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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)

OMB No 1545-0047

Inspection

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

Open to Public

A F	or the	2012 calendar year, or tax year beginning SEP 1, 2012 and ending	AUG 3	1, 2013			
B c	heck if	C Name of organization	D Em	ployer identific	ation number		
ap	oplicable						
	Addres: change	TSTC FOUNDATION					
	Name change			75-28	392470		
	Initial	Number and street (or P.O box if mail is not delivered to street address) Room/	suite E Tele				
	Termin-	· 1		254-8	367-3940		
	Amend		G Gros	ss receipts \$	1,365,835.		
	Applica		H(a) Is	this a group re	turn		
	pending	F Name and address of principal officer VIRGIL MOORE	-	for affiliates? Yes X No			
		3801 CAMPUS DRIVE, WACO, TX 76705	H(b) A	re all affiliates incl	uded? Yes No		
ΙT	ax exe	mpt status X 501(c)(3)	527 If	"No," attach a l	ist (see instructions)		
		e: ► WWW.TSTC.EDU/DONORS/FOUNDATION	H(c) G	iroup exemption	number 🕨		
			Year of format	tion 2000 M	State of legal domicile: TX		
		Summary		·	_		
-	1 8	Briefly describe the organization's mission or most significant activities TO COMPI	LEMENT	THE STAT	re of		
Governance		TEXAS' SUPPORT OF THE COLLEGES BY PROVIDING					
rna	_	Check this box If the organization discontinued its operations or disposed of			·		
ove		Number of voting members of the governing body (Part VI, line 1a)		3	9		
		Number of independent voting members of the governing body (Part VI, line 1b)		4	8		
S &		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0		
Activities		Total number of volunteers (estimate if necessary)		6	20		
cţ		Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
⋖		Net unrelated business taxable income from Form 990-T, line 34		7b	0.		
			Pric	or Year	Current Year		
a,	8 (Contributions and grants (Part VIII, line 1h)		63,171.	595,263.		
Revenue	l .	Program service revenue (Part VIII, line 2g)		0.	0.		
	l	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		33,017.	105,246.		
•	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,361.	66,167.		
	l	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,6	17,549.	766,676.		
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7	08,224.	835,108.		
4	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
_	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.		
L Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
رق ا	ь	Total fundraising expenses (Part IX, column (D), line 25) > 28,261.					
⊢ û	17 (Other expenses (Part IX, column (A), lines 11a-11d-11f-24e)		46,416.	74,068.		
တ	ľ	Total expenses Add lines 13.17 (must equal Part IX [column (A) \lines 25)	7	754,640.	909,176.		
20,		Revenue less expenses Subtract line 18 from line 12		362,909.	<142,500.>		
SS		1 1 1 1 1 1 1 1 1 1 1 1	1	of Current Year	End of Year		
sets	20	Fotal assets (Part X, line 16)	9,4	82,565.	8,674,409.		
A B		Total liabilities (Part X, line 26)		49,937.	4,975,386.		
Net Assets of Fund Balances	I	Net assets or fund balances Subtract line 21 from line 20 7 = N 1 1		32,628.	3,699,023.		
_	rt II	Signature Block					
Und	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and	to the best of my	knowledge and belief, it is		
		t, and complete. Declaration of preparer (other than officer) is based on all information of which pre			•		
Sig	n	Signature of officer		Date			
Her	1	▲ JEFF KILGORE, CHIEF EXECUTIVE DIRECTOR					
-		Type or print name and title		700			
		Print/Type preparer's name Preparer's sygnature	Date	Check	PTIN		
Paid	, ,	CODY W. SULAK, CPA	6/14/	//4 If self-employe	P01252298		
	arer	Firm's name COKER, WOMMACK & COMPANY, P.C.		Firm's EIN	74-2323205		
-	1	Firm's address P.O. BOX 8256					
		WACO, TX 76714-8256		Phone no 2!	54-776-3871		
Mav	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		
-	01 12-10				Form 990 (2012)		

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

orm	990 (2012) TSTC FOUNDAT	ON	75-2892470 Page 2
Par	t III Statement of Program Service Acc	complishments	
	Check if Schedule O contains a response to a	any question in this Part III	
1	Briefly describe the organization's mission		
	TO COMPLEMENT THE STATE OF	TEXAS' SUPPORT OF THE COLLEG	ES BY PROVIDING
		AND ONGOING PROJECTS AND ACTI	
	AREAS OF RESEARCH, EDUCAT		
2	Did the organization undertake any significant prog	ram services during the year which were not listed on	
_	the prior Form 990 or 990 EZ?	• •	Yes X No
	If "Yes," describe these new services on Schedule	0	
3	•	onificant changes in how it conducts, any program services?	Yes X No
•	If "Yes," describe these changes on Schedule O	initially program of the contract of any program contract.	
4		plishments for each of its three largest program services, as	s measured by expenses
4		quired to report the amount of grants and allocations to oth	
		quired to report the amount of grants and allocations to our	iera, trie total expenses, and
4-	revenue, if any, for each program service reported	L7. including grants of \$ 835, 108.) (Rever	
4a		RAISING THROUGH DIRECT MAIL,	
		CS. MADE AWARDS TO DESERVING S	
		ENT RECRUITMENT AND TEXTBOOK P	URCHASES FOR
	REMEDIAL CLASSES.		
4b	(Code) (Expenses \$	including grants of \$) (Rever	nue \$)
		The second secon	
) (0	
4c	(Code) (Expenses \$	including grants of \$) (Rever	nue \$
			<u> </u>
4d	Other program services (Describe in Schedule O)		
-	(Expenses \$ including gra	ints of \$) (Revenue \$)
4e	Total program service expenses	846,717.	
			Form 990 (2012)

Form 990 (2012) TSTC FOUNDATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	<u> </u>
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			ļ
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			١,,
	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 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		1	
а	Part VI	11a	x	[
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	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	40-	v	
L	Schedule D, Parts XI and XII Was the assessment problement and appendent audited financial statements for the tay year?	12a	X	
D	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 and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	l	}	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			١,,
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross uncome from gaming activities on Part VIII, line 9a? If "Yes."	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19]	Х
20a	and the second s	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	T	<u> </u>
_	The state of the s	<u></u>	000	(0010

Form 990 (2012) TSTC FOUNDATION

Part IV Checklist of Required Schedules (continued)

	The officer of field and confederate			
			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 19 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		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		
	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 with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	-	<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			,,
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		[
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	ŀ		
	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
С	·			,,
	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	<u> </u>	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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	Ì		7.7
	If "Yes," complete Schedule N, Part I	31	 	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		₹.	
	Part V, line 1	34	X	v
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36		 X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		x	
	Note. All Form 990 filers are required to complete Schedule O	38		(2012)
		rorn	1330	(2012)

	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	1a 9			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b (-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming	1		
_	(gambling) winnings to prize winners?		1c	X	ĺ
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 (
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	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?		За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial		4a		X
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			
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 transa	action?	5b		X
С	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	ne organization solicit			ļ
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions or gifts			
	were not tax deductible?		6b	<u> </u>	
7	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 and se	rvices provided to the payor?		ļ	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 w	as required			3,5
	to file Form 8282?	1 1	7c	-	X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	┨	1	v
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e	 	X
f			7f	 	_^
g	If the organization received a contribution of qualified intellectual property, did the organization file Files		7g 7h	-	
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations D		· · · · ·		
8	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8		İ
9	Sponsoring organizations maintaining donor advised funds.	any anno during the your.			
a	D. 141		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter			1	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter			1	
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b	4		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a	ļ	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ	
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	.a.			
	organization is licensed to issue qualified health plans	13b	-		
	Enter the amount of reserves on hand	13c	44=	+	X
	Did the organization receive any payments for indoor tanning services during the tax year? If "Ves " has it filed a Form 720 to report these payments? If "No " growde an explanation in Schedu	/a O	14a	+	^
n	- u- vae- nae ii illen a enim i zii in tenno inese naviments (u- vin - brovine an explanation in Scheou	e= 1.4	140		

Form 990 (2012)

Par	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C			"No" r	espon	se	
	Check if Schedule O contains a response to any question in this Part VI					\mathbf{x}	
Sec	tion A. Governing Body and Management						
			1		Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9				
	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	8				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other				
	officer, director, trustee, or key employee?			2		_X_	
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	ct 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 wa	as filed?	4		<u>X</u>	
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		<u>X</u>	
6	Did the organization have members or stockholders?			6		<u>X</u>	
7a	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?			7a		X	
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, 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	ear by th	ie following [.]				
а	The governing body?			8a	X		
b	Each committee with authority to act on behalf of the governing body?			8b	Х		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code)				
					Yes	No	
	Did the organization have local chapters, branches, or affiliates?			10a		X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapter	s, 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 boo	dy befo	ore filing the form?	11a		X	
b							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	<u> </u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	X		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe	1	٠,,		
	ın Schedule O how this was done			12c	X	177	
13	Did the organization have a written whistleblower policy?			13	-	X	
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 approve		ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	7				.,	
а				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 arrange	ement v	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 evalu						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization.	anızatıc	on's	1			
_	exempt status with respect to such arrangements?			16b	<u> </u>		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed NONE	T (0					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	·ı (Sec	tion 501(c)(3)s only)	availat	ле		
	for public inspection. Indicate how you made these available. Check all that apply	^	hadula Ol				
	Own website Another's website X Upon request Other (explain						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	or interest policy, ar	io fina	ncial		
	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	ano rec	cords or the organiza	ation			
	THE ORGANIZATION - 254-867-3940						
23200				Earr	, <u>aan</u>	(2012)	
12-10	-12			4011	11 330	(2012)	

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 organiz (A)	(B)	[C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos	ition	than	one	Reportable	Reportable compensation	Estimated
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation		amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W 2/1099-MISC)	other compensation from the organization and related organizations
(1) VIRGIL MOORE	0.00	=	=	-	<u>×</u>	T 65	-			
PRESIDENT	0.00	\mathbf{x}	ŀ	Х				0.	0.	0
(2) CURTIS CLEVELAND	0.00	127		-22						<u>_</u>
PAST PRESIDENT	0.00	x		X				0.	o.	0
(3) KEITH HONEY	0.00				\vdash	\vdash				<u>_</u>
VICE PRESIDENT	0.00	x		X				0.	0.	0
(4) RENE CAPISTRAN	0.00					<u> </u>				-
SECRETARY	0,00	x		X			ļ	0.	0.	0
(5) HAROLD RAFUSE	0.00				\vdash					
TREASURER		X		x				0.	0.	0
(6) FRANK ESPINOZA	0.00									
DIRECTOR		X						0.	0.	0
(7) GREG DODDS	0.00					l				
DIRECTOR		X						0.	0.	0
(8) BRIAN GREEN	0.00									
DIRECTOR		X	<u>. </u>	<u> </u>				0.	0.	0
(9) JEFF KILGORE	40.00									
CHIEF EXECUTIVE DIRECTOR			<u> </u>		<u> </u>			0.	0.	0
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Section A. Officers, Directors, True	stees, Key Em	ploy	ees,	, and	d Hı	ghe	st C	ompensated Employe	es (continued)				
(A)	(B)		_ (C					(D)	(E)			(F)	
Name and title	Average	lde.	Position (do not check more than one				ODE	Reportable	Reportable	ole Estimated			d
	hours per	Ьox	, unle	ss pe	rson	ıs bot	h an	compensation	compensatio	n	am	ount c	of
	week	<u> </u>	cer an	id a d	recto	r/trus	tee)	from	from related		C	ther	
	(list any	ector						the	organizations		comp	ensat	ion
	hours for	i p				Ē		organization	(W-2/1099-MIS	SC)	fro	m the	1
	related	Individual trustee or director	Institutional trustee		١.,	Highest compensated employee		(W-2/1099-MISC)			_	nızatı	
	organizations below	al tru	alt		Key employee	E 9						relate	
	line)	M de	it ta	Officer	l em	ag g	Former				orga	nızatıc	ns
	in ie)	Ĕ	Ĕ	8	, Š	포트	æ						
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						<u> </u>							
1b Sub-total								0.		0.			0.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)						>		0.		0.			0.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) wh	no re	eceived more than \$100	0.000 of reportable	e	_		
compensation from the organization						•			•				0
												Yes	No
3 Did the organization list any former officer	director or tr	iste	e ke	V er	mole	wee	٥r	highest compensated e	molovee on				
line 1a? If "Yes," complete Schedule J for			0, 110	,, .,		,,		, ingricor compensation o			3		X
			omn	one.	ation	. anı	ط ما	her compensation from	the organization				
									tile organization		4		Х
and related organizations greater than \$15											4		
5 Did any person listed on line 1a receive or	· · · · · · · · · · · · · · · · · · ·				-		relat	ed organization or indiv	idual for services		_		v
rendered to the organization? If "Yes," cor	nplete Schedu	le J	for s	uch	per	son		···-	 		5		X
Section B. Independent Contractors								·					
1 Complete this table for your five highest c										pens	ation fr	om	
the organization Report compensation fo	the calendary	/ear	end	ing v	vith	or w	<u>ıthır</u>	n the organization's tax	year				
(A)							ļ	(B)		_	(C		
Name and busines	s address	N	ON	<u> </u>				Description of s	services	C	omper	sation	1
								-					
							ļ						
							İ						
							\dashv						
									ļ				
 													
2 Total number of independent contractors		not l	ımıte	d to		_	stec	d above) who received r	nore than				
\$100,000 of compensation from the organ	nization >					0							
											Form 9	19D /2	20121

Form 990 (2012) Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under sections 512, 513, or 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 595,263. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 595,263. h Total. Add lines 1a-1f **Business Code** Program Service Revenue evenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 72,367. 72,367. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (ı) Real (II) Personal 379,816. 6 a Gross rents 313,649 **b** Less rental expenses 66,167. c Rental income or (loss) <u>66,1</u>67. 66,167. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 318,389. assets other than inventory b Less cost or other basis 285,510. and sales expenses 32,879. c Gain or (loss) 32,879. 32,879. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b d All other revenue e Total. Add lines 11a-11d

105,246.

Form 990 (2012)

66,167.

12

232009

Total revenue See instructions

766,676.

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) Check if Schedule O contains a response to any question in this Part IX (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Program service Management and general expenses 7b, 8b, 9b, and 10b of Part VIII expenses expenses Grants and other assistance to governments and 489,099 489,099. organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in 346,009 346,009 the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees) Management Legal b 10,213. 10,213 Accounting С Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 13 Office expenses Information technology 14 Royalties 15 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 23 Insurance Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 30,324. 11,609. 3,589. 15,126. FOOD PURCHASES 20,396 20,396. FEES & OTHER CHARGES PUBLIC RELATIONS 13,135. 13,135. С e All other expenses 846,717. 34,198 28,261. 909,176. Total functional expenses Add lines 1 through 24e 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)

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
	,		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	1,830,285.	2	1,594,836. 81,682.
	3	Pledges and grants receivable, net	122,160.	_3	81,682.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
	ĺ	Part II of Schedule L		_5	
	6	Loans and other 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			
w	j	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	4,644,406.	7	4,077,185.
As	8	Inventories for sale or use		_8	
	9	Prepaid expenses and deferred charges		9	<u> </u>
	10 a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 1,536,844.			
	b	Less accumulated depreciation 10b 137,032.	1,482,031.	10c	1,399,812. 1,520,894.
	11	Investments - publicly traded securities	1,403,683.	11	1,520,894.
	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)	9,482,565.	16	8,674,409.
	17	Accounts payable and accrued expenses	13,778.	17	11,563.
	18	Grants payable		18	
	19	Deferred revenue		_19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ě	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons			
	1	Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	5,636,159.	_23	4,963,823.
	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			
	1	Schedule D		_25	
	26	Total liabilities. Add lines 17 through 25	<u>5,649,937.</u>	26	4,975,386.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	2,027,802.	_27	1,667,206.
3al	28	Temporarily restricted net assets	<u>535,639.</u>	28	680,228.
ğ	29	Permanently restricted net assets	1,269,187.	_29	1,351,589.
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
ŏ		and 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	<u>3,832,628.</u>		3,699,023.
	34	Total liabilities and net assets/fund balances	9,482,565.	34	8,674,409.

Form **990** (2012)

o <u>rm</u>	990 (201.2) TSTC FOUNDATION	75-28	92470	Pag	_{re} 12
Pa	rt XI Reconciliation of Net Assets	<u> </u>			
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	766	5,6	76.
2	Total expenses (must equal Part IX, column (A), line 25)	2			76.
3	Revenue less expenses Subtract line 2 from line 1	3		<142,50	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,832	3,832,62	
5	Net unrealized gains (losses) on investments	5		3,8	95.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10	3,699	0,0	<u>23.</u>
Ра	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
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 Scheduling			Yes	No
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	, 0	2a		Х
Lu	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both	a on a			
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	
b	Were the organization's financial statements audited by an independent accountant?		2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sci	nedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audit			
	Act and OMB Circular A 133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	ured audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form !	990 ((2012)

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization TSTC FOUNDATION 75-2892470 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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 _ Type II c Type III - Functionally integrated d Type III - Non-functionally integrated 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 No 11g(i) the governing body of the supported organization? 11g(iı) (ii) A family member of a person described in (i) above? (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) (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of monetary (III) Type of organization (i) Name of supported (ii) EIN organization in col. in col. (i) listed in your organization in col (described on lines 1-9 support organization (i) organized in the governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Yes No No

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

Schedule A (Form 990 or 990-EZ) 2012

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 Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the box on line 5.7 or 8 of Part Lor if the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the presentation (Complete only if you checked the young the young the young the young the young the young the young the young the young the young the young the young the young the young the young the young the young the youn (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						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants")	266,642.	187,853.	653,430.	2,337,995,	635,741.	4.081.661.
2	Tax revenues levied for the organ-	200/0120		0.0.0,			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
_	ization's benefit and either paid to						
	or expended on its behalf						
•	The value of services or facilities						
3							
	furnished by a governmental unit to						
	the organization without charge	266 642	107 053	653,430.	2 222 225	635,741.	4 222 664
	Total Add lines 1 through 3	266,642.	187,853.	053,430.	2,337,995,	033,741.	4,081,661,
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)						
	Public support. Subtract line 5 from line 4						4.081.661.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	266,642.	187,853.	653,430.	2,337,995,	635,741.	4,081,661.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	225,582.	206,474.	251,563.	392,306.	452,183.	1,528,108.
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						5,609,769,
12	Gross receipts from related activities,	, etc (see instruction	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	p here					<u> </u>
Se	ction C. Computation of Publ	lic Support Pe	rcentage				
14	Public support percentage for 2012 (line 6, column (f) d	ivided by line 11, o	column (f))		14	72.76 %
15	Public support percentage from 2011	1 Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2012. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			$\triangleright X$
k	33 1/3% support test - 2011. If the	organization did no	ot check a box on l	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	s box
	and stop here. The organization qua	lifies as a publicly :	supported organiz	ation			▶□
178	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	e 13, 16a, or 16b,	and line 14 is 10% i	or more,
	and if the organization meets the "fac	cts and-circumstan	ces" test, check ti	his box and stop h	iere. Explain in Pa	rt IV how the organ	zation
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	d organization		
Ł	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is 1	0% or
	more, and if the organization meets t						
	organization meets the "facts-and-cir						▶□
18	Private foundation. If the organization						

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support		, , , , , , , , , , , , , , , , , , ,			·	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
ınclude any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support		*	<u> </u>			
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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			,			
c Add lines 10a and 10b						
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)						
14 First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) organia	zation,
check this box and stop here	J	,	, .	•		
Section C. Computation of Publi	c Support Pe	ercentage				
15 Public support percentage for 2012 (I			column (f))		15	%
16 Public support percentage from 2011	Schedule A, Parl	t III, line 15			16	%
Section D. Computation of Inves	tment Incom	e Percentage	l			
17 Investment income percentage for 20	12 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from 2	2011 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2012. If the	organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box a						▶□
b 33 1/3% support tests - 2011. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is r	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	anızatıon qualıfıes	as a publicly sup	ported organization	▶ □
20 Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see i	nstructions	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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.

2012
Open to Public Inspection

Name of the organization

TSTC FOUNDATION

Employer identification number

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r 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 advised	funds
•	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	delici advisor, or for any other purpose con	Yes No
Par		nanization answered "Yes" to Form 990. Part	
1	Purpose(s) of conservation easements held by the organizati		
•	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certifie	·
	Preservation of open space	Treservation of a contine	d materie stracture
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of	a conservation easement on the last
_	day of the tax year	ned conservation contribution in the form of	a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ricture included in (a)	2c
d	Number of conservation easements included in (c) acquired	` '	
ŭ	listed in the National Register	artor of 17700, and not on a motorio ciractare	2d
3	Number of conservation easements modified, transferred, re	leased extinguished or terminated by the or	
•	year >		gamanen aannig trie taar
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements i		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		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense st	atement, and balance sheet, and
_	include, if applicable, the text of the footnote to the organiza		
	conservation easements		3
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items	,	.,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial of	
_	the following amounts required to be reported under SFAS 1	•	••
а	Revenues included in Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	> \$
b	Assets included in Form 990, Part X		s
	•		

	dule D (Form 990) 2012 TSTC FOU								<u>92470</u>	
Par	t III Organizations Maintaining Co	ollections of A	rt, Hist	orical Tr	easures, o	r Other	Simil	ar Asse	ts (continu	ed)
3	Using the organization's acquisition, accessio	n, and other record	ds, check	any of the	following that	are a sign	uficant	use of its	collection	tems
	(check all that apply)									
а	Public exhibition	c	ı 🔲 ı	oan or exc	hange progra	ms				
b	Scholarly research	•	, 🖂	Other						
С	Preservation for future generations									
4	Provide a description of the organization's col	llections and explai	in how th	ey further tl	he organizatio	n's exemp	t purpo	ose in Parl	t XIII	
5	During the year, did the organization solicit or	receive donations	of art, his	storical trea	sures, or othe	er sımılar a	ssets			
	to be sold to raise funds rather than to be ma	intained as part of	the orgar	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arrang	jements. Compl	ete if the	organizatio	n answered "	Yes" to Fo	rm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Part	X, line 21								
1a	Is the organization an agent, trustee, custodia	an or other interme	diary for d	contribution	s or other as:	sets not in	cluded		_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	ollowing t	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			<u>.</u>
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Fo							L.	_ Yes	∐ No
	If "Yes," explain the arrangement in Part XIII									<u> </u>
Pai	t V Endowment Funds. Complete if	the organization ai	nswered	"Yes" to Fo					1	
	_	(a) Current year	(b) P	rior year	(c) Two year	s back (d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships		ļ							
е	Other expenditures for facilities									
	and programs		 						 -	
f	Administrative expenses		-		<u> </u>				-	
g	End of year balance		J						L	
2	Provide the estimated percentage of the curre			g, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С		%								
	The percentages in lines 2a, 2b, and 2c shou		4 41							
За	Are there endowment funds not in the posses	ssion of the organia	zation tha	it are neio a	ina aaministe	rea for the	organi	zation	ſ,	res No
	by								3a(i)	es No
	(i) unrelated organizations								3a(ii)	_
	(ii) related organizations	listed as required	an Caba	dula D2					3b	
b	If "Yes" to 3a(ii), are the related organizations Describe in Part XIII the intended uses of the	•							30	
Pa	rt VI Land, Buildings, and Equipm									-
		(a) Cost or			t or other	(c) Acc	umulat	ed	(d) Book	value
	Description of property	basis (invest			(other)		eciation	1	(4) 5000	, aloc
	Land	223.5 (7,093.				97	,093.
	5				39,751.	1 .	37,0	32		,719.
b	Leasehold improvements	-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u>			_,	<u>,</u>
ч С	Equipment									
	Other				-			1		
	II. Add lines 1a through 1e (Column (d) must e	gual Form 990. Par	t X, colur	nn (B), line	10(c))				1,399	,812.

Sche	edule D (Form 990) 2012 TSTC FOUNDATION				2892470	Page 4
Paı	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per R	eturr		
1	Total revenue, gains, and other support per audited financial statements			1	1,089,	220.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1				
а	Net unrealized gains on investments	2a	8,895.			
b	Donated services and use of facilities	2b				
C	Recoveries of prior year grants	2c	212 512			
d	,	_2d	313,649.		200	- 4 4
е	Add lines 2a through 2d			2e		544.
3	Subtract line 2e from line 1			3	766,	<u>676.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1				
а	•	4a				
þ	,	4b				0
С	Add lines 4a and 4b			4c	766	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		L F	5		676.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents wit	n Expenses per	Hetu		005
1	Total expenses and losses per audited financial statements			1	1,222	825.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1				
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
	Other losses	2c	212 640	1		
	Other (Describe in Part XIII)	_2d	313,649.	}	212	C 4 0
е	Add lines 2a through 2d			2e	313	<u>.649.</u>
3	Subtract line 2e from line 1			3_	909	<u>,176.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)	4b		ł		•
C	Add lines 4a and 4b			4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	909	<u>,176.</u>
	rt XIII Supplemental Information					
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part ne 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to				20, Part V, line	4, Pan
PA	RT XI, LINE 2D - OTHER ADJUSTMENTS:					
RE:	NTAL EXPENSES				313	,649.
PA	RT XII, LINE 2D - OTHER ADJUSTMENTS:					
RE	NTAL EXPENSES				313	,649.
				Sche	dule D (Form 9	990) 2012

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Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Employer identification number 75-2892470 Inspection

	TSTC FOUNDATION	DATION						75-2892470
	Gereral IIII of III at the state of the stat	ind Assistance	stacra odt to tanoare	oft constance to	grantees, eligibility	for the grants or ass	pales ett bas egastsis	COL
_ O	Does the organization maintain records to substantiate the amount of criteria used to award the grants or assistance?	to substantiate the stance?	e amount of the grants	of assistance, the	grantees engionit	y ior the grants of ass	tre grants of assistance, the grantees engining for the grants of assistance, and the selection	X Yes No
8	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monit	toring the use of grant	funds in the United	States			
 	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. Co	omplete if the orga	anization answered "	res" to Form 990, Part	. IV, line 21, for any
	recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II can	be duplicated if additi	ional space is need	led			
-	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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS 3801 C	TEXAS STATE TECHNICAL COLLEGE 3801 CAMPUS DRIVE	0809797		750 71	470 243	Λ₩α	EQUIPMENT FOR	TO TRAIN AND EDUCATE STUDENTS
NAC.	15.70.703			4				
0 0	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations listed in the line 1 table	and government or	tions	listed in the line 1 table				1.
4	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2012)

75-2892470

Page 2

Schedule I (Form 990) (2012) TSTC FOUNDATION

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

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

Part III Grants and Other Assistance to Individuals in the United States.

Social de deplication in desirable de desirable de desirable de desirable de de de de de de de de de de de de de	Po rodanily (4)	(a) Amount of	(a) Amount of non-	(e) Method of valuation	(1) Description of non-cash assistance .
(a) Type of graffing assistance	recipients	cash grant	cash assistance	(book, FMV, appraisal, other)	
	76	777	c	N.	a Z
TSIC EMPLOYEE AWARDS	با		•		
STUDENT SCHOLARSHIPS AND AWARDS	495	318,863.	0.	N/A	N/A
WEST DISASTER RELIEF ASSISTANCE	42	6,685.	0	N/A	N/A
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	de the information	required in Part I,	line 2, Part III, colum	n (b), and any other additional inf	ormation
THE TSTC FOUNDATION HONORS DONORS WISH	ES	FOR THE TYPE	E OF STUDENTS	NTS IN	
CONSIDERING THE AVAILIBILITY AND A	AWARDING	OF SCHOLARSHIPS	SHIPS. MOST	H	
SCHOLARSHIPS ARE BASED ON NEED AND	AND/OR MERIT	AND THE	RECIPIENTS	ARE	
SELECTED BY A TSTC COMPONENT. THE	THE TSTC FOU	FOUNDATION PU	PURCHASES AN	AND DONATES	
EQUIPMENT TO THE TEXAS STATE TECHNICAL	_	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 EDUCATI	CATION OF	F STUDENTS.	CASH	ASSISTANCE	
WAS MADE TO TEXAS STATE TECHNICAL COLL	EGE	TO STAFF A	AND FACULTY	AND TO	
PROVIDE FOR CONTINUING EDUCATION A	AND TRAINING	인	FF AND FACULTY	ULTY.	
232 102 12-18-12		26			Schedule I (Form 990) (2012)

<u>Schedule I</u>	(Form 990) TSTC FOUNDATION	<u> 75-</u>	<u> 2892470</u>	Page 2
Part IV	(Form 990) TSTC FOUNDATION Supplemental Information			
ርጥአፑኮ	AND FACULTY ARE CHOSEN FOR ASSISTANCE AND RECOGNITION	DV	WEAV G	
DIME	AND FACULTI ARE CHOSEN FOR ASSISTANCE AND RECOGNITION	DI.	TEAMS	
<u>STATE</u>	TECHNICAL COLLEGE AND NOT THE TSTC FOUNDATION.			
				
				
			·	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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.

2012
Open to Public Inspection

Name of the organization

TSTC FOUNDATION

Employer identification number 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.

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

Name of the organization

Part

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047
2012
Open to Public Inspection

Upen to Public Inspection . Employer identification number 75-2892470

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) TSTC FOUNDATION

Direct controlling entity 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 organizations during the tax year) End-of-year assets Total income ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

(g) Section 512(b)(13) ž × controlled entity? Yes Direct controlling entity N/A status (if section Public charity 501(c)(3)) <u>e</u> Exempt Code section ਉ Legal domicile (state or foreign country) TEXAS PUBLIC HIGHER EDUCATION Primary activity 9 INSTITUTION TEXAS STATE TECHNICAL COLLEGE - 74-1646989 Name, address, and EIN of related organization 3801 CAMPUS DRIVE 76705 ΤX WACO

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

232161 12-10-12 LHA

Schedule R (Form 990) 2012

75-2892470

Page 2

Schedule R (Form 990) 2012 TSTC FOUNDATION

Part III

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)

General or Percentage managing ownership Schedule R (Form 990) 2012 Yes No Section 512(b)(13) controlled entity? 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.) 3 Percentage ownership Yes No 3 Ξ Code V-UBI amount in box 20 of Schedule Share of end-of-year assets Ξ 6 ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets <u>(6</u> Type of entity (C corp, S corp, or trust) e Share of total income ε Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) e Legal domicile (state or foreign country) 30 (d)
| Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity <u>e</u> Name, address, and EIN of related organization Name, address, and EIN of related organization 232162 12-10-12 Part IV

Page 3

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Yes

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

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es (III) royalties or (IV) re
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Receip

- b Gift, grant, or capital contribution to related organization(s)
 c Gift, grant, or capital contribution from related organization(s)
 - Celli, grant, or capital contribution from related organization
 Loans or loan guarantees to or for related organization(s)
 - d Loans or loan guarantees to or for related organization(s
 e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- J. Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)

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- 1 Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

- Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

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Z if the answer to any of the above is 1 cs, see the histocrafts for minimum of the	ימיוסון סון אווס ווויססי ססווויסטי	1000	
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) TEXAS STATE TECHNICAL COLLEGE	В	489,099.	489,099.DISCRETIONARY
(2) TEXAS STATE TECHNICAL COLLEGE	О	4,963,823.	4,963,823.DEBT DUE THIRD PARTY
(3) TEXAS STATE TECHNICAL COLLEGE	Н	379,816.	379,816. DEBT SERVICE REQUIREMENT
(4)			
(5)			
(9)			

Schedule R (Form 990) 2012

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Schedule R (Form 990) 2012 TSTC FOUNDATION

Part VI 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

(k) centage nership		i				į	Schodulo B (Form 901)
Perc							8
(J) General or managing partner? Yes No							ن ا
20 2.1-7 2.1-7							9
(h) (i) (i) (k) (k) Dispropor- Code V-UBI General or Percentage inorate amount in box 20 managing ownership of Schedule K-1 parner? Ves No (Form 1065) Ves No			:				Podeo
(h) Disproportionate allocations?							
Share of Dend-of year all assets							
Sh							
(f) Share of total income							
ವಿ≲ ೦							
(e) Are all partners sec 501(c)(3) 0005 4) Yes No							
(a) (b) (c) (d) (d) Areall Anancy activity of entity (state or foreign of entity (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c						:	
ra Dun	:						
(c) Legal domicile (state or foreign country)							
,							
(b) Primary activity							
Рита							
(a) Name, address, and EIN of entity							
(a) address, a							
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Part VII	(Form 990) 2012 Supplemental	Information	···		
L	Complete this part	to provide additio	anal information for respons	ses to questions on Schedule R (see instructions)	
	Complete this part	to provide addition	and anomidation to respons	so to questions on constant in total mendentials	
					
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