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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

OMB No 1545-0047

Open to Public Inspection

| <u> </u> | For the 2011 | calendar year, or tax year beginning $09/01/11$, and ending $08/31/12$ | 2 | · | |
|-------------------------|------------------------|---|-------------------|------------------------|---------------------------|
| B 0 | heck if applicable | C Name of organization TEXAS SOUTHERN UNIVERSITY | | D Employer | identification number |
| ^ | ddress change | FOUNDATION | | • | |
| \Box | lame change | Doing Business As | | 74-1 | <u>620415</u> |
| \equiv | · | Number and street (or P O box if mail is not delivered to street address) | Room/suite | E Telephone | number |
| " <u>ليا</u> | nitial return | 3100 CLEBURNE AVENUE HANNAH HALL | 206 | 713- | 313-7454 |
| | erminated | City or town, state or country, and ZIP + 4 | | | · <u> </u> |
| A | mended return | HOUSTON TX 77004 | | G Gross receipts | \$ 449,21 |
| = | | F Name and address of principal officer | | | |
| | application pending | GERALD SMITH | H(a) Is this a gr | oup return for affilia | ates? Yes X |
| | | 600 TRAVIS, SUITE 6900 | H(b) Are all affi | liates included? | Yes 1 |
| | | HOUSTON TX 77002 | If "No, | " attach a list (se | ee instructions) |
| | Fax-exempt status | | | | |
| | | N/A | H(a) Group ave | emption number | |
| | | | | | - |
| | art.I S | | r of formation | | State of legal domicile T |
| | | ummary escribe the organization's mission or most significant activities | | | |
| Activities & Governance | 2 Check th 3 Number | as box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of of voting members of the governing body (Part VI, line 1a) | f its net assets | 3 3 | 15 |
| ies | 4 Number | of independent voting members of the governing body (Part VI, line 1b) | | | 15 |
| Ξį | 5 Total nu | mber of individuals employed in calendar year 2011 (Part V, line 2a) | | |) |
| Act | 6 Total nu | mber of volunteers (estimate if necessary) | | 6 (|) |
| | 7a Total un | related business revenue from Part VIII, column (C), line 12 | | 7a | ·. · - |
| | b Net unre | slated business taxable income from Form 990-T, line 34 | | 7b | |
| | | _ | Prior Year | | Current Year |
| ē | 8 Contribu | tions and grants (Part VIII, line 1h) | | 3,156 | 434,47 |
| Revenue | 9 Program | service revenue (Part VIII, line 2g) | | 5,569 | 2,36 |
| <u>š</u> | 10 Investme | ent income (Part VIII, column (A), lines 3, 4, and 7d) | | 5,750 | 5,14 |
| re | 11 Other re | venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0 | 7,24 |
| | 12 Total rev | venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 391 | L,475 | 449,21 |
| | 13 Grants a | and similar amounts paid (Part IX, column (A), lines F3CEIVED | 731 | L,257 | 95,04 |
| | | paid to or for members (Part IX, column (A), line 4) | | 0 | |
| s | | other compensation, employee benefits (Part IX, column (A), lines 5–10) (V) | | 0 | |
| benses | | onal fundraising fees (Part IX, column (A), Re 11e) JUL 2 2 2013 | | 0 | |
| ē | | ndraising expenses (Part IX, column (D), line 25) ▶ | SH WE | 4 | E-AF-ENT |
| М | | openses (Part IX, column (A), lines 11a–11d, 11f–24e) DEN. UT | | ,612 | 235,98 |
| ļ | 18 Total ev | penses Add lines 13–17 (must equal Part IX , column (A), line 25) | | 7,869 | 331,03 |
| | | e less expenses Subtract line 18 from line 12 | | ,394 | 118,18 |
| - s | 13 Revenue | | Beginning of Curr | | End of Year |
| d Balances | 20 Total as | sets (Part X, line 16) | 1,493 | | 1,612,04 |
| 图象 | | bilities (Part X, line 26) | | 0 | <u> </u> |
| 夏島 | | ets or fund balances. Subtract line 21 from line 20 | 1,493 | 3.867 | 1,612,04 |
| <u></u> | MARK PARA | ignature Block | | 700. | |
| Un | der penalties of | perjury, I declare that I have examined this return, including accompanying schedules and statements, are omplete. Declaration of preparer (other then officer) is based on all information of which preparer has any | | my knowledge | and belief, it is |
| | | Jourse J. Dul- | | 07/ | 11/2013 |
| Sig | n 🏲 | Signature of officer | | Date | /, / |
| Her | | JOSEPH L, FROVER | | <u>'8</u> | 7/11/201. |
| _ | | Type or print name and title | | | |
| | Print/Ty | pe preparer's name Prepared Prepared | Date | Check | f PTIN |
| aic | Rober | t W Wager | 07/11/ | '13 self-employ | /ed P01419029 |
| | narer 10202 | Wagen & Company | | m's EIN | |
| | Only Firm's n | 6065 Hillcroft Ave Ste 309 | | 111 5 E 111 F | |
| | · 1 | U | | | |
| 4 | Firm's a | -/ | PI | none no | |
| | | ss this return with the preparer shown above? (see instructions) | | | Yes No |
| FOF | Panenyork D | eduction Act Notice, see the separate instructions. | | | . Fam QQA (20) |

| The code | rm 990 (2011) | TEXAS SOUTHER | N UNIVERSIT | 'YY | 74-1620415 | | Page 2 |
|---|----------------|------------------------------|--------------------------|---------------------------|-------------------------------|------------|------------------------|
| Check if Schedule O Contains a response to any question in this Parl III See Schedule O Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E2? If "vis." describe these new services on Schedule O Did the organization cause conducting, or make significant changes in how it conducts, any program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 307,967 including grants of \$) (Revenue \$ CEMERAL SUPPORT OF THE WELFARE OF TEXAS SOUTHERN UNIVERSITY 4b (Code) (Expenses \$ 307,967 including grants of \$ 95,048) (Revenue \$ CEMERAL SUPPORT OF THE WELFARE OF TEXAS SOUTHERN UNIVERSITY 4c (Code) (Expenses \$ 570 including grants of \$) (Revenue \$ TSU URBAN LEARNING CENTER — FUNDS ARE EXPENDED TO ENHANCE THE LEVEL OF SERVIVERSITY IN MEETING THE NEED OF THE STUDENTS AND THE COMMUNITY SURROUNDING THE UNIVERSITY. 4d Other program services (Describe in Schedule O) (Expenses \$) (Revenue \$) | Zart W S | | | | | | |
| Dod the organization undertake any significant program services during the year which were not listed on the prior form 980 or 990-E2? If "Yes," describe these new services on Schedule O Dod the organization cease conducting, or make significant changes in how it conducts, any program services as measured by expenses Section 501(s)(3) and 501(s)(4) organizations and section 4947(s)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and reverue, if any, for each program service reported Gode (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ 100 (Code) (Expenses \$ 308,537) (Revenue \$ 308,537) | | Check if Schedule O co | ntains a response | to any question in t | his Part III | | X |
| Did the organization undertake any significant program services during the year which were not listed on the prior Form 90 or 90-E2? If Yes, 'describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services accomplishments for each of its three largest program services, as measured by expenses. Section 50(c)(3) and 50(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported a (Code) (Expenses \$ 307, 967 including grants of \$) (Revenue \$ Code) b (Code) (Expenses \$ 307, 967 including grants of \$ 95,048) (Revenue \$ Code) Code) (Expenses \$ 570 including grants of \$), (Revenue \$ Code) THE WELFARE OF TEXAS SOUTHERN UNIVERSITY C (Code) (Expenses \$ 570 including grants of \$), (Revenue \$ TEXAS SOUTHERN TEXAS SOUTHERN TEXAS SOUTHERN TEXAS SOUTHERN UNIVERSITY IN MEETING THE NEEDS OF THE STUDENTS AND THE COMMUNITY SURROUNDING THE UNIVERSITY. Id Other program services (Describe in Schedule O) (Expenses \$), (Revenue \$)), (Revenue \$) } Id Other program services (Describe in Schedule O) (Expenses \$), (Revenue \$) | | | on | | | | |
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| le Total program service expenses ► 308,537 | | | | |) /D | | ` |
| | | | | |) (Revenue \$ | | |
| A Form 990 | | grain service expenses | | | | | Form 990 (2011) |

| | • | | 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 (see instructions)? | 2 | · ^ | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | , | | x |
| | candidates for public office? If "Yes," complete Schedule C, Part I | _3_ | | |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | 4 | | x |
| _ | election in effect during the tax year? If "Yes," complete Schedule C, Part II | - | - | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | 1 | |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| U | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | - 1 | |
| | "Yes," complete Schedule D, Part I | 6 | 1 | x |
| 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 | ſ | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | Ė | | |
| Ū | complete Schedule D, Part III | 8 | i | X |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part | | | |
| J | 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 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 | 13 TA | | F |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | - | | |
| | complete Schedule D, Part VI | 11a | x | |
| ь | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more | | Î | |
| | of its total assets reported in Part X, line 169 If "Yes," complete Schedule D, Part VII | 11b | | X |
| С | 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 | 11c | | X |
| 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 | | X |
| 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? If "Yes," and if | | | |
| | the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | <u> </u> |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| 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 | | | v |
| | 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 | 4- | | v |
| 40 | organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | + | <u> </u> |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | ا ء ا | - 1 | х |
| 47 | to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | 16 | | |
| 17 | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | х |
| 19 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | ├ | | |
| 18 | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | '0 | | |
| 13 | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| _ ~ | | | | |

Form 990 (2011) TEXAS SOUTHERN UNIVERSITY

| ∵(P:a | intivity Checklist of Required Schedules (continued) | | | |
|-------|--|------|--------------|----------------|
| | | | Yes | No |
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization | | x | İ |
| | in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | ^ | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States | - | x | |
| | on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | . 22 | <u> </u> | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | İ | | ĺ |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | v |
| | 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 | | | ĺ |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b | | | v |
| _ | through 24d and complete Schedule K. If "No," go to line 25 | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | <u> </u> |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | ĺ |
| | to defease any tax-exempt bonds? | 24c | | <u> </u> |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | - |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 25- | | v |
| | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| ь | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | | | 1 |
| | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | 0.51 | | v |
| | If "Yes," complete Schedule L, Part I | 25b | \vdash | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | ٠, | | x |
| | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | \vdash | <u> </u> |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | l |
| | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | 27 | | x |
| | entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | . ÷ . | |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, | | 44 | ν., |
| | Part IV instructions for applicable filing thresholds, conditions, and exceptions): | 28a | | x |
| a | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 200 | | |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | 28ь | | x |
| | Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | 200 | | |
| С | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | x |
| 20 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 29 | Did the organization receive more trial \$25,000 in non-cash contributions in res, complete conclude in Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| 30 | 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, | | | |
| J. | Part I | 31 | 1 | x |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| - | complete Schedule N, Part II | 32 | | х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part i | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, | | | |
| | IV, and V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | Did 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 | 35b | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable | | | |
| | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | 1 |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, | | | 1 |
| | Part VI | 37 | <u> </u> | 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 | |
| | | | | C |

Form 990 (2011) TEXAS SOUTHERN UNIVERSITY

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes Nο 24 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable b Did the organization comply with backup withholding rules for reportable payments to vendors and X reportable gaming (gambling) winnings to prize winners? 10 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a ~T. Statements, filed for the calendar year ending 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 federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X account)? 4a b If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5a X 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods X and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X 7c required to file Form 8282? 7d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e e X 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 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 8 organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a 9Ь b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10a а Initiation fees and capital contributions included on Part VIII, line 12 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: 11a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against 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 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O . -Enter the amount of reserves the organization is required to maintain by the states in which 13b the organization is licensed to issue qualified health plans 13c Enter the amount of reserves on hand C X Did the organization receive any payments for indoor tanning services during the tax year? 14a 14a

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2011) TEXAS SOUTHERN UNIVERSITY
Part VI Governance, Management, and Disclosure 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 ' | <u> </u> | | | X |
|-------------|--|-----------|------------|--------------|--------------|-------------|
| Sec | tion A. Governing Body and Management | | | | | |
| | • | | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 15 | <u> </u> ' ' | | |
| | 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 | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 15 | 1, | İ | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | | | |
| | any other officer, director, trustee, or key employee? | | | 2_ | <u> </u> | X |
| 3 | Did the organization delegate control over management duties customanly performed by or under the direct | | | | | |
| | supervision of officers, directors, or trustees, or key employees to a management company or other person? | | | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | 4 | <u> </u> | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | | 5_ | | X |
| 6 | Did the organization have members or stockholders? | | | 6_ | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | l _ | | ٠,, |
| | one or more members of the governing body? | | | 7a_ | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | l | | |
| | stockholders, or persons other than the governing body? | | | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year be | y the f | ollowing | ـمــــ | | i- |
| а | The governing body? | | | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | | | 8b | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | _ | | x |
| | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | ıl Boy | ropus Code | 9_ | <u> </u> | |
| <u>Sec</u> | tion B. Policies (This Section B requests information about policies not required by the Intern | al INE | · | ; | Yes | No |
| 10- | Did the assessment as have level shorters because or offlicted? | | • | 10a | 165 | X |
| 10a | Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | IVa | | - |
| b | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | | | 10ь | | |
| 11a | | form? | | 11a | | х |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | , 1011111 | | 7 % | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | x | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to | conflic | ts? | 12b | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | 122 | | |
| · | describe in Schedule O how this was done | | | 12c | x | |
| 13 | Did the organization have a written whistleblower policy? | | | 13 | | х |
| 14 | Did the organization have a written document retention and destruction policy? | | | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | - 1 | i | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | خف | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | | x |
| b | Other officers or key employees of the organization | | | 15b | | X |
| | 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 taxable entity during the year? | | | 16a | | X_ |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | .A | ł | |
| | 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? | | | 16b | | _ |
| Sec | tion C. Disclosure | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶ None | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(d |)(3)s o | nly) | | | |
| | available for public inspection. Indicate how you made these available. Check all that apply | | | | | |
| | Own website Another's website X Upon request | | | | | |
| 19 | 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 | | • | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the | | | | | |
| | organization ► TEXAS SOUTHERN UNIVERSITY FOUND. 3100 CLEBURNE AVE. | 1.4 | 713 | 3-31 | 3 <u>-</u> 7 | A = A |
| U | TIK / / UU | | , , , | , — . T I | ~ · / | |

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
- 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) Name and Title | (B) Average hours per week (describe | (C) (D) (E) Position Reportable Compensation from food incompanies of incompensation from greated compensation from greated from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation from greated compensation greated compensation from greated compensation from greated compensation from greated compensation from greated compensation greated compensation greated compensation greated compensation greated compensation greated compensation greated gre | | | | | | | | (F) Estimated amount of other compensation from the | | |
|-----------------------|--|--|-----------------------|----------------|--------------|------------------------------|--------|-----------------|-----------------|---|--|--|
| | hours for related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | (***21833-##66) | organization and related organizations | | |
| (1) GERALD B SMITH | | | | | | | | | _ | | | |
| CHAIR | 0.00 | X | | X | | Ш | | 0 | 0 | 0 | | |
| (2) ANTHONY R CHASE | 0.00 | x | | | | | | 0 | o | 0 | | |
| (3) JOSEPH PROLER | | İ | | | | | | | | | | |
| TREASURER | 0.00 | \mathbf{x} | | x | | 1 | | 0 | 0 | 0 | | |
| (4) LAMONT WADDELL | • | | | | | | | | | | | |
| SECRETARY | 0.00 | X | | X | | | | 0 | 0 | 0 | | |
| (5) KAMORU A. LAWAL | 0.00 | x | | | | | | o | o | o | | |
| (6) BRUCE LABOON | 0.00 | x | | | | | | 0 | 0 | 0 | | |
| (7) GENE LOCKE | 0.00 | x | | - | | | | 0 | 0 | 0 | | |
| (8) REGINA ROGERS | 0.00 | x | | | | | | 0 | 0 | 0 | | |
| (9) LARRY VESELKA | 0.00 | x | | | | | | 0 | 0 | 0 | | |
| (10) WILLIE ALEXANDER | 0.00 | 1 | _ | | | \vdash | | | | | | |
| VICE CHAIR | 0.00 | x | | $ \mathbf{x} $ | | | | o | o | 0 | | |
| (11) GEORGE FOREMAN | 0.00 | x | | | | | | 0 | 0 | 0 | | |
| (12) Jodie Jiles | 0.00 | x | | | | | | . 0 | 0 | 0 | | |
| (13) Ramon Manning | 0.00 | x | | | | | | 0 | 0 | 0 | | |
| (14)Matt Rogers | 0.00 | x | | | | | | 0 | 0 | 0 | | |

| <u>Form</u> | 990 (2011) | TEXAS SOU | | | | | | | | 74-162 | | Page |
|-------------|-------------|---|--|-----------------------------------|-----------------------|------------------------------------|--------------|------------------------------|-------------|---|--|---|
| Par | t VII | Section A. Officers | , Directors, Tru | istee | s, K | ey E | mp | loyee | s, a | and Highest Compensated | d Employees (continued) | |
| • | Nam | (A) ne and title | (B) Average hours per week (describe hours for | of | ox, uni ficer a | Pos check less pe and a c | erson | than o | ee) | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |
| | | | related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | | organization and related organizations |
| (15) 🛚 | Chomas | Jones | 0.00 | x | | <u> </u> | | | | 0 | 0 | |
| (16) | | | 0.00 | | | | | | | | | |
| (17) | | | | - | | | | | | | | |
| (18) | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | |
| (20) | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | : | |
| (21) | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | |
| (24) | | <u> </u> | | | | | | | | | | |
| (25) | | | | | | | | | | | | |
| 1b | Sub-total | | | <u> </u> | ٠ | 1 | | • | • | | | |
| | Total (ad | m continuation she d lines 1b and 1c) | | | | | | | > | | | |
| 2 | | ber of individuals (incompensation from | | | | nose | liste | d abo | ove) | who received more than \$1 | 00,000 in | |
| 3 | | | | | | ruste | e, ke | ey em | ploy | yee, or highest compensate | d | Yes No |
| 4 | For any in | on line 1a? If "Yes," idividual listed on line | 1a, is the sum o | of rep | ortal | ble c | omp | ensa | lion | and other compensation fro | m the | 3 X |
| _ | individual | _ | | | | | | | | mplete Schedule J for such | | 4 X |
| 5 | for service | es rendered to the or | ganization? If "Ye | ue co | ompe | ensa | tion Sch | rom edule | J fo | unrelated organization or in or such person | aividuai | 5 X |
| Sec 1 | Complete | dependent Contrac this table for your five | e highest compe | nsat | ed in | depe | ende | nt co | ntra | ctors that received more that ryear ending with or within | in \$100,000 of | |
| | Compense | | (A) business address | прс | 1341 | 017 10 | 74 (310 | - Gaic | | | (B) Otion of services | (C) Compensation |
| | | | | _ | | | | | | | • | |
| | · · | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 2 | | nber of independent of more than \$100,000 | | | | | | | | listed above) who | 0 | in the sale |
| | | | | | | | | | | | | Fa. 990 (00 |

| <u>'Pa</u> | rt V | III Staten | <u>nent of Reve</u> | <u>nue</u> | | | | | | A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | |
|--|----------|---|---|-------------|---------------|-------------|----------------------|---------|---|--|---|
| | | | | | | | (A) Total revenue | | (B) Related or exempt function revenue | (C) Unrelated business , revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| ts ts | 1a | Federated can | npaigns | 1a | | | | Т | | | |
| ran | b | Membership d | | 1b | | | | .1 | | | |
| ءَ ق | _ | Fundraising ev | | 1c | | | |]. | | | |
| ifts r A | ٦ | Related organi | | 1d | | | | | | | |
| ច្ចម៉ | u | _ | | | | | , | | | • | - ' |
| Contributions, Gifts, Grants and Other Similar Amounts | ٠ | Government grants | | 1e | - | | | 1 | | | |
| e Ei | T | All other contribution and similar amounts | | | _ | | | | | • | |
| 들 | | | | 1f | 4; | 34,473 | | 1 | • 14 to 5 | • | |
| d it | g | | ns included in lines 1a-1 | f \$ | | | - | 1 | | • • | |
| | h | Total. Add line | s 1a-1f | | | • | 434,47 | 3 | * | · · · · · · · · · | a* |
| Program Service Revenue | | | | | LE | Busn. Code | | - | | | |
| vel | 2a | Ticket : | Sales | | <u>L</u> | | 2,36 | 0 | 2,360 | | |
| Re | b | | | | | | | \perp | | | |
| vice | c | | | | | | | | , | | |
| Ser | d | | | | | | | | | | |
| Ē | е | | | | | | | | • | | |
| ğ | f | All other progra | am service reven | ue | | | | | | | |
| Pr | g | | | | _ | | 2,36 | 0 | | | |
| | 3 | | ome (including d | vidends, | ınterest, | | | 1 | | • | |
| | | and other simil | | | | ▶ | 5,14 | 1 | 5,141 | | |
| | 4 | | vestment of tax- | exempt b | ond proce | eds 🕨 | | | | | |
| | 5 | Royalties | | | | • | · · · | Ť | | | |
| | | , | (ı) Real | | (II) Pers | onal | | 1 | , e ⁻ | | |
| | 6a | Gross rents | | | ., | | • | | | | 4 |
| | b | Less rental exps | - | | | | - | | | | • |
| | C | Rental inc or (loss) | | | | | | | | • | |
| | d | Net rental inco | me or (loss) | | | _ | | - - | | · | • - |
| | 7a | Gross amount from | (i) Securities | T | (II) Oth | ner | | + | A 18 4 5 5 5 | | |
| | | sales of assets | (,, | | <u> </u> | | | . | | المراج الأراد الأراد الأراد الأراد الأراد الأراد الأراد الأراد الأراد الأراد الأراد الأراد الأراد ال | a |
| | b | other than inventory Less cost or other | | | | | | | 3.00 | | |
| | _ | basis & sales exps | | | | | | | | | |
| | С | Gain or (loss) | | | | | | . | | ` | |
| | d | Net gain or (los | L | | | • | | - - | | | |
| | 8a | - | om fundraising even | tc [| | | | +- | | | |
| ne | 0a | (not including \$ | - | " | | | | | , , | • | |
| Ven | | | eported on line 1c) | | | | | 1 | 37 (4) | • | • |
| æ | | See Part IV, line | • | | | | • | | 200 | | |
| Other Revenue | . | Less direct ex | | a b | | | | H. | ** | \$ 6 57m ** | a |
| 5 | | | • | ~ _ | · anto | | | - ' | | | - - - |
| | | | (loss) from fundr om gaming activities | | ents | | | + | - 1.5 mg/s 2.5 E | - | |
| | Ja | See Part IV, line | | | | | | . . | | | |
| | . | Less. direct ex | | a | | | | 1 | | • • • | • |
| | | | loss) from gamı | | | | | - | | | |
| | | Gross sales of | | ig activiti | 162 | | | +- | | | |
| | IVa | returns and alle | | _ | | | | | | * . | • |
| | _ | Less cost of g | | a b | | | | | | | |
| | | ~ | | | | • | | | | | |
| | | | (loss) from sales cellaneous Revenue | or inven | | Busn. Code | | + | | | |
| | 11a | | | | | .2311, 3008 | 7,24 | 5 | 7,245 | - <u></u> | |
| | b | Other Rev | anda | | <u></u> ⊢ | | ,,24. | ╧┼ | 1,245 | | |
| | C | | | | | | | + | - | · | <u> </u> |
| | d | All other reven | ue. | | - | | | + | | - | |
| | e | Total. Add line | | | _ | | 7,24 | 5 | P | | |
| | 12 | | s Tra-Tru s. See instruction | s | | | 449,21 | | 14,746 | . 0 | |
| | | | 3555. 55.1011 | | | | | | | <u></u> | |

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)

| | Check if Schedule O contains a response | to any question in this Part | IX | | |
|----------|---|------------------------------|--|---|---------------------------------------|
| Do | not include amounts reported on lines 6b, | (A) Total expenses | (B) Program service | (C) Management and | (D) 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 | 84,243 | 84,243 | | |
| 2 | Grants and other assistance to individuals in | | | | \$ 1 h |
| | the U.S See Part IV, line 22 | 10,805 | 10,805 | 7 | |
| 3 | Grants and other assistance to governments, | | | * 44. | |
| | organizations, and individuals outside the | | | - / · · · · · · · · · · · · · · · · · · | |
| | U S See Part IV, lines 15 and 16 | | | 9 | Wile us con |
| 4 | Benefits paid to or for members | | | 4 *** | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | 4 | | |
| | persons (as defined under section 4958(f)(1)) and | | • | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | - | | | |
| 9 | Other employee benefits | | | • | • |
| 10 | Payroll taxes | | | | . |
| 11 | Fees for services (non-employees) | | | | |
| a | Management | | ······································ | · | · · · · · · · · · · · · · · · · · · · |
| b | Legal | 00 500 | | 22 500 | |
| C | Accounting | 22,500 | · · · · · · · · · · · · · · · · · · · | 22,500 | |
| d | , . | | | - | |
| e | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | 9 900 | 8,800 | · · · · · · · · · · · · · · · · · · · | |
| 9 | Other | 8,800 4,407 | 4,407 | | |
| 12 | Advertising and promotion | 2,290 | 2,290 | | |
| 13 | Office expenses | 2,290 | 2,290 | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | , | | |
| 16 | Occupancy Travel | 19,951 | 19,951 | | |
| 17 18 | Payments of travel or entertainment expenses | 13,331 | 13,331 | | <u>.</u> |
| 10 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 63,334 | 63,334 | · · · · · · · · · · · · · · · · · · · | |
| 20 | Interest | 00,001 | 00/001 | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 2,360 | 2,360 | | |
| 24 | Other expenses. Itemize expenses not covered | ····· | 41 | ethan e | 2 = 1.70 |
| | above (List miscellaneous expenses in line 24e If | | | , age | |
| | line 24e amount exceeds 10% of line 25, column | | · · | | |
| | (A) amount, list line 24e expenses on Schedule O) | | 17/2 | 1 m | • |
| а | | 80,192 | 80,192 | | |
| b | Summer School Program | 20,000 | 20,000 | | |
| С | Miscellaneous | 3,348 | 3,348 | | <u> </u> |
| d | Labor | 3,000 | 3,000 | | |
| е | All other expenses | 5,807 | 5,807 | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 331,037 | 308,537 | 22,500 | 0 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | | | |

Balance Sheet Part X (B) (A) End of year Beginning of year 117,724 166,138 1 Cash-non-interest bearing 1,405,825 1,261,729 2 Savings and temporary cash investments 2 22,500 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing 3 employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 66,000 10a other basis Complete Part VI of Schedule D 66,000 66,000 10b 10c b Less: accumulated depreciation 11 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 Investments-program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 1,493,867 1,612,049 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key Liabilities employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 0 0 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ►X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 59,012 27 Unrestricted net assets 1,063,345 809,256 28 Temporarily restricted net assets 625,599 548,704 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ 30 complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 1,493,867 1,612,049 33 Total net assets or fund balances 493,867 1,612,049 Total liabilities and net assets/fund balances

Form **990** (2011)

| orm 990 (2011) TEXAS SOUTHERN | UNIVERSITY | 74-1620415 | | | Page 12 |
|---|-------------------------------------|---------------------------------|---|------|----------------|
| Part XI Reconciliation of Net As | sets | • | | | |
| Check if Schedule O contain | ns a response to any question | in this Part XI | | | |
| | | | | 4.4 | 0.10 |
| Total revenue (must equal Part VIII, column | n (A), line 12) | | 1 | | 9,219 |
| 2 Total expenses (must equal Part IX, column | n (A), line 25) | | 2 | | 1,037 |
| 3 Revenue less expenses Subtract line 2 fro | m line 1 | | 3 | | 8,182 |
| 4 Net assets or fund balances at beginning o | f year (must equal Part X, line 33, | column (A)) | 4 | 1,49 | 3,867 |
| 5 Other changes in net assets or fund balance | es (explain in Schedule O) | | 5 | | |
| 6 Net assets or fund balances at end of year | Combine lines 3, 4, and 5 (must e | equal Part X, line 33, | | | |
| column (B)) | | , | 6 | 1,61 | 2,049 |
| Part XII Financial Statements an | d Reporting | | | | |
| Check if Schedule O contain | ns a response to any question | in this Part XII | | | |
| | | | | Y | 'es No |
| 1 Accounting method used to prepare the Fo | rm 990 Cash 🕱 A | ccrual Other | | | |
| If the organization changed its method of a | ccounting from a prior year or che | cked "Other," explain in | • | | |
| Schedule O | | | - | A | |
| 2a Were the organization's financial statement | ts compiled or reviewed by an inde | ependent accountant? | | 2a | X_ |
| b Were the organization's financial statement | ts audited by an independent acco | untant? | | 2b | X |
| c If "Yes" to line 2a or 2b, does the organizat | ion have a committee that assume | es responsibility for oversight | | | |
| of the audit, review, or compilation of its fir | | | | 2c | |
| If the organization changed either its overs | | | | • | |
| Schedule O | | | | | |
| d If "Yes" to line 2a or 2b, check a box below | to indicate whether the financial s | tatements for the year were | | 1 | |
| issued on a separate basis, consolidated b | | | | 1 | |
| Separate basis Consolidated basis | | separate basis | • | | |
| 3a As a result of a federal award, was the org | anization required to undergo an a | udit or audits as set forth in | | | |
| the Single Audit Act and OMB Circular A-1 | | | | 3a | |
| b If "Yes," did the organization undergo the re | | nization did not undergo the | | | |
| required audit or audits, explain why in Sch | | | | 3b | |
| , | | | | Form | 990 (2011) |

SCHEDULE A (Form 990 or 990-EZ)

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.

2011
Open to Public
Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TEXAS SOUTHERN UNIVERSITY FOUNDATION

Employer Identification number 74-1620415

| | aiti | Reast | on for Public Charity | Status (All organizations | must cor | npiete ti | ilis pair | 1 300 | เมริก | CHOIIS | | | |
|------------|---------|---|--------------------------------|--|--------------|---|--------------|---------------------|---|----------------------------|------------|---------|----|
| The | orgai | nization is not a | a private foundation because | eit is (For lines 1 through 11, ch | eck only o | ne box) | | | | • | | | |
| 1 | | A church, con | vention of churches, or asso | ociation of churches described in | section 1 | 70(b)(1)(| A)(i). | | | | | | |
| 2 | | A school desc | cribed in section 170(b)(1)(| A)(ii). (Attach Schedule E) | | | | | | | | | |
| 3 | | A hospital or a | a cooperative hospital servic | e organization described in sec | tion 170(b |)(1)(A)(iii |). | | | | | | |
| 4 | | A medical res | earch organization operated | in conjunction with a hospital de | escribed in | section ' | 170(b)(1 |)(A)(iii). | Enter t | he hospita | ıl's name, | | |
| | | city, and state | | • | | | | | | | | | |
| 5 | X | An organization | on operated for the benefit o | f a college or university owned o | r operated | by a gove | ernmenta | al unit de | scribed | l ın | | | |
| | | - | b)(1)(A)(iv). (Complete Part | • | • | | | | | | | | |
| 6 | | • | | overnmental unit described in se | ction 170 | b)(1)(A)(| v). | | | | | | |
| 7 | | • | , | substantial part of its support froi | | | • | n the ge | neral pu | iplic . | | | |
| | | | section 170(b)(1)(A)(vi). (C | | J | | | · | • | | | | |
| 8 | | | | 70(b)(1)(A)(vi). (Complete Part | 11.) | | | | | | | | |
| 9 | H | • | |) more than 33 1/3% of its suppo | • | ntributions | . membe | ership fe | es, and | gross | | | |
| | | | | pt functions—subject to certain | | | | | | | | | |
| | | • | | d unrelated business taxable inc | • | | | | | | | | |
| | | • | - |), 1975 See section 509(a)(2). | • | | , | | | | | | |
| 10 | | | • | exclusively to test for public safe | | - | (a)(4). | | | | | | |
| 11 | | • | • | exclusively for the benefit of, to p | - | | | carry ou | it the | | | | |
| | | | | ed organizations described in se | | | | | | tion. | | | |
| | | | | ne type of supporting organization | | | | | | | | | |
| | | a Type | | c Type III-Function | | | d | | e III–Ot | her | | | |
| е | | L · | | anization is not controlled directly | y or indired | tly by one | or more | disqual | fied per | rsons | | | |
| | | - | <u>=</u> | r than one or more publicly supp | | | | | | | | | |
| | | or section 509 | a)(2) | | | | • | | | | | | |
| f | | If the organiza | ation received a written deter | rmination from the IRS that it is a | Type I, Ty | pe II, or T | Гуре III s | upportin | g | | | | |
| | | organization, | check this box | | | | | | | | | | |
| g | | Since August | 17, 2006, has the organizati | ion accepted any gift or contπbu | tion from a | ny of the | | | | | | | |
| | | following pers | | | | | | | | | | | |
| | | (i) A person | who directly or indirectly co | ntrols, either alone or together v | vith person | s describe | ed ın (ıı) a | and | | | | Yes | No |
| | | (III) belov | v, the governing body of the | supported organization? | | | | | | | 11g(i) | | |
| | | (ii) A family | member of a person describ | ed in (i) above? | | | | | | | 11g(ii) | | |
| | | (iii) A 35% co | ontrolled entity of a person d | lescribed in (i) or (ii) above? | | | | | | | 11g(iii) | | |
| h | | Provide the fo | ollowing information about th | ne supported organization(s) | | | | | | | | | |
| | (ı) Nan | ne of supported | (ii) EIN | (iii) Type of organization | (iv) Is the | organization | | ou notify | | is the | (viı) Amo | ount of | _ |
| | or | ganization | | (described on lines 1–9 | | sted in your | T | nization in of your | | tion in col ized in the | supp | ort | |
| | | | | above or IRC section (see instructions)) | governing | document? | | port? | | S? | | | |
| | | | | | Yes | No | Yes | No | Yes | No | | | |
| (A) | | | | | | | | | | | | | |
| | | | | | | | | | ļ | | | | |
| (B) | | | | | | İ | | ĺ | | | | | |
| <u>(C)</u> | | | | | + | | | | | - | | | |
| (C) | | | | | | | | | | | | | |
| (D) | | | | | | | | | | | | | |
| | | | | | 4 | | ļ | <u> </u> | | \vdash | | | |
| (E) | | | | | | | | | | | | | |
| | | | | | + | 1 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1. 1. 1. T. | Ş | | 1 0 1 | | | |
| Tot | al | ! | | | 1. | 1000 | 4 3 | | 1 | ا جرمَ ا | | | |

Part II

Schedule A (Form 990 or 990-EZ) 2011

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.)

| Sec | tion A. Public Support | talls to quality t | ander the tests | noted below, pr | iodoo oompioto | | - |
|------|---|----------------------|----------------------|----------------------|-----------------------|--|---------------------|
| | ndar 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") | 99,339 | 510,441 | 444,435 | 385,185 | ' 436,833 | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 99,339 | 510,441 | 444,435 | 385,185 | 436,833 | 1,876,233 |
| 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) | ~ | | | | a de la proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della proposition della prop | 116,460 |
| 6 | Public support. Subtract line 5 from line 4 | | | | F Craws | | 1,759,773 |
| | tion 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 | 99,339 | 510,441 | 444,435 | 385,185 | 436,833 | 1,876,233 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 76,066 | 17,239 | 7,341 | 6,289 | 5,141 | 112,076 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | t | | 1,988,309 |
| 12 | Gross receipts from related activities, etc. (| | | | | . 12 | 14,746 |
| 13 | First five years. If the Form 990 is for the | | second, third, fourt | h, or fifth tax year | as a section 501(c) | (3) | |
| _ | organization, check this box and stop here | | | | | | D _ |
| | tion C. Computation of Public Su | | | | | 7 44 | |
| 14 | Public support percentage for 2011 (line 6, | | - | f)) - | | 14 | 88.51% |
| 15 | Public support percentage from 2010 Sche | | | | 4/00/ | 15 | 81.50% |
| 16a | 33 1/3% support test—2011. If the organi | | | | 1/3% or more, cne | CK THIS | ▶ X |
| _ | box and stop here. The organization qualif | • • | • • • | | in 22 1/29/ or more | | |
| b | 33 1/3% support test—2010. If the organic check this box and stop here. The organiz | | | | 15 33 1/3% OF HIGH | , | ▶ [|
| 17a | | • | | - | or 16h and line 1 | ∆ 1¢ ¹ | |
| 110 | 10% or more, and if the organization meets | | | | | | |
| | Part IV how the organization meets the "fac | | | | | | |
| | organization | us-and-circumstant | es test The organ | nzation qualified at | s a pasiioly support | - | > |
| b | 10%-facts-and-circumstances test—20° | _ | | | | line | |
| | 15 is 10% or more, and if the organization r | | | | | | |
| | Explain in Part IV how the organization mee | ets the "facts-and-c | rcumstances" test | The organization | qualifies as a public | яly | . — |
| | supported organization | | | | | | ▶ _ |
| 18 | Private foundation. If the organization did | I not check a box or | n line 13, 16a, 16b, | 17a, or 17b, check | k this box and see | | _ ┌─ |
| | instructions | | | | | 1 | P [_ |

Part III

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 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.)

| | the organization rand to | quality artaor tri | C (CCC IIGCC D | Cicit, picado oc | | | |
|-------|--|-----------------------|----------------------|-----------------------|---------------------|---------------------------------------|-----------------|
| | tion A. Public Support | T () 2007 | 43,000 | | (4) 0040 | (-) 2044 | (A) Tatal |
| | dar 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") | | | | | | |
| 2 | 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 | | | | | , | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | , | |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | _ | | | | |
| b | 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 | | | | | | |
| С | Add lines 7a and 7b | | | | | <u> </u> | |
| 8 | Public support (Subtract line 7c from line 6) | - | | | | 4 84 | <u>.</u> |
| Sec | tion B. Total Support | | | | | · · · · · · · · · · · · · · · · · · · | |
| Caler | ndar year (or fiscal year beginning in) ▶ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | <u> </u> | | <u> </u> | | - 7' |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | , | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12) | | <u> </u> | | | | |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop here | - | second, third, four | th, or fifth tax year | as a section 501(c) |)(3) | . |
| Sec | tion C. Computation of Public Su | pport Percenta | age | | | | |
| 15 | Public support percentage for 2011 (line 8, | column (f) divided | by line 13, column | (f)) | | 15 | % |
| 16 | Public support percentage from 2010 Sche | | | | | 16 | <u>%</u> |
| Sec | tion D. Computation of Investmen | <u>nt Income Perc</u> | entage | • | | | |
| 17 | Investment income percentage for 2011 (lin | | | column (f)) | | 17 | %_ |
| 18 | Investment income percentage from 2010 | | | | | 18 | %_ |
| 19a | 33 1/3% support tests—2011. If the orga | | | | | | |
| _ | 17 is not more than 33 1/3%, check this bo | - | - | | | | P |
| b | 33 1/3% support tests—2010. If the orga | | | | | | |
| •• | line 18 is not more than 33 1/3%, check thi | | | | | | |
| 20 | Private foundation. If the organization did | o not check a box o | n iine 14, 19a, or 1 | yd, check this box | and see instruction | IS | P |

Schedule A (Form 990 or 990-EZ) 2011 TEXAS SOUTHERN UNIVERSITY

74-1620415

Page 4

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. Also complete this part for any 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Rublic (* Inspection

Name of the organization Employer Identification number TEXAS SOUTHERN UNIVERSITY 74-1620415 FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds 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 charitable 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 an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat 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 2a Total number of conservation easements 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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) (i) and section 170(h)(4)(B)(ii)? 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

| Pa | ert III Organizations Maintainin | a Collections of A | | sures, or Other | Similar Assets | (continued) |
|----------------|--|----------------------------|----------------------------|---------------------------------------|----------------------|---|
| 3 | Using the organization's acquisition, accessi collection items (check all that apply). | | | | | <u> </u> |
| а | Public exhibition | d ∏ ι | oan or exchange progr | rams | | |
| b | Scholarly research | - | Other | | • | |
| C | Preservation for future generations | لــــا | | | | |
| 4 | Provide a description of the organization's co | ollections and explain he | ow they further the orga | anization's exempt purp | oose in Part | |
| | XIV | | | | | |
| 5 | During the year, did the organization solicit of | or receive donations of a | art, historical treasures, | or other similar | | |
| | assets to be sold to raise funds rather than to | o be maintained as part | of the organization's c | ollection? | | Yes No |
| Pa | rt IV Escrow and Custodial Ar | rangements. Com | plete if the organiz | ation answered "Y | es" to Form 990 | , Part IV, |
| | line 9, or reported an amou | int on Form 990, Pa | art X, line 21. | | | |
| 1a | Is the organization an agent, trustee, custod | ian or other intermedian | y for contributions or ot | her assets not | | |
| | included on Form 990, Part X? | | | | • | Yes No |
| þ | If "Yes," explain the arrangement in Part XIV | and complete the follow | wing table | | | <u> </u> |
| | | | | | | Amount |
| | Beginning balance | | | | 1c | |
| d | Additions during the year | | | • | 1d | |
| е | Distributions during the year | | • | | 1e | |
| f | Ending balance | | | | | |
| | Did the organization include an amount on F | | 12 | | | Yes No |
| _ | If "Yes," explain the arrangement in Part XIV | | 1 | -" t- F 000 D | - 4 D / E 40 | |
| <u> </u> | ert V Endowment Funds. Comp | | | | | 1 (2) 5 |
| 4 | Day of soul base | (a) Current year | (b) Prior year 620, 235 | (c) Two years back 597,187 | (d) Three years back | (e) Four years back |
| | Beginning of year balance | 625,599 | 620,233 | 391,161 | · | |
| - | Contributions | | | | | 1.5 |
| C | Net investment earnings, gains, and | | 5,364 | 23,048 | | * # # # # # # # # # # # # # # # # # # # |
| | losses Grants or scholarships | | 3,304 | 23,040 | | = : |
| | Other expenditures for facilities and | | | | | |
| - | programs | 76,895 | | | | |
| f | Administrative expenses | | | | | |
| g | | 548,704 | 625,599 | 620,235 | · . | ور تامود |
| 2 | Provide the estimated percentage of the curi | | | | | |
| a | Board designated or quasi-endowment ▶ | % | 3, (,, | | | |
| b | Permanent endowment ▶ % | , | | | | |
| С | Temporarily restricted endowment ▶ | % | | | | |
| | The percentages in lines 2a, 2b, and 2c sho | uld equal 100% | • | | | |
| За | Are there endowment funds not in the posse | ssion of the organization | n that are held and adn | ninistered for the | | |
| | organization by | | | | | Yes No |
| | (i) unrelated organizations | | | | | 3a(i) X |
| | (ii) related organizations | | | | 1 | 3a(ii) X |
| b | If "Yes" to 3a(II), are the related organization | s listed as required on \$ | Schedule R? | | | 3b |
| _4_ | Describe in Part XIV the intended uses of the | | | | - | |
| _ <u>Pa</u> | art VILand, Buildings, and Equ | | | · · · · · · · · · · · · · · · · · · · | | |
| | Description of property | (a) Cost or other b | | | Accumulated | (d) Book value |
| - - | | (investment) | · (othe | 66,000 *** | epreciation | 66 000 |
| | Land | | | 56,000 355 37. | | 66,000 |
| | Buildings | | - | | | |
| C | • | | | | - | |
| d | Equipment Other | | | | | |
| | I. Add lines 1a through 1e. (Column (d) must | egual Form 990 Part X | column (B), line 10(c) |) | | 66,000 |
| | | | , -3.2 (=), (0) | | Sahad | ula D (Farm 000) 201: |

| Schedule D (Fe | orm 990) 2011 TEXAS SOUTHERN UNIVERS | SITY | 74-1620415 | Page : |
|-----------------|--|---|---|---------------------------------------|
| Part VII | Investments—Other Securities. See Form 990, | | | |
| | (a) Description of security or category | (b) Book value | (c) Method of valua | lion |
| | (including name of security) | • | Cost or end-of-year mark | ket value |
| (1) Financial d | envatives | | | |
| (2) Closely-he | ld equity interests | - | | |
| (3) Other | | | | |
| (A) | | | · · | |
| (B) | | | | |
| (C) | | | | |
| (D) | | | | - <u>-</u> |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| (I) | | | | |
| | n (b) must equal Form 990, Part X, col (B) line 12) | | 40 % | |
| Part VIII | Investments—Program Related. See Form 990, | Part X line 13 | | · |
| 1 410 7111 | (a) Description of investment type | (b) Book value | (c) Method of valua | tion |
| | (a) Description of Intestition type | (b) Book Value | Cost or end-of-year mar | |
| <u></u> | | - | | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | <u></u> |
| (5) | | <u> </u> | | |
| (6) | | | | |
| <u>(7)</u> | | | | |
| (8) | | | | - |
| (9) | | | | |
| (10) | (1) 15 000 B 1V 1 (B) 1 (0) | - | | |
| Part IX | (b) must equal Form 990, Part X, col (B) line 13) | L | <u></u> | |
| Partix | Other Assets. See Form 990, Part X, line 15. | | ···· | (b) Book value |
| (4) | (a) Description | | | (b) Book valde |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | · | |
| (8) | | | | |
| (9) | | | | |
| (10) | (t) | | • | _ |
| Part X | n (b) must equal Form 990, Part X, col (B) line 15.) | | | |
| | Other Liabilities. See Form 990, Part X, line 25. | (h) Pook volvo | | |
| 1. | (a) Description of liability | (b) Book value | - [∑, -, | |
| | income taxes | | -\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | ⊣ ''?' | ÷ ~ |
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| (6) | | | - ` | |
| _(7) | | ļ | | |
| (8) | | | | |
| (9) | | <u> </u> | - 1 2 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 | * * * * * * * * * * * * * * * * * * * |
| (10) | | <u> </u> | | |
| (11) | ······································ | | | - |
| Total. (Column | n (b) must equal Form 990, Part X, col (B) line 25) | <u> </u> | | |

| che | dule D (Form 990) 2011 TEXAS SOUTHERN UNIVERSITY | | 74-1620415 | |
|-----|--|-------------|------------------|---|
| Pa | rt XI Reconciliation of Change in Net Assets from Form 990 to A | udited Fina | ncial Statements | |
| 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 9 | | 10 | |
| Pa | rt XII Reconciliation of Revenue per Audited Financial Statements | s With Reve | nue per 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 | | Ş | |
| а | Net unrealized gains on investments | 2a | | |
| þ | Donated services and use of facilities | 2b | 17. | |
| С | Recoveries of prior year grants | 2c | * 76. | ٠ |
| d | Other (Describe in Part XIV) | 2d | " 1 | |
| е | 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 | | |
| С | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | | 5 | |
| Pa | rt XIII Reconciliation of Expenses per Audited Financial Statemen | ts With Exp | enses per Return | |
| 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 | | |
| b | Prior year adjustments | 2b | • • | |
| С | Other losses | 2c | | |
| d | Other (Describe in Part XIV) | 2d | 4 | |
| е | 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: | | \$ 30c- | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIV) | 4b | . Y. | |
| С | Add lines 4a and 4b | | 4c | |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | <u> </u> | 5 | L |
| Pa | art XIV Supplemental Information | | | |

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2011 TEXAS SOUTHERN U

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SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

OMB No 1545-0047

Open to Public Inspection

Schedule I (Form 990) (2011) **%** □ FINANCIAL ASSISTANCE (h) Purpose of grant or assistance Yes to 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. × Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" non-cash assistance (g) Description of Employer identification number 74-1620415 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance ► Attach to Form 990. 84,243 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Part II can be duplicated if additional space is needed General Information on Grants and Assistance (p) EIN For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEXAS SOUTHERN UNIVERSITY Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? TX 77004 (a) Name and address of organization (1) Texas Southern University FOUNDATION or government 3100 Cleburne Ave Department of the Treasury Internal Revenue Service Name of the organization Houston Part II Part I 3 3 <u>₹</u> 9 9 9 8 9

Schedule I (Form 990) (2011) TEXAS SOUTHERN UNIVERSITY 74-1620415

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Page 2

| | Part III can be duplicated if additional space is needed. | onal space is needed. | | | | |
|---------|---|--------------------------|------------------------|-------------------------|--------------------------------|---|
| 3) | (a) Type of grant or assistance | (b) Number of | (c) Amount of | (d) Amount of | (e) Method of valuation (book, | (e) Method of valuation (book, (f) Description of non-cash assistance |
| | | recipients | cash grant | non-cash assistance | FMV, appraisal, other) | |
| 1 Aid £ | 1 Aid for college tuition | 21 | 10,805 | | | |
| 2 | | | | | | |
| | | | | | | |
| , 4 | | | | | | |
| | | | | | | |
| ့ မ | | | | | | |
| | | | | | | |
| Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. | nplete this part to prov | ide the information re | equired in Part I, line | 2, and any other additional | information. |

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Name of the organization

TEXAS SOUTHERN UNIVERSITY FOUNDATION

Employer identification number 74–1620415

Form 990 - Organization's Mission or Most Significant Activities
TO SOLICIT AND RECEIVE CONTRIBUTIONS, GIFTS, DEVISES OR
BEQUESTS OF REAL OR PERSONAL PROPERTY OR BOTH FROM
INDIVIDUALS, FOUNDATIONS, PARTNERSHIPS, ASSOCIATIONS,
GOVERNMENTAL BODIES OF PUBLIC OR PRIVATE CORPORATIONS, AND
TO MAINTAIN, USE AND APPLY THE WHOLE OR ANY PART OF THE
INCOME THEREFROM AND THE PRINCIPAL THEREOF EXCLUSIVELY FOR
CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL ACTIVITIES
IN ORDER TO AID AND BENEFIT TEXAS SOUTHERN UNIVERSITY.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

THE 990 IS REVIEWED BY THE CHEIF FINANCIAL OFFICER AND THE ORGANIZATION'S

OUTSIDE ACCOUNTANT.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

EACH YEAR, EACH BOARD MEMBER SUBMITS A STATEMENT OF POSSIBLE CONFLICT OF

INTEREST WHICH IS VERIFIED AND REVIEWED BY THE BOARD.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are available upon request.