of	2 S				organization					
	(0)	Individual	Institutional trustee	Jage J	Key employee	Highest compensated employee	Former								
(18) KELLEY SHANNON	 	1	╀	-	1		Ť								
MEMBER	0.00	X			İ		ĺ	0.	0			0.			
(19) PATTI SMITH	1					1									
MEMBER	0.00	X						<u> </u>	0	•		0.			
(20) BERGAN CASEY															
EXCECUTIVE DIRECTOR	20.00	ĺ.,		X	1			52,032.	0	<u>.</u>		0.			
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	L		L	<u> </u>	<u> </u>	<u> </u>			<u></u>						
1 b Sub-total								52,032.	0			0.			
c Total from continuation sheets to Part V	II, Section A					▶		0.	0			0.			
d Total (add lines 1b and 1c)		_				_		52,032.	0	•		0.			
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bove	e) wi	no r	eceived more than \$100	,000 of reportable						
compensation from the organization												. 0			
											Yes	No			
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	yee	, or	highest compensated ei	mployee on						
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X			
4 For any individual listed on line 1a, is the si	ım of reportab	le co	mp	ensa	ation	and	d ot	her compensation from t	the organization						
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4	X			
5 Did any person listed on line 1a receive or	accrue comper	nsat	ion f	rom	any	unr	elat	ed organization or indivi	dual for services						
rendered to the organization? If "Yes," com	plete Schedul	e J f	or si	uch	pers	on				<u> </u>	5	X			
Section B. Independent Contractors															
1 Complete this table for your five highest co	mpensated inc	depe	ende	ent c	ontr	acto	ors t	that received more than	\$100,000 of compe	nsatio	on from				
the organization Report compensation for	the calendar y	ear e	endı	ng v	vith (or w	ithir	the organization's tax y	ear						
(A)							J	(B)	}		(C)				
Name and business	address	NC	NE	<u> </u>			\dashv	Description of s	ervices	Com	pensati	on			
							J								
							ļ								
							_								
							-								
															
							\dashv								
	 		_								•				
2 Total number of independent contractors (i		ot lir	nite	d to	thos	se lis	sted	l above) who received m	ore than						
\$100,000 of compensation from the organi	zation 🕨														

9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less' cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions > 273,924. 2,835. 61,645. <1	Part VII	Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Business Code	str 1 a	Federated campaigns	1a					
Business Code	트 등 b	Membership dues	1b					
Business Code	Am c	: Fundraising events		301.				
Business Code	g jag	Related organizations						
Business Code	SE e		······					
Business Code	음 a f			210 241				
Business Code	들			210,241.				
Business Code Business Cod	5 P 8		s 1a-1f \$		210 542			
2 a b b c c c c c c c c	O e h	Total. Add lines 1a-11		Bugges Code	210,342.			
b				Business Code		İ		
Total, Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d	S 2 a							
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Total, Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d Total Add lines 11a-11d	E See							
Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6 Less: rental expenses 7 a Gross amount from sales of (ii) Securities (ii) Other 125,000 b 125,000 c 125,00	Par a							
Second S	مَّ ا	All other program service reve	enue					
other similar amounts) Income from investment of tax-exempt bond proceeds Royaltes Royaltes (i) Real (ii) Personal b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) Ta Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) c Gain or (loss) d Net gain or (loss) c Rental income from fundraising events (not including \$ 301. of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b C All other revenue c Total. Add lines 11a-11d Total revenue See instructions 1273,924. 2,835. 61,645. <1	9	Total. Add lines 2a-2f		>				
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Securities Sec				▶	61,645.		61,645.	
(i) Real (ii) Personal (iii) Personal Personal (iii) Personal Pe	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses 122,165. c Gain or (loss) d Net gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ 301. of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b c d All other revenue e Total. Add lines 11a-11d 7 Total revenue See instructions 12 Total revenue See instructions	5	Royalties		•				
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	е	Total. Add lines 11a-11d		▶			<u> </u>	-1 000
122000	12 132009 01-23-12	Total revenue See instructions		>	2/3,924.	2,835.	61,645.	<1,098. Form 990 (2011)

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)

com	plete columns (B), (C), and (D)				
	Check if Schedule O contains a respons		s Part IX	(0)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	- "			
	organizations in the United States See Part IV, line 21			······································	,, , , , , , , , , , , , , , , , , , ,
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	41,250.	41,250.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				·····
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	52,032.		52,032.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	7,295.		7,295.	
8	Pension plan accruals and 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	3,250.		3,250.	
đ	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	150.		150.	
g	Other				
12	Advertising and promotion				
13	Office expenses	2,805.		2,805.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	232.		232.	
18	Payments of travel or entertainment expenses	_			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,134.		3,134.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	950.		950.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)				
а	SPEAKER SERIES EXPENSE	26,447.	26,447.		
b	MEDIA AWARDS	21,871.	21,871.		
С	WEBSITE EXPENSE	9,365.		9,365.	
d	AWARDS EXPENSE	5,184.	5,184.		
e	All other expenses	1,600.		1,600.	
25	Total functional expenses Add lines 1 through 24e	175,565.	94,752.	80,813.	0.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined		1		
	educational campaign and fundraising solicitation		}		
	Check here ▶ if following SQP 98-2 (ASC 958-720)				
*****	0 01-23-12				Form 990 (2011)

Part X Balance Sheet (A) (B) End of year Beginning of year 67,815. 100,148. 1 Cash · non-interest-bearing 2 2 Savings and temporary cash investments 7,989. 7,849. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net 8 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 10b 10c b Less accumulated depreciation 11 11 Investments - publicly traded securities 2,204,224. 2,367,761. 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 915. 915. 15 15 Other assets, See Part IV, line 11 2,280,943. 2,476,673. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 210. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D 210. 93. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

X and complete lines 30 through 34. 0. 30 30 Capital stock or trust principal, or current funds 0. 31 31 Paid-in or capital surplus, or land, building, or equipment fund 2,280,733. 2,476,580. 32 Retained earnings, endowment, accumulated income, or other funds 2,280,733. 2,476,580. 33 33 Total net assets or fund balances 2,280,943. 2,476,673. Total liabilities and net assets/fund balances

Form 990 (2011)

	· · · · · · · · · · · · · · · · · · ·				
Forn	n 990 (2011) HEADLINERS FOUNDATION OF TEXAS	74-228	31076	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			24.
2	Total expenses (must equal Part IX, column (A), line 25)	2			65.
3	Revenue less expenses Subtract line 2 from line 1	3		<u> </u>	59.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,280		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			88.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,476	5,5	80.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u>X</u>
			pro-	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	0.			ľ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	Ĺ
b	Were the organization's financial statements audited by an independent accountant?		2ь		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			l
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			l
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit	1		i
	Act and OMB Circular A-133?		3a		<u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit		ĺ	ı
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь		
			Form 9)90 (2011)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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

Inspection

Name of the organization

Employer identification number HEADLINERS FOUNDATION OF TEXAS 74-2281076

Pa	rt i	Reason	for Public Char	rity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.				
The	organi	ization is not a	a private foundation	because it is (For lines	1 through	11, check	only one t	oox.)					
1				s, or association of chur).				
2		A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3				ital service organization	-		170(b)(1)	(A)(iii).					
4	一			operated in conjunction)(b)(1)(A)(i	ii). Enter t	he hospital	's nam	e,
•		city, and stat		- ,		•				·	·		
5		•		benefit of a college or ur	niversity o	wned or or	perated by	a govern	mental un	t describe	ed in		
•			(b)(1)(A)(ıv). (Compl				•	J					
6				ent or governmental uni	t describe	d in sectio	n 170(b)(1	ι)(Δ)(v).					
7	X	-		eives a substantial part					or from the	neneral :	oublic desc	ribed i	1
•			(b)(1)(A)(vi). (Comple		טי ונט טטף	, o, i, i, o, i, a	govonim	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>31 110111 1111</i>	gomoral		1000 1	•
8	\Box	-		section 170(b)(1)(A)(vi).	(Complete	Part II \							
9	Ħ			eives: (1) more than 33 1			rom contri	hutione n	namharshi	n fees ar	nd arnee rea	einte :	rom
9				nctions · subject to certa									
			•	•	•								
				axable income (less sect	lion 511 ta	ix) irom bu	311162262	acquired t	by the orga	inzalion a	aiter Julie J	U, 1 9 1	J.
40			509(a)(2). (Complete	•		in andatu S	anatia	- E00/-\/	41				
10	H	•	•	perated exclusively to tes	•	•			-	u aut tha	DUFD 0 0 0	f and <i>i</i>	
11				perated exclusively for th									or
				ations described in section				2). See se	ະເເດກ ວບອ(a)(3). One	ck the box	tnat	
				organization and comple		_					Type III - C	V	
		a Type I		— •··		e III - Func	-	•		d [_
е				at the organization is not									י
_				han one or more publicly						3(a)(1) or s	section 509	(a)(2)	
f		_		ten determination from t	the IRS tha	atitisa iy	pe I, Type	II, or Type	e 111				
			rganization, check th							•			Ь
9		_		organization accepted an								 T	
				lirectly controls, either al	one or tog	ether with	persons c	lescribed .	in (ii) and (iii) below,		Yes	No
		_		upported organization?							11g(i)		
			•	n described in (i) above?		_					11g(ii)		
				person described in (i) o							11g(iii)		
h		Provide the fo	ollowing information	about the supported org	ganizationi	(s).							
				r									
(1)	Name (of supported	(ii) EIN	(iii) Type of organization		organization		•	(vi) Is organizatio		(vii) Am	ount of	:
	orga	nization		/described on lines 1.0		sted in your document?		support?	i(i) organiz	ed in the l	sup	ort	
				above or IRC section	<u> </u>	,		r 	US				
				(see instructions))	Yes	No	Yes	No	Yes	No			
		1	1		,		}		ļ	} }			
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									L	11			
					•								

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support									
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not			,						
	include any "unusual grants.")	109,276.	269,647.	116,700.	102,358.	210,542.	808,523.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to				,					
	or expended on its behalf		<u> </u>							
3	The value of services or facilities					,				
	furnished by a governmental unit to		,							
	the organization without charge									
4	Total. Add lines 1 through 3	109,276.	269,647.	116,700.	102,358.	210,542.	808,523.			
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)									
6	Public support. Subtract line 5 from line 4						808,523.			
Sec	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
7	Amounts from line 4	109,276.	269,647.	116,700.	102,358.	210,542.	808,523.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	59,289.	54,284.	52,790.	61,174.	61,645.	289,182.			
9	Net income from unrelated business						<u> </u>			
	activities, whether or not the				į	,				
	business is regularly carried on		j		j					
10	Other income Do not include gain									
	or loss from the sale of capital	ĺ				{				
	assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10						1097705.			
12	Gross receipts from related activities,	etc (see instruction	ons)			12				
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)				
	organization, check this box and stop						<u>▶</u>			
Sec	tion C. Computation of Publi	c Support Per	centage							
14	Public support percentage for 2011 (li	ne 6, column (f) dr	vided by line 11, c	olumn (f))	ļ	14	73.66 %			
15	Public support percentage from 2010	Schedule A, Part I	li, line 14		[15	71.64 %			
16a	33 1/3% support test - 2011. If the o	rganization did not	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo				
	stop here. The organization qualifies a		~				ightharpoons X			
þ	33 1/3% support test - 2010. If the o	rganization did not	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box			
	and stop here. The organization qualif						▶∟_			
17a	10% -facts-and-circumstances test									
	and if the organization meets the "fact					t IV how the organ	ızatıon			
	meets the "facts-and-circumstances" t	•			•		▶ []			
b	10% -facts-and-circumstances test									
	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-circ		-	·			>			
18	Private foundation. If the organization	did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b	, check this box ar	nd see instructions	<u>. </u>			

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. P.	ublic Support						
Calendar-year (or i	iscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1 (f) Total
1 Gifts, grants	, contributions, and						
membership	fees received. (Do not				1		
ınclude any	"unusual grants.")						
2 Gross receip	ots from admissions,						
	e sold or services per						
	acilities furnished in		ĺ			1	
	that is related to the 's tax-exempt purpose		}				
-	ots from activities that						
·	nrelated trade or bus-	i	ĺ				
iness under	· · · · · · · · · · · · · · · · · · ·						
	s levied for the organ-				 	<u> </u>	
	efit and either paid to	ı					
	on its behalf				1		
•	services or facilities			 	 	 	
	a governmental unit to			1	1		Ì
•	tion without charge	1		ı			
-	- I				 	 	
6 Total. Add I	I			L	 	 	
	luded on lines 1, 2, and						1
	om disqualified persons		 		 		
	ed on lines 2 and 3 received disqualified persons that		,			1	ĺ
	er of \$5,000 or 1% of the				,	}	
amount on line 1	· •			· · · · · · · · · · · · · · · · · · ·	 	 	
c Add lines 7a				-,	 	ļ	
	ort (Subtract line 7c from line 6)				<u> </u>		
ection B. To					,		
alendar year (or f	iscal year beginning in) 🏲 🏻	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1 (f) Total
9 Amounts fro	· •						
0a Gross Incom	e from interest, ayments received on	1					[
	ans, rents, royalties						
	from similar sources						
b Unrelated bus	iness taxable income						
(less section 5	11 taxes) from businesses						
acquired after	June 30, 1975						
c Add lines 10	a and 10b						
	from unrelated business						
	included in line 10b, of the business is						
regularly car							
2 Other incom	e. Do not include gain			-			
	the sale of capital	ſ			1 _	L	
	ath in Part IV.) (Add lines 9, 10c, 11, and 12)						
• • •	ars. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) c	organization.
_	ox and stop here		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,	,	(/(-/	▶
	mputation of Publi	c Support Per	rcentage				
	ort percentage for 2011 (li			olumn (fl)	· · · · · · · · · · · · · · · · · · ·	15	
	ort percentage from 2010			0//		16	
	imputation of Inves					 	
	ncome percentage for 20			e 13. column (fi)		17	9
	ncome percentage from 2			, 20121111 (1))		18	
	port tests - 2011. If the			on line 14 and line	a 15 is more than 3		
•	3 1/3%, check this box ar	-					o ilite 17 is flot
	port tests - 2010. If the	=		• •	• • •		
	more than 33 1/3%, ched dation. If the organization					_	Lacion
o Frivate Iouli	www.um. n and Ordanizaliof	a card from Ciretica 2.3	LILIA LIKE 111111111111111111111111111111111111	2. DE 130. GHBUK U	ma wux anu see ins	TO ULTOURS	

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	- HEADLINERS FOUNDATI		74-2281076
Pa	TI Organizations Maintaining Donor Advised	d Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	_
	•	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3			· · · · · · · · · · · · · · · · · · ·
4	Aggregate grants from (during year)		
-	Aggregate value at end of year	without that the appets hold in depart advised	fundo
5	Did the organization inform all donors and donor advisors in w		Yes No
•	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose con	
	Impermissible private benefit?	18V 11 5 000 D 4	Yes No
ra	til Conservation Easements. Complete if the orga		IV, line /
1	Purpose(s) of conservation easements held by the organization	_	
	Preservation of land for public use (e.g., recreation or ed	· —	·
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru-	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at	ter 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the org	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	ement is located >	
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	and enforcing conservation easements durin	g the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and el		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservatio	n easements in its revenue and expense sta	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue statement	t and balance sheet works of art,
	historical treasures, or other similar assets held for public exhib	bition, education, or research in furtherance	of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describ	es these items	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, 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	·	> \$
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financial dat	In. provide
	the following amounts required to be reported under SFAS 110	· · · · · · · · · · · · · · · · · · ·	,
а	Revenues included in Form 990, Part VIII, line 1	Care and terminal to more morner.	▶ \$
	Assets included in Form 990, Part X		\$
-			· •

Sche		ERS FOUNDA				<u> </u>				5 Page 2
Pa	rt III Organizations Maintaining C	collections of A	rt, His	torical T	reasures,	or Othe	r Simil	ar Asse	ts (conti	nued)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	e following the	at are a sig	gnificant	use of its	collection	n items
	(check all that apply)									
а	Public exhibition	(a 🗀	Loan or exc	change progr	rams				
b	- Scholarly research	•	• 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	In how t	hey further	the organizat	ion's exen	npt purp	ose in Par	t XIV.	
5	During the year, did the organization solicit o	r receive donations	of art, h	istorical trea	asures, or oth	ner sımılar	assets			
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's c	ollection?				Yes	No.
Par	rt IV Escrow and Custodial Arrange reported an amount on Form 990, Par	-	ete if the	e organizati	on answered	"Yes" to i	Form 990), Part IV,	ine 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contributio	ns or other as	ssets not i	ncluded			
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:				_		
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	217						Yes	□ No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete if	the organization ar	swered	"Yes" to Fo	orm 990, Part	IV, line 10),			
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs					i				
f	Administrative expenses				1					
9	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1	g, column (a)) held as					
а	Board designated or quasi-endowment	•	%	,						
ь	Permanent endowment	%	_							
С	Temporarily restricted endowment ▶	 %								
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.								
За	Are there endowment funds not in the posses		ation tha	at are held a	and administe	ered for th	e organiz	ation		
	by.	J							ſ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the	·								
Par	t VI Land, Buildings, and Equipm									
	Description of property	(a) Cost or o			t or other	(c) Ac	cumulate	ed	(d) Book	value
	and the second	basis (investr			(other)		reciation	1		
1a	Land									
	Buildings				·					
	Leasehold improvements									
	Equipment									
	Other	-					, , , , , , , , , , , , , , , , , , , 			
	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, colur	nn (B), line i	10(c))			>		0.

Schedule D (Form 990) 2011

HEADT THERS	FOUNDATION	OF	ጥፑሄልያ
пичитичко	T O O N D A I I O N	OI.	THAM

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12			
(a) Description of security or category	(b) Book value		thod of value	
(including name of security)	(b) Book value	Cost or end	d-of-year mai	rket value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) INVESTMENTS	2,367,761.	END-OF-YEAR	MARKET	VALUE
(B)*				
(C)				
(D)				
(E)			·	
<u>(F)</u>				
(G)				
(H)				
(1)	·			
Total (Col (b) must equal Form 990, Part X, col (B) line 12)	2,367,761.	<u></u>		
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line 1	3.		
(a) Description of investment type	(b) Book value		thod of valua d-of-year mar	
(1)				
(2)				
(3)	<u></u>			
(4)		· · · · · · · · · · · · · · · · · · ·		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, line	15.			
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		•	
Part X Other Liabilities. See Form 990, Part X,	line 25			
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to 2. FIN 48 (ASC 740)	25.)		. 1911 - Y	
2. FIN 48 (ASC 740)	ine organization's financial statemi	ents that reports the organization's liab	unity for uncertai	n tax positions under

	edule D (Form 990) 2011 HEADLINERS FOUNDATION OF TE					281076	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Finar	ncial Sta	atements	<u> </u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			
3	Excess or (deficit) for the year Subtract line 2 from line 1			3			
4	Net unrealized gains (losses) on investments			4			
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)			8			
9	Total adjustments (net) Add lines 4 through 8			9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10			
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Reve	nue per	r Return		
1	Total revenue, gains, and other support per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		•				
а	Net unrealized gains on investments	_2a	·	·			
ь	Donated services and use of facilities	2b					
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV.)	2d					
e	Add lines 2a through 2d				2e		_
3	Subtract line 2e from line 1				3		
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					
c	Add lines 4a and 4b				4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5		
Pai	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expe	enses p	er Returr	า	
1	Total expenses and losses per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a					
ь	Prior year adjustments	2b					
c	Other losses	2c					
ď	Other (Describe in Part XIV.)	2d					
e	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				· · · · · · · · · · · · · · · · · · ·		
a	investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIV.)	4b			-		
	Add lines 4a and 4b				4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5		
	t XIV Supplemental Information						
	······································				- dl		4. D4
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,						4; Part
X, lin	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl	ete this	s part to pro	ovide any	additional in	iformation.	
					<u>-</u>		

SCHEDULE (Form 990)			Grants and Governments	Other Assistances, and Individuals	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	, eo		OMB No 1545-0047	15-0047
Department of the Treasury Internal Revenue Service		Сотр	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	n answered "Yes" to Fo ► Attach to Form 990.	' to Form 990, Par m 990.	t IV, line 21 or 22.		Open to Public Inspection	Jublic Son
Name of the organization	ion HEADLINERS FOUNDATION	FOUNDAT	ION OF TEXAS	S			Ü	Employer identification number 74–2281076	number 1076
Part 1 General In	General Information on Grants and Assistance	d Assistance							
1 Does the organiz	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the selection		
	criteria used to award the grants or assistance?	ance?		0 40 CT CT CT CT CT CT CT CT CT CT CT CT CT	70,000			Yes	% ×
Part # Grants an	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Complete if the progression and Other Accidence to Form 900 Bort IV line 21 for min	sedures for monit	Oring the Use of grant	Tunds in the United	omplete if the org	V" herewage gottering	os" to Form 000 Day IV	line 21 for any	
7	Grants and Other Assistance to Governments and Organizations in the Omico States. Complete in trecipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.	overnments and 5,000. Check this	box if no one recipien	t received more th	onpeten me ogs an \$5,000 Part II	can be duplicated if a	es 10 rollii 330, rail 17, idditional space is needer	mezi, ioi any d	
1 (a) Name and ac	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	nt of (f) Method of (g) Description of valuation (book, non-cash assistance ice other)	(h) Purpose of grant or assistance	ant
1	Enter total number of section 501(c)(3) and government organizations	id government or		listed in the line 1 table				A 4	
LHA For Paperwork	Enter total number of other organizations listed in the line 1 table. For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruct	ions for Form 990.				•	Schedule I (Form 990) (2011)	990) (2011)

Schedule (Form 990) (2011) HEADLINERS FOUNDATION Part III Grants and Other Assistance to Individuals in the United States	IDATION OF	OF TEXAS	"Ya Y. "Yac"	to Form 990 Part IV Ine 22	74-2281076 Page 2
Part III can be duplicated if additional space is needed	die orașe cares.			(O. O. O. O. O. O. O. O. O. O. O. O. O. O	٠
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
VARIOUS SCHOLARSHIPS	31	41,250,	o	FAIR MARKET VALUE - CASH	
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ide the information	required in Part I,	line 2, and any other	additional information.	
					•
132102 01-27-12					Schedule I (Form 990) (2011)

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ

2011
Open to Public Inspection

Department of the Treasury ► Attach to Form 990 or 990-EZ. Inspection Internal Revenue Service Employer identification number Name of the organization 74-2281076 HEADLINERS FOUNDATION OF TEXAS FORM 990, PART VI, SECTION A, LINE 2: VARIOUS BUSINESS RELATIONSHIPS EXIST BETWEEN BOARD MEMEBERS AND OFFICERS. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS OF THE ORGANIZATION MAY ELECT MEMBERS OF THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: DECISIONS OF THE BOARD OF DIRECTORS ARE SUBJECT TO APPROVAL BY MEMBERS OF THE ORGANIZATION. FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS REVIEWS FORM 990 PRIOR TO FILING WITH THE IRS. FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS OF THE ORGANIZATION ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: 97,488. NET UNREALIZED GAINS ON INVESTMENTS: FORM 990, PAGE 12 PART XII, LINE 2C. NO CHANGE IN PROCESS FROM THE PRIOR YEAR.