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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)

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

OMB No 1545-0047

A	For the	2011 calendar year, or tax year beginning SEP 1, 2011 and ending	AUG 31, 2012	· · · · · · · · · · · · · · · · · · ·							
В	Check if	C Name of organization	D Employer identifi	cation number							
	applicable										
	Addres change	* TSTC FOUNDATION									
	Name change	Doing Business As 75-2892470									
	Initial	Number and street (or P 0 box if mail is not delivered to street address) Room/s	r								
یا	Termin	SOUT CAMPOS DRIVE	254-	867-3940							
یإ	Amend	City or town, state or country, and ZIP + 4	G Gross receipts \$	2,478,515.							
L	Application pendin	WACO, 1X 70705	H(a) Is this a group re								
		F Name and address of principal officer:CURTIS CLEVELAND	for affiliates?	Yes X No							
		1000 WINCHELL, WACO, TX 76712	H(b) Are all affiliates inc								
		mpt status: X 501(c)(3)		list. (see instructions)							
		e:  WWW.TSTCFOUNDATION.ORG  organization X Corporation Trust Association Other L	H(c) Group exemptio								
	art I	Summary	Year of formation 2000 N	A State of legal domicile TA							
			EMENT THE CTA	TE OF							
90		Briefly describe the organization's mission or most significant activities: ${ m TO}$ ${ m COMPI}$ ${ m TEXAS}'$ ${ m SUPPORT}$ ${ m OF}$ ${ m THE}$ ${ m COLLEGES}$ ${ m BY}$ ${ m PROVIDING}$	FINANCIAL SIR	DODT FOR							
nan		Check this box  if the organization discontinued its operations or disposed of its operations.									
Activities & Governance	1	Number of voting members of the governing body (Part VI, line 1a)	3	12							
ဇ္	ı	Number of independent voting members of the governing body (Part VI, line 1b)	4	11							
eğ Ç	[	Fotal number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0							
ıitie	1	Total number of volunteers (estimate if necessary)	6	20							
Ğ	1	Fotal unrelated business revenue from Part VIII, column (C), line 12	7a	0.							
⋖	1	Net unrelated business taxable income from Form 990-T, line 34	. 7ь	0.							
			Prior Year	Current Year							
•	8	Contributions and grants (Part VIII, line 1h)	1,401,541.	1,563,171.							
nue.	9 1	Program service revenue (Part VIII, line 2g)	0.	0.							
<b>©</b>	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	17,480.	33,017.							
SE.	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	21,361.							
₹.	12	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,419,021.	1,617,549.							
UZININA Resenue	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	167,838.	708,224.							
j		Benefits paid to or for members (Part IX=coll tim DA), line 4)	0.	0.							
e e	15	Salaries, other compensation, employee benefits (Part X) column (A), lines 5-10)	0.	0.							
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.							
·Х	<b>b</b>	Total fundraising expenses (Part Madiumn (D), line 25) 22,610.	55 261	AC 11C							
	17 (	Other expenses (Part IX, Column (A), lines 11a-11d, 111-24e)	55,361. 223,199.	46,416.							
	18	Total expenses. Add lines 13-17 (ruger square line 14), line 25)	1,195,822.	754,640. 862,909.							
<u> </u>	19 [	Revenue less expenses. Sübtract line 18 from line 12	Beginning of Current Year								
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	8,073,531.	End of Year 9,482,565.							
Ass	21	Fotal liabilities (Part X, line 26)	5,177,260.	5,649,937.							
Set	22	Net assets or fund balances. Subtract line 21 from line 20	2,896,271.	3,832,628.							
P	art II	Signature Block	<u> </u>	370027020							
-		ties of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of m	v knowledge and belief, it is							
		, and complete. Declaration of preparer (other than officer) is based on all information of which preparer		,							
		Marila									
Sig	n Ì	Signature of active of the signature of	Date 3/	20/10							
He	re	MIKE HARDER, EXECUTIVE DIRECTOR		20/13							
		Type or print name and title									
		Print/Type preparer's name Preparec's signature	Date Check	PTIN							
Pale		ANTHONY WOMMACK WOWL	3/19/13 If self-employe								
	parer	Firm's name COKER, WOMMACK & COMPANY, P.C.	Firm's EIN ▶	74-2323205							
Use	Only	Firm's address P.O. BOX 8256		r 4   776   0071							
		WACO, TX 76714-8256	Phone no 2	54-776-3871							
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)	<u> </u>	X Yes No							

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			Form <b>99</b>	0 (2011)
4e	Total program service expenses ▶	708,224.		
4d	Other program services (Describe in Schedule O.) (Expenses \$	ints of \$ ) (Revenue \$	)	
4H	Other program services (Describe in Schedule O.)			
		-		
<b>→</b> C	(Code:/ (Expenses \$	including grants or \$ / (Rever		′
4c	(Corte: ) (Evanges &	Including grants of \$) (Rever		1
			<u>.                                    </u>	
				<del></del>
70	/ (Expenses a	/ (Hever	Ind &	′
4b	(Code ) (Evanges &	including grants of \$) (Rever	nue \$	<u> </u>
	REMEDIAL CLASSES.			
		ENT RECRUITMENT AND TEXTBOOK P	URCHASES FOR	
	DONORS, AND PERSONAL VISI	TS. MADE AWARDS TO DESERVING S	TUDENTS AND	
4a	(Code ) (Expenses \$ 708,22. CONDUCTED SUCCESSFUL FUND	24. including grants of \$ 708,224.) (Rever RAISING THROUGH DIRECT MAIL,	SOLICITED	)
<u></u>	others, the total expenses, and revenue, if any, for			
	Section 501(c)(3) and 501(c)(4) organizations and s	ection 4947(a)(1) trusts are required to report the amount of		
4	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accom-	nplishments for each of its three largest program services, a	s measured by expenses	
3		gnificant changes in how it conducts, any program services?	YesYes	X No
	If "Yes," describe these new services on Schedule			
2	the prior Form 990 or 990-EZ?	ram services during the year which were not listed on	Yes	X No
	Did the organization and adults are configured and	your contoon during the year which were and lated an		
		ION AND COMMUNITY SERVICE.		
		AND ONGOING PROJECTS AND ACTI		
1	Briefly describe the organization's mission:	F TEXAS' SUPPORT OF THE COLLEG	ידכ פע ספטנוחי	TNIC
	Check if Schedule O contains a response to			
	990 (2011) TSTC FOUNDAT 計劃 Statement of Program Service Ac		75-2892470	Page 2
-	000 (0044) 11/5/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	1 ( )NI	/K=7807/L/N	

### Form 990 (2011) TSTC FOUNDATION 75-2892470 Part W Checklist of Required Schedules No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Х 1 2 Is the organization required to complete Schedule B, Schedule of Contributors? X 2 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Х 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 X 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 X 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III X 8 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Х 9 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 X 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a b 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 X 11b c 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 X 11c 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 Х 11d X e Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X 11e 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 <u>1</u>1f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII X 12a 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 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 X 14a 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 X 14b 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 Х 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Х 16 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 ... X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

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18

19

20a

20b

X

X

X

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

complete Schedule G, Part III

... . ..

.

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?

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			1.7
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
254	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		Х
b	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Λ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	230		22
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
	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	<del></del>		, <del>,,,,,</del> ,,,
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		Ì	
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		·	
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
^4	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?		v l	
250	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
IJ	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	254		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
<b>J</b> U	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			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ŀ	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	
			990 (2	2011)

1 142	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		res	140
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С		1		
	(gambling) winnings to prize winners?	10	Х	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0	(		
ь	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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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.	1 1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		1	
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	8	<del></del>	
a	Did the organization make any taxable distributions under section 4966?	0-	1	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	- 30		<del></del>
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	. 1		
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	}	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	, [	1	
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	146		
		Form '	<b>990</b> (	2011)

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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 XSection 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 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 11 1b 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? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 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? X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? Х 8a **b** Each committee with authority to act on behalf of the governing body? Х 8ь 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 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 conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization ... X 15b 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? X 16a 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? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 18 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. X Upon request Own website Another's website 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. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MIKE HARDER - 254-867-3940 3801 CAMPUS DRIVE, WACO, 76705

# 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.

X Check this box if neither the organization n	or any related	orga	anıza	ation	COI	mpe	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(de	Position (do not check more than one				one	Reportable	Reportable	Estimated
	hours per	òox	box, unless person is both an officer and a director/trustee)			is bot	th an	compensation	compensation	amount of
	week		T an	lu a u	I	Truus	lee,	from	from related	other
	(describe hours for	director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	5 8	trustee			E E		(W-2/1099-MISC)	(11-21033-111100)	organization
	organizations	arsa arsa	2 2	ŀ	8	Highest compensated employee		(,		and related
	in Schedule	Mdba	Institutional	ķ	Key employee	log Se	喜			organizations
	O)	Indiv	望	E E	ş	雪島	ᅙ			
(1) CURTIS CLEVELAND										
PRESIDENT	0.00	X		X				0.	0.	0.
(2) PETER KULTGEN								_		
PAST PRESIDENT	0.00	X	ļ	X		<u> </u>		0.	0.	0.
(3) VIRGIL MOORE				}						
VICE PRESIDENT	0.00	X		X		_		0.	0.	0.
(4) KEITH HONEY				İ		İ		_		
SECRETARY	0.00	X		X	L	<u> </u>		0.	0.	0.
(5) HAROLD RAFUSE				i						
TREASURER	0.00	X	L_	X	L	<u> </u>		0.	0.	0.
(6) RON CARROLL		i								
DIRECTOR	0.00	X	<u> </u>	<u> </u>				0.	0.	0.
(7) TERRY PREUNINGER										
DIRECTOR	0.00	X	ļ	ļ			_	0.	0.	0.
(8) MANNY VELA										
DIRECTOR	0.00	X	ļ	ļ		<u> </u>		0.	0.	0.
(9) BILL JOHNSON						l		_	_	
DIRECTOR	0.00	X			<u>L</u>	<u> </u>		0.	0.	0.
(10) CHARLIE OLSON						1			_	_
DIRECTOR	0.00	X		<u> </u>	<u>_</u>	ļ	<u> </u>	0.	0.	0.
(11) BRIAN GREEN						1			_	_
DIRECTOR	0.00	X	ļ			<u> </u>	<u> </u>	0.	0.	0.
(12) ROBERT GALVAN										_
DIRECTOR	0.00	X	ļ	<u> </u>		$ldsymbol{f eta}$	ļ	0.	0.	0.
(13) RENE CAPISTRAN		١				1				
DIRECTOR	0.00	X	<u> </u>	ļ		ļ		0.	0.	0.
(14) GREG DODDS										•
DIRECTOR	0.00	X	↓_	ļ		<u> </u>		0.	0.	0.
(15) MIKE HARDER	40.00									_
EXECUTIVE DIRECTOR	40.00	<b> </b>	_	L-	<u> </u>	<u> </u>	_	0.	0.	0.
		<u> </u>	<b> </b>	<u> </u>	<u> </u>	<u> </u>	ļ			·
		-			ļ	-				
	I		1		l	1	ł	j :		

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule	trustee or director (g) (g) (g)	not o	(C) Position check moness person and a direct		e than o	one oth an istee)	( <b>D)</b> Reportable	(E) Reportable compensation from related organizations (W-2/1099-MISC)		com fr org	(F) stimate nount other ipensarom the anizate d relatanizati	of ation ie tion ted
	O)	Individual	Institu	Officer	Key employee	Higher	Former				O. g.		
												<del></del>	
	<u> </u>											<del></del>	
1 b Sub-total						<b>&gt;</b>		0.		0.			0.
c Total from continuation sheets to Part \( \) d Total (add lines 1b and 1c)  2 Total number of individuals (including but		ose	liste	ed al	bove	e) wi	no re	0. 0. ecceived more than \$100	0,000 of reportabl	0. 0. le			0.
compensation from the organization  3 Did the organization list any former officer	r, director, or tri	ustee	e, ke	у еп	nplo	yee	, or	highest compensated e	mployee on			Yes	0 <b>No</b>
<ul> <li>Ine 1a? If "Yes," complete Schedule J for</li> <li>For any individual listed on line 1a, is the sand related organizations greater than \$15</li> </ul>	sum of reportab	le co						·	the organization	•	3		X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," cor	accrue compe	nsati	ion f	rom	any	unr			idual for services		5		X
Complete this table for your five highest c the organization. Report compensation for										pens	ation f	rom	<u></u>
(A) Name and busines	s address	NC	ONE	Ξ				(B) Description of s	services	C	(C compe		ก
		-		··								<del></del>	
				· · -									
Total number of independent contractors     \$100,000 of companyation from the organization.		ot lır	mite	d to	tho	se lis	sted	l above) who received n	nore than		<del></del>	<del></del>	••••
\$100,000 of compensation from the organ	nzation 🚩					<u></u>					Form	990 (	2011)

		III Statement of Reve			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Ēğ	ŧ	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	•	Fundraising events	. 1c		-			
E P	•	d Related organizations	1d					1
S.E	•	e Government grants (contribu	tions) 1e					
i i i	f	f All other contributions, gifts, grai	nts, and					
章		similar amounts not included abo	ove 1f	1563171.				
	٤	Noncash contributions included in line	s 1a-1f \$	568,749.				
2 2		Total. Add lines 1a-1f		<b>•</b>	1563171.			
1				Business Code		·		
8	2 a	·			<del></del>			
<u>≥</u> e	t	o						
S E	C	·						
<u>6</u> <u>3</u>	C	j					<del></del>	
Program Service Revenue	•	•					<del></del>	
٦		All other program service reve	enue	L				
$\rightarrow$	9	Total. Add lines 2a-2f	<del></del>	<b>•</b>				
	3	Investment income (including	ı dıvıdends, ınter	•	55 400			
		other similar amounts)			57,498.			57,498.
	4	Income from investment of ta	x-exempt bond	proceeds -			<u> </u>	<u> </u>
	5	Royalties		<b>•</b>				.,
	_		(i) Real	(II) Personal				
	6 a		334808					
	t	•	313447					
		Rental income or (loss)	21,361.	<del></del>	21 261	21 261		
j		Net rental income or (loss)	6.0	. •	21,361.	21,361.		
Ì	/ a	Gross amount from sales of	(i) Securities 523038	(ii) Other				
		assets other than inventory  Less: cost or other basis	323030.	1				
	L		547519.					
ļ		and sales expenses .  Gain or (loss)	<24481			į		
		Net gain or (loss)	121101	<u> </u>	<24,481.	,		<24,481.
		Gross income from fundraisin	a avente (not		~27/101.			\24,401.
<u>و</u>	0 0	including \$	-					
9Ve		contributions reported on line						
Other Revenue		Part IV, line 18						
훜	ь	Less: direct expenses	. b					
0		: Net income or (loss) from fund	• •					
		Gross income from gaming ac	_					
		Part IV, line 19	а	.	,			
	b	Less: direct expenses	ь					
	c	Net income or (loss) from gan	ning activities	•				
-		Gross sales of inventory, less	_					
		and allowances						
	b	Less: cost of goods sold	. <b>b</b>					
L	c	Net income or (loss) from sale	s of inventory	▶				1
		Miscellaneous Revenu	e	Business Code				
Γ.	11 a							1
	b							
	C	·						
	đ	All other revenue						
- 1	е	Total. Add lines 11a-11d		▶				
1					1617549.	21,361.	0.	33,017.

### 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									
	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	445,268.	445,268.							
2	Grants and other assistance to individuals in			· · · · · · · · · · · · · · · · · · ·						
	the United States. See Part IV, line 22	262,956.	262,956.							
3	Grants and other assistance to governments,			**************************************	<del>                                   </del>					
	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									
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									
8	Pension plan accruals and contributions (include									
	section 401(k) and section 403(b) employer contributions)			İ						
9	Other employee benefits									
10	Payroli taxes									
11	Fees for services (non-employees):									
а	Management									
Ь	Legal									
c	Accounting	9,466.		9,466.						
d	Lobbying									
е	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
9	Other									
12	Advertising and promotion									
13	Office expenses									
14	Information technology									
15	Royalties .									
16	Occupancy									
17	Travel	:								
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates				<del></del>					
22 23	Depreciation, depletion, and amortization Insurance									
23 24	Other expenses. Itemize expenses not covered									
<b>4.</b> -Y	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 O)									
а	FEES & OTHER CHARGES	14,340.		14,340.						
b	PUBLIC RELATIONS	12,183.			12,183.					
c	FOOD PURCHASES	10,427.			10,427.					
d										
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	754,640.	708,224.	23,806.	22,610.					
26	Joint costs. Complete this line only if the organization				<del></del>					
	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 Sneet	(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	1,101,107.	2	1,830,285.
	3	Pledges and grants receivable, net	896,984.	3	122,160.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II	-		
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	1	employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
ets	7	Notes and loans receivable, net	5,177,141.	7	4,644,406.
Assets	8	Inventories for sale or use		8	·- · · · · · · · · · · · · · · · · · ·
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 1,536,844.			
	ь	Less: accumulated depreciation 10b 54,813.	0.	10c	1,482,031.
	11	Investments - publicly traded securities	898,299.	11	1,482,031. 1,403,683.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,073,531.	16	9,482,565.
	17	Accounts payable and accrued expenses	7,532.	17	13,778.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iab		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	5,169,728.	23	5,636,159.
	24	Unsecured notes and loans payable to unrelated third parties .		24	
	25	Other liabilities (including federal income tax, payables to related third			
	}	parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	5,177,260.	26	5,649,937.
		Organizations that follow SFAS 117, check here   X and complete			
es		lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	1,928,880.	27	2,027,802.
ga E	28	Temporarily restricted net assets	258,861.	28	535,639.
뒅	29	Permanently restricted net assets	708,530.	29	1,269,187.
Ē		Organizations that do not follow SFAS 117, check here   and			
6		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	2,896,271.	33	3,832,628.
	34	Total liabilities and net assets/fund balances	8,073,531.	34	9,482,565.

	990 (2011) TSTC FOUNDATION	75-28	392470	Pa	ge <b>12</b>			
Pa	t 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	1,61	7,5	49.			
2	Total expenses (must equal Part IX, column (A), line 25)							
3	Revenue less expenses. Subtract line 2 from line 1	3	862	$2, \bar{9}$	09.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,89	5,2	71.			
5	Other changes in net assets or fund balances (explain in Schedule O)	5	7:	3,4	48.			
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	3,832	2,6	28.			
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII							
		_		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.	-					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х			
ь	Were the organization's financial statements audited by an independent accountant?		2b	X				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit.						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	i	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	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							
	separate basis, consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Audit						
	Act and OMB Circular A-133?	•	3a		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь					

Form **990** (2011)

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

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

**Employer identification number** TSTC FOUNDATION 75-2892470 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, X An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a \_\_\_\_ Type I c Type III - Functionally integrated **b** Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (III) Type of (iv) is the organization (v) Did you notify the (vi) Is the (i) Name of supported (II) EIN (vii) Amount of organization añizátion in col. in col. (i) listed in your organization in col organization (I) organized in the U.S.? support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Nο Yes No Yes

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

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 TSTC FOUNDATION 75-2892470 Page 2 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.) Section A. Public Support Calendar 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 353,670. 266,642. 187,853. include any "unusual grants.") 653,430. 2,337,995 3,799,590. 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 653,430. 353,670. 266,642. 187,853. 4 Total. Add lines 1 through 3 2,337,995 3,799,590. 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 3,799,590, Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008(c) 2009 (d) 2010 (e) 2011 (f) Total 353,670. 266,642 7 Amounts from line 4 187,853 653,430 2,337,995 3,799,590. Gross income from interest, dividends, payments received on

):	ss receipts from related activities,	etc. (see instructi	ons)			12	
	al support. Add lines 7 through 10						5,111,433
36	ets (Explain in Part IV.)		<u> </u>				
c	oss from the sale of capital						
1	er income. Do not include gain						
si	iness is regularly carned on						
r	vities, whether or not the						
t	Income from unrelated business					-	
	Income from similar sources	235,918.	225,582.	206,474.	251,563.	392,306.	1,311,843
از	unities loans, rents, royalties						

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)
organization, check this box and stop here
Section C. Computation of Public Support Percentage

<u> </u>	otion 5: Computation of Fubile Support Fercentage		
14	Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	74.34 %
15	Public support percentage from 2010 Schedule A, Part II, line 14	15	9
16a	a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or i	more, check	this box and
	stop here. The organization qualifies as a publicly supported organization		►X

stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

### 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.)

Sec	ction A. Public Support	ion, pioces com					
	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</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						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b				<u> </u>		
	Public support (Subtract line 7c from line 6)		<u> 1</u>	<u> </u>	l		
	ction B. Total Support		<del>,</del>			1	
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ŀ	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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.)						
	Total support (Add lines 9, 10c, 11, and 12)		<u> </u>	<u> </u>	<u> </u>		<u> </u>
14	First five years. If the Form 990 is for	the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
_	check this box and stop here	- Command Da		<del>:</del>	· ·	· .	
	ction C. Computation of Publi			naturan (6)		145	0/
_	Public support percentage for 2011 (li			column (1)) .		15	%
16	Public support percentage from 2010 ction D. Computation of Inves			<del> </del>	<del></del>	110 1	70
						17	%
17				10, COIGITHT (I))		18	
18	investment income percentage from a 33 1/3% support tests - 2011. If the			on line 14, and line	e 15 is more than		
18	more than 33 1/3%, check this box ar						
ı	5 33 1/3% support tests - 2010. If the	organization did i	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	nis box and see ir	structions	<u> </u>

### **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

TSTC FOUNDATION

Employer identification number 75-2892470

Par	Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	Impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	<u> </u>	storically important land area
	Protection of natural habitat	Preservation of a cel	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n 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
C	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	tt holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		. L Yes L No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
rw.	conservation easements.		
Pa	↑間 Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	· ·		• 5
2	If the organization received or held works of art, historical tre		ial gain, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:	<b>.</b>
a	Revenues included in Form 990, Part VIII, line 1		. • \$
þ	Assets included in Form 990, Part X		. • \$

Sche	dule D (Form 990) 2011 TSTC FO	UNDATION					7	5-28	92470	Page 2
Pai	Till Organizations Maintaining C	ollections of A	rt, His	torical Tr	reasures, c	or Other	Similar	Asse	ts (contin	ued)
3	Using the organization's acquisition, accession	on, and other record	ds, chec	k any of the	following tha	t are a sig	nificant us	e of its	collection	items
	(check all that apply)									
а	Public exhibition	C	<b>.</b>	Loan or exc	change progra	ams				
b	Scholarly research	•	, 🗀	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	in how t	hey further t	the organization	on's exem	pt purpos	e ın Par	t XIV.	
5	During the year, did the organization solicit or	r receive donations	of art, h	istorical trea	asures, or othe	er sımılar a	ssets			
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's c	ollection?				Yes	☐ No
Par	Escrow and Custodial Arrangereported an amount on Form 990, Par		ete if the	e organızatio	on answered '	'Yes" to F	orm 990, I	art IV,	line 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not in	cluded			
	on Form 990, Part X?				_			. $\square$	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	21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete if	the organization ar	nswered	"Yes" to Fo	orm 990, Part	IV, line 10	•			
		(a) Current year	(b) F	Prior year	(c) Two year	s back (c	1) Three yea	ırs back	(e) Four y	ears back
1a	Beginning of year balance				L					
ь	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									***************************************
е	Other expenditures for facilities	-								
	and programs				1					
f	Administrative expenses				-					
9	End of year balance									***************************************
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1	g, column (a	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%.								
3a	Are there endowment funds not in the posses	ssion of the organiz	ation th	at are held a	and administe	red for the	organizat	iion		
	by:								Y	es 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	on Sche	dule R?					3ь	
4	Describe in Part XIV the intended uses of the	organization's ende	owment	funds.						
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	0, Part X	(, line 10.						<del>_</del> _
	Description of property	(a) Cost or obasis (investr		1	t or other (other)		umulated eclation		(d) Book	value
1a	Land		•	9	7,093.				97	,093.
	Buildings			1,43	39,751.		54,81	3.	1,384	
	Leasehold improvements									<del></del>
	Equipment	-						$\neg$		
	Other									
Total	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, colui	mn (B), line 1	10(c).)			<b></b>	1,482	,031.

Schedule D (Form 990) 2011

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)
FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the orga
EIN 48 (ASC 740) nization's financial statements that reports the organization's financial statements that reports the organization's financial statements. Schedule D (Form 990) 2011

22

(8) (9) (10)

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service SCHEDULE 1 (Form 990)

OMB No 1545-0047	2011	Open to Public
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Inspection

**ջ** Employer identification number 75-2892470 X Yes 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 General Information on Grants and Assistance TSTC FOUNDATION criteria used to award the grants or assistance? Name of the organization Parti

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for mont	oring the use of grant	funds in the United	d States.			
Part # Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	e United States. C	omplete if the orga	anization answered ")	'es* to Form 990, Part	V, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Check this	box if no one recipien	nt received more th	an \$5,000. Part II	can be duplicated if	additional space is need	♠ Pep
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS STATE TECHNICAL COLLEGE							
3801 CAMPUS DRIVE WACO, TX 76705	74-1646989		15,294.	427,925,FMV	PMV	EQUIPMENT FOR	TO TRAIN AND EDUCATE STUDENTS
<ul> <li>Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li> <li>Enter total number of other organizations listed in the line 1 table</li> </ul>	and government org s listed in the line 1	ganizations listed in the	e line 1 table				

Schedule I (Form 990) (2011)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

75-2892470

Schedule I (Form 990) (2011) TSTC FOUNDATION

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

Part III can be duplicated if additional space is needed.

(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
			1		
STUDENT SCHOLARSHIPS AND AWARDS	428	262,956.		4/2	N/A
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	ine 2, and any other	additional information.	
THE TSTC FOUNDATION HONORS DONORS WISHES		FOR THE TYP	TYPE OF STUDENTS	NTS IN	
CONSIDERING THE AVAILIBILITY AND A	AWARDING (	OF SCHOLARSHIPS.	SHIPS. MOST	Т	
SCHOLARSHIPS ARE BASED ON NEED AND	AND/OR MERIT		AND THE RECIPIENTS	ARE	
SELECTED BY A TSTC COMPONENT. THE	THE TSTC FOUR	NDATION PU	FOUNDATION PURCHASES AND DONATES	D DONATES	
EQUIPMENT TO THE TEXAS STATE TECHNICAL	i i	COLLEGE WHEN	INFORMED B	BY WRITTEN	
REQUEST BY THE COLLEGE'S BOARD OF	DIRECTORS,	AS TO	WHAT EQUIPMENT	ENT IS	
NECESSARY FOR THE TRAINING AND EDUCATION	JCATION OF	F STUDENTS.	CASH	ASSISTANCE	
WAS MADE TO TEXAS STATE TECHNICAL COLLEGE TO	COLLEGE		STAFF AND FACULTY AND	AND TO	
PROVIDE FOR CONTINUING EDUCATION AND TRAINING TO	AND TRAIN	ING TO STAFF	FF AND FACULTY	ULTY.	
132102 01-27-12		25			Schedule I (Form 990) (2011)

Schedule I	(Form 9	90) 2011		TST	C FOU	JNDA'	rion					75-	<u>-2892470</u>	Page 2
Schedule I Part IV	Sup	plement	al Inf	format	ion									
L	<u>-</u>			-		•								
STAFF	AND	FACUI	LTY	ARE	CHOSE	EN FO	OR AS	SISTA	NCE ANI	RECO	GNITION	1 BY	TEXAS	
STATE	TECI	HNICA	L CC	OLLEG	E ANI	ON C	r THE	TSTC	FOUND	ATION.				
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### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

**Noncash Contributions** 

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

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

TSTC FOUNDATION

**Employer identification number** 

75-2892470 Part I Types of Property (b) (d) Number of Noncash contribution Check If Method of determining contributions or amounts reported on applicable noncash contribution amounts Form 990, Part VIII, line 1g tems\_contributed Art · Works of art 1 2 Art · Historical treasures 3 Art · Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities · Publicly traded 10 Securities · Closely held stock 11 Securities · Partnership, LLC, or trust interests 12 Securities · Miscellaneous 13 Qualified conservation contribution · Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 Real estate · Commercial 16 568,749. BOOK VALUE OF DORMS X 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other 26 Other 27 Other 28 Other -Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for 30a X the entire holding period? b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a contributions? .. . b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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Schedule M (Form 990) (2011)

describe in Part II.

### 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

Name of the organization **Employer identification number** TSTC FOUNDATION 75-2892470 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: NEW AND ONGOING PROJECTS AND ACTIVITIES IN THE AREAS OF RESEARCH, EDUCATION AND COMMUNITY SERVICE. FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S EXECUTIVE DIRECTOR REVIEWS THE FORM 990 BEFORE SIGNATURE. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REMINDS BOARD MEMBERS OF THE CONFLICT OF INTEREST POLICY AND HAS THEM REVIEW IT, AND ACKNOWLEDGE THAT REVIEW, ON AN ANNUAL BASIS. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST BY CONTACTING: MIKE HARDER, 3801 CAMPUS DRIVE, WACO, TEXAS 76705 (254)-867-3940 FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: NET UNREALIZED GAINS ON INVESTMENTS: 73,448.

Department of the Treasury internal Revenue Service SCHEDULE R (Form 990)

Part

# Related Organizations and Unrelated Partnerships

2011. Open to Public Inspection OMB No 1545-0047

Employer identification number 75–2892470

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) TSTC FOUNDATION Name of the organization

	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(1) Direct controlling entity
E med	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	ions (Complete if the organization and	swered "Yes" to Form 990, Par	t IV, line 34 because	It had one or more re	elated tax-exempt

organizations during the tax year.) Part

(a)	(p)	(၁)	<b>(</b> 5)	(e)	9	6)	(6)
Name, address, and EIN	Primary activity	Legal domicile (state or	_	Public charity	Direct controlling	Section 51	2(b)(13)
of related organization		foreign country)	section	status (if section	entity	entit	6
				501(c)(3))		Yes	Ŷ
TEXAS STATE TECHNICAL COLLEGE - 74-1646989							
3801 CAMPUS DRIVE	PUBLIC HIGHER EDUCATION			_			
WACO, TX 76705	INSTITUTION	TEXAS		2	N/A		×

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132161 01-23-12 LHA

Schedule R (Form 990) 2011

75-2892470

Page 2

Schedule R (Form 990) 2011 TSTC FOUNDATION

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) ne Share of total 1, ncome nder	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner/ by Yes No	(i) (k) General or Percentage managing ownership Pess No
				,						
Part ty Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable as rporation or trust during	s a Corpo	oration or Trust (Coryear.)	mplete if the orga	ization answered "	'es" to Form 990,	art IV, line 34	t because it had	one or mo	re related
(a) Name, address, and EIN of related organization	Z c		(b) Primary activity	(C) Ity Legal domcile (state or foreign country)	(d)  (incline Direct controlling entity  (incline on the controlling of the control in cont	(C corp. S corp.		ta a	(g) Share of end-of-year assets	(h) Percentage ownership
					:					
132162 01-23-12	:			30	-			Schedu	le R (For	Schedule R (Form 990) 2011

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				•	Yes	٠ <u>٥</u>
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	in Parts II-IV?		-	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	•			1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	×	
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan quarantees to or for related organization(s)				P	×	
e Loans or loan guarantees by related organization(s)				16		×
					-	
f Sale of assets to related organization(s)				=		×
g Purchase of assets from related organization(s)				19		×
h Exchange of assets with related organization(s)				두		×
i Lease of facilities, equipment, or other assets to related organization(s)				ï	×	
i lease of facilities equipment or other assets from related organization(s)				·····	-	×
k Performance of services or membership or fundraising solicitations for related organic	related organization(s)			¥		×
Performance of services or membership or fundraising solicitations by	related organization(s)			=		×
	ntion(s)			£		×
n Sharing of paid employees with related organization(s)				11		×
				****	· <del>  / · · · ·</del>	;
<ul> <li>Reimbursement paid to related organization(s) for expenses</li> </ul>		•		2	T	ج :
p Reimbursement paid by related organization(s) for expenses				10	1	×
<ul> <li>Qther transfer of cash or property to related organization(s)</li> </ul>				5		×
			: .	1		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	ils line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1) TEXAS STATE TECHNICAL COLLEGE	В	445,268.	.DISCRETIONARY			
(2) TEXAS STATE TECHNICAL COLLEGE	Q	5,636,159.DEBT	DEBT DUE THIRD PARTY			
(3) TEXAS STATE TECHNICAL COLLEGE	Ι	334,808.DEBT	DEBT SERVICE REQUIREMENT	_		
(4)						
(5)					Ì	
(9)						
132163 01-23-12	31		Schedule R (Form 990) 2011	(Form	(066	2011

.Page 4

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

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

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	structions regarding exciu	sion for certain inve	estment partnersnips.							
(a)	<b>a</b>	© -	<b>©</b>	} } }		(6) (6)	E	(C)	9	€
Name, address, and EIN of entity	Primary activity	<u> </u>	(related, unrelated, 501(c)(3) excluded from tax	partners sec 501(c)(3) orgs?		- je	Urspropor- tonate allocations?	amount in box 20 managing ownership of Schadula K-1 partner?	General or managing partner?	Percentage ownership
		country)	under section 512-514) y	es No	Іпсоте	assets	Yes No	(Form 1065)	Yes No	
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Schedule R (Form 990) 2011

Schedule R	(Form 990) 2011	TSTC	FOUNDATION			<u>75–</u> 2892470	Page 5
Part VII	(Form 990) 2011 Supplemental Infor	mation	· · · · · · · · · · · · · · · · · · ·				
	Complete this part to pro	vide additi	onal information for respon	nses to questions on Sc	hedule R (see instructi	ons).	
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