

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

OMB No 1545-0047 2014

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 private foundations)

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	F٥	r the	2014 calend	dar year, or ta	x year	begin	ning			, 20	014, and	d ending						
В	Che	eck of a	pplicable	C Name of orga	nization	TEX	AS SEI	LF ST	ORAG	E ASSO	CIATI	ON, I	NC.	D Employ	er identi	fication num	ber	
	Γ	Addr	ess change	Doing busines	s as							·	-	74 -	2427	590		
	H	-	e change	Number and s		P O. box	of mail is not	delivered	to street	address)		Room/su	ite	E Telepho				
	-	-															_	
	L	Initia	l return	595 ROUN								503		(51	2) 3	74-908	9	
	L	Final	return/terminated	City or town, s	state or p	province,	country, and	ZIP OF 101	eign post	ii code				1				
	L	Ame	nded return	ROUND RO	CK						rx 7	8681		G Gross r	ceipts :	\$1,605	,237.	
	L	Appl	cation pending	F Name and ad	dress of	pnnapai	officer							a group return			Yes	X No
	Ξ	_		GINNY SUTT	ON 59	5 ROUND	ROCK WEST	DRIVE R	COUND	ROCK	TX 7	8681	l(b) Are all	subordinates attach a list, (included	?	Yes	∐No
ī	•	Tax-ex	rempt status	501(c)(3)	X 50	1(c) (6) *	(insert	по)	4947(a)((1) or	527	n No,	attach a list, (seesu (ucuons)		
J	_			W.TXSSA.			<u> </u>						4(c) Group	exemption nu	mber ►			
K			f organization:	X Corporation	$\overline{}$	ust	Associatio	n To	ther >		L Year	of formation				gal domicile	TX	
Pa			Summar		11		7	··· <u>1_1_</u>			1			0 1 1 1 1		-gar comicale	11	
Fe	_			be the organiza	tion's	missini	n or most	significa	ant activ	vities:	ጥር ፣	TOMOR	מדום שי	LIC IN	MADA	NOTTON.		
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Activities & Governance		-			- - -									. – – – -				
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Revenue		8 (Contributions	and grants (Parice revenue (P	art VIII	. line 1	h)		[8]	3010 A) D & L		(1101 1041			ciii rec	
	ĺ	9 F	Program sen	rice revenue (P	art VII	L line 2	?g)		ļ				: 	1,400,8	17.4	1	506	797.
	١	10 i	nvestment in	rice revenue (P icome (Part VII	l. colu	mn (A)	. lines 3. 4	4. and 7	Б	OGD	EM. L	ĴĴ	` <u> </u>		17.	<u> </u>		933.
æ	1	11 (Other revenu	e (Part VIII, co	umn (A). line	s 5. 6d. 8	c. 9c. 10	Oc. and	11e)			+		11.			996.
	1			e – add lines 8									<u> </u>	1,416,8		1	596,	
	┿												+					
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)											64,461.			76,	611.		
	1		•		•		•	•	•									
စ္	1	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)												594,	430.			
Expenses	1	16a F	Professional	fundraising fee	s (Par	t IX, co	lumn (A),	line 11e	∍)									
Š	1	b 1	Total fundrais	sing expenses	(Part I	X, colu	mn (D), lir	ne 25) 🛚							İ			
Ú	-	17 (Other expens	ses (Part IX, co	lumn (A), line	es 11a-11	d, 11f-2	4e)					781,277.		,,	836,	544.
	1.			es. Add lines 1										1,408,6			507,	
	۱.		-	s expenses Su											202.			141.
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2 2		20 -	Total assets	(Part X, line 16	١									2,111,4			228,	
t Assets	5 2			s (Part X, line									<u> </u>	373,4		۷,		663.
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ž				fund balances	Supi	ractiin	e z i irom	ine 20	· · · ·					1,738,0	125.	1,	825,	373.
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Und	ler (ole	penaltie te Dec	es of perjury, I de daration of prepa	clare that I have ex rer (other than offic	amined (er) is bas	his return sed on all	n, including ai Linformation (ccompany of which p	ing sched reparer ha	ules and state as any knowie	ments, and dge	d to the bes	l of my know	wledge and be	llef, it is t	rue, correct, a	and	
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M	av 1	the IS	S discuss th	us return with t	ne pre	oarer s	hown abo	ve? (se	e instru	ctions) .						, X Ye	<u> </u>	No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

TEEA0101 05/28/14

m 990 (2014) TEXAS SELF STORAGE ASSOCIATION, INC.	74-24	427590	Page
rt III Statement of Program Service Accomplishments			ſ
Check if Schedule O contains a response or note to any line in this Part III		<u></u>	
Briefly describe the organization mission			
TO PROMOTE PUBLIC INFORMATION			
AND AWARENESS OF THE SELF STORAGE INDUSTRY WITHIN TEXAS.			- -
	_ 		
Did the organization undertake any significant program services during the year which were not listed or	n the prior	_	_
Form 990 or 990-EZ?		· · Yes	X No
If Øes, Ølescribe these new services on Schedule O		_	
Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices?	Yes	X No
If Øes, Odescribe these changes on Schedule O		_	_
Describe the organization program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported	vices, as measur is to others, the t	ed by expens total expense:	es. s,
a (Code) (Expenses \$ including grants of \$) (Revenue	\$	<u> </u>
THE ORGANIZATION HOLDS AN ANNUAL THREE DAY CONVENTION, FEATUR	— ′'	·	
SEMINARS, A MEMBERSHIP LUNCHEON, KEYNOTE AND GENERAL SESSIONS		-	
WITH A TRADE SHOW. THE PURPOSE OF THE EVENT IS TO PROVIDE MEM			
OPPORTUNITY TO LEARN ABOUT THE INDUSTRY AND ITS LATEST DEVELO			
AND ADVANCES. APPROXIMATELY 550 MEMBERS ARE SERVED BY THIS EV	:=::	-	
	· -		
b (Code) (Expenses \$ including grants of \$) (Revenue	\$	
THE ORGANIZATION PUBLISHES A MAGAZINE SIX TIMES A YEAR. THE M	MAGAZINE_		
IS SENT TO ALL MEMBERS AND THE FACILITIES THEY OPERATE. IT FE	EATURES		
ARTICLES ON VARIOUS TOPICS TO EDUCATE MEMBERS ON THE MOST PRE	ESSING		
LEGAL AND OPERATIONAL ISSUES IN THE INDUSTRY. IT ALSO INCLUDE			
ADVERTISEMENTS FOR INDUSTRY VENDORS. ALL MEMBERS (APPROXIMATE	- 		
AND MANY OF THEIR EMPLOYEES ARE SERVED BY THIS PUBLICATION.			
WIND THAT OF THE PROPERTY OF T	-	· 	
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		- -	· ·
(O. I) (Revenue	÷	
c (Code) (Expenses \$ including grants of \$	— ' '	٠	
THE ORGANIZATION PRINTS EIGHT OFFICIAL LEGAL FORMS, INCLUDING			
POPULAR TSSA RENTAL AGREEMENT FOR PURCHASE BY MEMBERS, ALONG			
APPROXIMATELY 80 FORMS THAT ARE AVAILABLE TO MEMBERS FOR FREE			
ESTIMATED 2,100 OR MORE OF THE OWNER AND MANAGEMENT COMPANY M	MEMBERS		
USE THE OFFICIAL FORMS. ADDITIONALLY, THE ORGANIZATION PRINTS	S_AND		
PUBLISHES A 400 PAGE LEGAL MANUAL (GOLDBOOK) WHICH IS DISTRI			
TO THE MEMBERSHIP FREE OF CHARGE.			
		- 	
		- 	·
A Other pregram converse (Decembe in Schodule O.)			
4 d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Reven			

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If Oes, Complete Х Х Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 2 3 Х 3 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 Øes, & complete Schedule C, Part III X 5 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 🕉 es, Čcomplete Schedule D, 6 Х Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If \hat{Q} es, \hat{O} 8 Х Х 9 Х 10 If the organization answer to any of the following questions is GesOthen complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If $ilde{G}$ es, $ilde{G}$ complete Schedule D, Part VI. . . Х 11 a 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 O'es, Ocomplete Schedule D, Part VII 11 b Х 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 Oves, Ocomplete Schedule D, Part VIII Х ·11 c 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 Øes, Čomplete Schedule D, Part IX X 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If Oes, Ocomplete Schedule D, Part X.... 11 e f Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization liability for uncertain tax positions under FIN 48 (ASC 740)? If Ses, Complete Schedule D, Part X Х 111 12a Did the organization obtain separate, independent audited financial statements for the tax year? If $O\!\!\!\!/$ is $O\!\!\!\!/$ in $O\!\!\!\!/$ i Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If Ges, and if the organization answered 🗗 🖒 line 12a, then completing Schedule D, Parts XI and XII is optional 12b X X Is the organization a school described in section 170(b)(1)(A)(ii)? If Oes, Ocomplete Schedule E. 13 Х 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 O'es, Complete Schedule F, Parts I and IV Х 14b Х 15 16 Х 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 Øes, @complete Schedule G, Part I (see instructions) Х 17 Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If Oes, O Х 19 20 a Did the organization operate one or more hospital facilities? If \acute{Q} es, \acute{Q} complete Schedule H Х 20

20 b

b If Tesa o 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 or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If $\hat{\mathbf{O}}$ es, $\hat{\mathbf{C}}$ complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If G es, C complete Schedule I, Parts I and III	22		х
23	Did the organization answer ŠesĜo Part VII, Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, key employees, and highest compensated employees? If Šes, Čeomplete Schedule J	23		x
24 a	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 O'es, Canswer lines 24b through 24d and complete Schedule K If Olo, Go to line 25a	24a		x
ь	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	Did the organization act as an On behalf of Ossuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If \check{O} es, \check{C} complete Schedule L, Part I	25a		
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 prior Forms 990 or 990-EZ? If Oves, Oxomplete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If ØesQcomplete Schedule L, Part II	26		
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 $\hat{\mathbf{O}}$ es, $\hat{\mathbf{C}}$ complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			-
а	A current or former officer, director, trustee, or key employee? If Oves, Ocomplete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If \hat{G} es, \hat{G} complete Schedule L, Part IV	28b		х
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 Øes, Œomplete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If \hat{G} es, \hat{G} complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Θ es, Φ complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If \hat{G} es, \hat{G} complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If \bar{O} es, \bar{O} complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If O'es, O complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If \tilde{G} es, \tilde{G} complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	b If $\hat{\mathbf{O}}$ es $\hat{\mathbf{O}}$ o line 35a, 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 $\hat{\mathbf{O}}$ es, $\hat{\mathbf{C}}$ complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If O'es, Ocomplete Schedule R, Part V, line 2	36		
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 Oes, Complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

BAA

Form 990 (2014) Page 5 TEXAS SELF STORAGE ASSOCIATION, INC 74-2427590 Part V | Statements Regarding Other IRS Filings and Tax Compliance Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 8 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c Х (gambling) winnings to prize winners? 2 a 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 X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 h Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3 h b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O...... 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a b If Øes, Čenter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?..... X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . 5 C 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х 6 a b If Øes, Adid the organization include with every solicitation an express statement that such contributions or gifts were Х 6 b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a b If Øes, Ödid the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 a h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring 8 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?.... 9 b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If Øes, Øenter the amount of tax-exempt interest received or accrued during the year | 12b

13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans X 14a b If Óves, Ónas it filed a Form 720 to report these payments? If Óves, Ónovide an explanation in Schedule O TEEA0105 05/28/14 Form 990 (2014) BAA

Form (200 (2014) TEVAS CELE SEODAGE ACCOCIATION INC. 74 2427500		D	age 6
	990 (2014) TEXAS SELF STORAGE ASSOCIATION, INC. 74-2427590 VI Governance, Management, and Disclosure For each Ofes Oesponse to lines 2 through 7b below			_
Part	a ØloÕesponse to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes of Schedule O. See instructions.	v, and n	u ioi	
	Check if Schedule O contains a response or note to any line in this Part VI			. x
Sect	ion A. Governing Body and Management			
		$\overline{}$	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			İ
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		
	officer, director, trustee, or key employee?	2		Х
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?	3		х
	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
	Did the organization become aware during the year of a significant diversion of the organization § assets?	5		X
	Did the organization have members or stockholders?	6	_X	
	members of the governing body?	7 a	Х	
	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
Ü	stockholders, or persons other than the governing body?	7 b	х	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8 a	X	
	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization mailing address? If Mes, Provide the names and addresses in Schedule O	9		X
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		1
10-	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X
	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	102		Ĥ
	operations are consistent with the organization's exempt purposes?	10b		<u> </u>
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	ļ
-	Describe in Schedule O the process, if any, used by the organization to review this Form 990			ļ
	Did the organization have a written conflict of interest policy? If $\hat{O}\!\!Io,\hat{Q}\!\!Io$ 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	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If $\hat{\mathbf{S}}$ is $\hat{\mathbf{C}}$ is $\hat{\mathbf{C}}$ is $\hat{\mathbf{C}}$ is $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}$ in $\hat{\mathbf{C}$ in			
	Schedule O how this was done	12c	Х	<u> </u>
13	Did the organization have a written whistleblower policy?	13	Х	1
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		_	
	The organization © CEO, Executive Director, or top management official	15 a	Х	
b	Other officers or key employees of the organization	15 b		X
	If $\hat{\mathbf{O}}$ es $\hat{\mathbf{O}}$ o line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	-	x
ь	If Ö res, Ö lid 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 © exempt status with respect to such arrangements?	16 h	_	
Sec	tion C. Disclosure	16b	ь	Ь—
17	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)			· – –
10	for public inspection. Indicate how you made these available Check all that apply	~vullat		
	Own 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 public district the rest policy.	le to		
20	the public during the tax year State the name, address, and telephone number of the person who possesses the organization books and records			

GINNY SUTTON

78681

Part VI	Compensation of Officers,	Directors, Trust	ees, Key Employee	es, Highest Compensate	ed Employees, and
	independent Contractors				

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the
- List all of the organization of 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 current key employees, if any See instructions for definition of wey employee O
- List the organization 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 of 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 of 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

				(C)						
(A) Name and Title	(B) Average hours per	Pos than	both dire	tion (do not check more one box, unless person both an officer and a director/trustee)				(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) AMY NOLAN PRESIDENT	1.00	х		х				0.	0.	0.
(2) PAUL GLOVER VICE PRESIDENT	1.00	х		х				0.	0.	0.
(3) CLINT WYNN TREASURER	<u>1.00</u>	х		х				0.	0.	0.
	1.00	х		х				0.	0.	0.
(5) MIKE GATELY IMMED. PAST PRES	1.00	х		x				0.	0.	0.
(6) LARRY EASLEY DIRECTOR	1.00	Х						0.	0.	0.
_(7)_CHRIS_MARTIN DIRECTOR	1.00	х						0.	0.	0.
(8) GEORGE MCCANSE DIRECTOR	1.00	х						0.	0.	0.
(9) LISA MEYLOR DIRECTOR	1.00	х						0.	0.	0.
(10) BLAIR VALK DIRECTOR	1.00	х						0.	0.	0.
(11) APRIL YOUNG DIRECTOR	1.00	х						0.	0.	0.
(12) BILL BELLOMY VENDOR REPRESENTATIVE	1.00	х						0.	0.	0.
(13) TOM MCCLOSKEY EX-OFFICIO DIRECTOR	1.00	х						0.	0.	0.
(14) MARK SKEANS EX-OFFICIO DIRECTOR	1.00	x						0.	0.	0.

Part VII Section A	A. Officers, Directors, Tru		Key	En			es,	and	d Highest Con	pensated Emp	oyees	(conti	nued)
	(A) Name and title	Average hours per week	Position rage (do not check more than one box, unless person is both an officer and a director/trustee) officer and a director/trustee) Reportable compensation from compensation from		Reportable compensation from	Est amour	(F) imated it of oth ensation	er n					
•		(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	(ey employee	Highest compensated employee	ormer	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	fro orga and	m the nization related nization	•
EXECUTIVE D		40.00			х				127,332.	0.		9,0	000.
(16)													
(17)													
(18)													
(19)			_										
		- -				_							
						L		L					
(00)		 	-		-	-	ļ	-					
				ļ									
(24) 						<u> </u>							
(25)													_
								>	127,332.	0.		9,0	000
d Total (add lines 1	Ib and 1c)							► eive	127,332.	0. 000 of reportable cor	npensat		000
from the organizat													
3 Did the organization	on list any former officer, director	r, or truste	e, ke	y en	nplo	yee,	or hi	ghe	st compensated er	nployee		Yes	
4 For any individual	, Complete Schedule J for such II listed on line 1a, is the sum of re	portable c	omp:	ensa	ation	and	othe	er co	mpensation from		. 3		X
the organization a such individual	and related organizations greater	than \$150	,000		yes(Lon	ipiete 	Sc	hedule J for 		4		х
for services rende	sted on line 1a receive or accrue of ered to the organization? If \hat{O} es, \hat{Q}	compensa complete	tion f Sche	rom dule	any <i>J fo</i>	unr er su	elate ch pe	d org	ganization or indivi	dual 	5		Х
Complete this tab	ndent Contractors le for your five highest compensa m the organization Report compe	ited indepo ensation fo	ende or the	nt co	ontra enda	ctor ar ye	s tha	t rec	ceived more than \$ g with or within the	100,000 of organization © tax ye	ear		
	(A) Name and business addr	ress							Description	of services	Compe	C) nsatic	n
-													
O Tabeles I a C	adapandant castrate (m-li-1	- h 1	m-4-	1 +- 1	ha-	o l	od -	ho: ·	a) who reconsed ==	ore than			
	ndependent contractors (including pensation from the organization	y out not II	mie	101	1108	e (15)	eu a	DOVE	a) who received mo	JIE IIIAII		_	

Part	VII	Statement of Rever Check if Schedule O con		raenor	ise or note to any lin	e in this Part VIII			
:		Shock if Goriedate O con		. 55poi	SS of motor to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1 a	Federated campaigns		1 a					
iran		Membership dues		1 b		ļ			į
S, E	C	Fundraising events		1 c		j			'
Sift.	d	Related organizations		1 d					
s, (mil	е	Government grants (contributions	i)	1 e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grant similar amounts not included abor	ts, and ve	1 f					
اتا ک	g	Noncash contributions included in	ı lınes 1a	-1f \$			ļ		
a Co	h	Total. Add lines 1a-1f							
					Business Code		Automorphism of the contract of the		
2	2 a	MEMBERSHIP DUES		[900099	673,621.	673,621.	0.	0.
æ		ADVERTISING			541800	143,375.	0.	143,375.	0.
<u>.</u>		DOCUMENT_SALES			323100	182,493.	182,493.	_0.	0.
ઝુ	d	CONVENTION/TRADE	_SHO	₩	611430	484,291.	0.	0.	484,291.
Program Service Revenue	e	SEMINARS/TRAININ	IG		611430	79,108.	79,108.	0.	0.
ğ	I .	All other program service re	evenue			23,909.	12,918.	0.	10,991.
چ	g	Total. Add lines 2a-2f				1,586,797.			
	3	Investment income (includi	ng divid	ends,	interest and				
		other similar amounts)				7,933.	0.	0.	7,933.
	4	Income from investment of		-	·				
	5	Royalties				947.	0.	0.	947.
]_		(i) R		(II) Personal				
		Gross rents		<u>, 560</u>					
	1	Less rental expenses		<u>,511</u>					
		Rental income or (loss)		,049					
	۱ ۹	Net rental income or (loss)	(i) Secu		(ii) Other	1,049.	0.	0.	1,049.
	7 a	Gross amount from sales of assets other than inventory	(1) Sect	intes	(ii) Other				
		Less cost or other basis and sales expenses							
	(Gain or (loss)							
	(Net gain or (loss)			. <u></u>				
Other Revenue	8 8	a Gross income from fundral (not including \$ of contributions reported or							
S.	1	See Part IV, line 18			а			ł	
Ā	1	b Less direct expenses			ь	1			1
돧	1	Net income or (loss) from t			en ts ▶				
	9 :	a Gross income from gaming See Part IV, line 19			a				
	П	b Less direct expenses			ь	1			
		c Net income or (loss) from			ies ▶				
	1	a Gross sales of inventory, leand allowances	ess retu						
	1	b Less cost of goods sold .			b	1	į		
	1	c Net income or (loss) from				1			
	-	Miscellaneous Revenue			Business Code		<u> </u>		
	11	a		-					
		b							
		c							
		d All other revenue							
		e Total. Add lines 11a-11d							
	12	Total revenue See instru			•	1 506 736	040 140	142 275	FOF 211

	t IX Statement of Functional Expe				
Secti	tion 501(c)(3) and 501(c)(4) organizations must c	complete all columns All ot	her organizations must	complete column (A)	
	Check if Schedule O contains a r	esponse or note to any line			
Do n 6b, 7	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	76,611.			Ę.
2	Grants and other assistance to domestic individuals See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.		1		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	136,332.			
Ū	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	330,458.	·		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	26,752.			
9	Other employee benefits				-
10	Payroll taxes				
	Fees for services (non-employees)				
	a Management				
	b Legal				
	c Accounting				
	d Lobbying				
	e Professional fundraising services See Part IV, line 17				
	Investment management fees			†	
	Other (If line 11g amt exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion				+
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18					
19					
20			ļ. <u>-</u> -		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,863.			
23		3,270.			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a UBIT TAXES				
	b PUBLICATIONS				
	d				
	e All other expenses				
25	·		<u> </u>		
26	Joint costs. Complete this line only if the organization reported in column (B)	1,307,333.			
	joint costs from a combined educational campaign and fundraising solicitation. Check here if following				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
	_		(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	51,068.	1	249,115.
1	2	Savings and temporary cash investments	1,629,357.	2	1,535,548.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	14,026.	4	25,264.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 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 employers and sponsoring organizations of section 501(c)(9) voluntary employeesÕ beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	14,732.	8	14,732.
₹	9	Prepaid expenses and deferred charges	4,135.	9	25,615.
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	:		
	b	Less accumulated depreciation 10b 213,764.	398,144.	10c	377,762.
	11	Investments – publicly traded securities		11	•
	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)	2,111,462.	16	2,228,036.
_	17	Accounts payable and accrued expenses	42,224.	17	62,250.
	18	Grants payable		18	
	19	Deferred revenue	330,013.	19	339,218.
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	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	1,200.	25	1,195.
	26	Total liabilities. Add lines 17 through 25	373,437.	26	402,663.
ses.		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
_	27	Unrestricted net assets	1,738,025.	27	1,825,373.
3a	28	Temporarily restricted net assets		28	
豆	29	Permanently restricted net assets		29	
Net Assets or Fund Balar		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
Ö	30	Capital stock or trust principal, or current funds		30	
šet	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Asi	32	Retained earnings, endowment, accumulated income, or other funds		32	
ē	33	Total net assets or fund balances	1,738,025.	33	1,825,373.
Z	34	Total liabilities and net assets/fund balances		34	2,228,036.
_	,			•	

BAA

Form 990 (2014)

Form	n 990 (2014) TEXAS SELF STORAGE ASSOCIATION, INC 74	-24275	90	Pa	age 12
Par	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<i></i>	·Ш
1	Total revenue (must equal Part VIII, column (A), line 12)		1,	596,	726.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	507,5	585.
3	Revenue less expenses Subtract line 2 from line 1			89,1	141.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,	738,0	025.
5	Net unrealized gains (losses) on investments	5		-1,7	793.
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
-	column (B))	10	1,	825,	<u>373.</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				$\cdot \sqcup$
				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, Oexplain		ŀ		
	in Schedule O				*-
2	a Were the organization 6 financial statements compiled or reviewed by an independent accountant?		. 2	a	Х
	If Øes, Öcheck a box below to indicate whether the financial statements for the year were compiled or reviewed on	а			} ;
	separate basis, consolidated basis, or both		_		
	Separate basis Consolidated basis Both consolidated and separate basis				
	b Were the organization § financial statements audited by an independent accountant?		· 2	b X	1
	If Øes, Otheck a box below to indicate whether the financial statements for the year were audited on a separate			1	{
	basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis			ŀ	
	E				.
	c If Øes Oo line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the air review, or compilation of its financial statements and selection of an independent accountant?	idit,	. 2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain		· -	\ 	1
	in Schedule O			.	
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	е			x
	Audit Act and OMB Circular A-133?		· 3	a	+^
	b If Ges, Glid the organization undergo the required audit or audits? If the organization did not undergo the required			_	
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	· · · · ·		,	1004 ::
BA	A .		For	m 990	(2014)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 2014

Open to Public Inspection

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and it instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

If the organization answered Ões, Õo Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered Øes, Oo Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501 (c)(3) organizations that have NOT filed Form 5768 (election under section 501 (h)). Complete Part II-B Do not complete

If the organization answered Ges. Qo Form 990, Part IV, line 5 (Proxy Tax) (see instructions) or Form 990-EZ, Part V, line 35c

(Prox	cy Tax) (see instructions), the	n '	,	, ,	
	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	of organization			Employer identifica	ition number
TEX	AS SELF STORAGE ASS	SOCIATION, INC.		74-242759	0
Par		ganization is exempt under section			zation.
1		ganızatıonĞ direct and indirect political campa			
2					
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any excise	ganization is exempt under section to the section of the section o	on 4955	▶ \$	
2		e tax incurred by organization managers unde			
3	If the organization incurred a s	ection 4955 tax, did it file Form 4720 for this	year ⁹		· · · Yes No
4 a	Was a correction made?				Yes No
t	If Óres, Odescribe in Part IV				
Par	t I-C Complete if the or	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	1
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function activ	vities ▶ \$	
2	Enter the amount of the filing of	organization@funds contributed to other orga	nizations for section 52	27 exempt	
_					
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here and on F	orm 1120-POL,		
4	Did the filing organization file i	Form 1120-POL for this year?			· · · Yes No
5	organization made payments amount of political contribution	nd employer identification number (EIN) of al For each organization listed, enter the amous received that were promptly and directly deaction committee (PAC). If additional space is	nt paid from the filing of	organization@ funds Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization® funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)		L			-

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

Schedule C (Form 990 or 990-EZ) 2014

chedule C (Form 990 or 990-EZ) 2014				74-242	
Part II-A Complete if t section 501(h		on is exempt under	section 501(c)(3) an	d filed Form 5768 (e	lection under
A Check ► If the filing	organization bek	ongs to an affiliated group (and list in Part IV each affil	lated group member © nan	ne,
	-	nd share of excess lobbying			
		cked box A and @mited coi	· · _ ·		
			,	 	
•	expendituresOm	oying Expenditures eans amounts paid or inc	•	(a) Filing organization® totals	(b) Affiliated group totals
1 a Total lobbying expenditure	es to influence pu	blic opinion (grass roots lot	obying)		·
b Total lobbying expenditure		•	•		
c Total lobbying expenditure					
d Other exempt purpose exp	penditures				
e Total exempt purpose exp	enditures (add lir	nes 1c and 1d)			
f Lobbying nontaxable amo both columns		ount from the following tab			
If the amount on line 1e, colu		The lobbying nontaxal			
Not over \$500,000		20% of the amount on line 16)		
Over \$500,000 but not over \$1,	000,000	\$100,000 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the ex	cess over \$1,000,000		
Over \$1,500,000 but not over \$1	17,000,000	\$225,000 plus 5% of the exc			
Over \$17,000,000	· · ·	\$1,000,000			
g Grassroots nontaxable an	nount (enter 25%	of line 1f)			
h Subtract line 1g from line	•	•			
i Subtract line 1f from line 1					
j If there is an amount othe section 4911 tax for this y		her line 1h or line 1i, did the			· · · · Yes
(Some	e organizations t colu	4-Year Averaging Perio hat made a section 501(h mns below. See the instru) election do not have to	complete all of the five gh 2f.)	
	Lo	bbying Expenditures Dur	ing 4-Year Averaging Per	riod	
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
AA				Schedule C (Form	n 990 or 990-EZ) 201

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	<u> </u>	(a)	(b)
For each ØesØesponse to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?	[Τ	
d Mailings to members, legislators, or the public?	[
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?	[
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If Øes, Enter the amount of any tax incurred under section 4912]
c If Šres,Čenter the amount of any tax incurred by organization managers under section 4912		1	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the expeniention is exempt under section 501(a)(4) section	n E01/a\/	-\	-

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	ļ	X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered \$\text{Q}\text{io}, \text{OOR}\$ (b) Part III-A, line 3, is answered \$\text{O}\text{es.} \text{O}

1	Dues, assessments and similar amounts from members	1	673,621.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
	a Current year	2 a	0.
	b Carryover from last year	2 b	0.
	c Total	2 c	0.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	20,209.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered Ges, Go Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

TEXAS SELF STORAGE ASSOCIATION, INC. 74-2427590 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered ØesÕo Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) Aggregate value at end of year No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Conservation Easements.** Complete if the organization answered ØesQo Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2 a 2 b c Number of conservation easements on a certified historic structure included in (a) 2 ¢ d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization for financial statements that describes the organization for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered ØesQo Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items ▶\$

chedule D (Form 990) 2014 TEXA	S SELF ST	ORAGE ASSOCIAT	ION, INC.	74-242			Page 2
Part III Organizations Mainta	ining Colle	ctions of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (cc	ntınue	∍d)
Using the organization acquisition (check all that apply)	in, accession, a	nd other records, check	any of the following that	are a significant use of its	s collectio	on.	
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e Other	g- pg				
c Preservation for future genera	ations	- Ш					
Provide a description of the organ Part XIII		ions and explain how the	ey further the organization	n 6 exempt purpose in			
5 During the year, did the organizat to be sold to raise funds rather that	an to be maıntaı	ned as part of the organ	ızatıon@ collection?		Yes		No
Part IV Escrow and Custodi	al Arrangem amount on F	ients. Complete if t orm 990, Part X, lin	he organization ans e 21.	wered WesQo Form	990, P	art IV,	
1 a Is the organization an agent, trust on Form 990. Part X?	ee, custodian, c	or other intermediary for	contributions or other ass	sets not included	∏Yes	Г	No
b If G 'es, G explain the arrangement i					□	L	
bit Ges, Cexplain the arrangement	iii ait Xiii aila (complete the following to			Amount		
c Beginning balance				. 1c			
d Additions during the year							
e Distributions during the year				. 1e			
f Ending balance							
2a Did the organization include an ai					Yes		No
b If Øes,Õexplain the arrangement						🗀	┤```
bili Ges, Gexpiain the arrangement	III all Alli One	ck fiere if the explanatio	ii nas been provided iii i	art Allie E E E E E E E E			_
Part V Endowment Funds.	Complete if t	he organization and	wered WesOn Form	990 Part IV line 1	0		
Part V Endowment I dids.	(a) Current				- 1	our years	hack
1 a Beginning of year balance	<u> </u>	year (b) Fhor yea	(c) Two years back	(a) Thice years back	1 (0) 1	our years	DUCK
b Contributions	<u> </u>				 		
		-			+		
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage			g, column (a)) held as				
a Board designated or quasi-endover	vment ►	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
b Permanent endowment •	[%]						
c Temporarily restricted endowmer	nt 🟲	%					
The percentages in lines 2a, 2b,	and 2c should e	equal 100%					
3 a Are there endowment funds not a organization by	n the possessio	n of the organization tha	t are held and administer	red for the	٦	Yes	No
(i) unrelated organizations					. 3a(i)		
(ii) related organizations					. 3a(ii)		
b If ØesÕo 3a(ii), are the related o					3b		
4 Describe in Part XIII the intended	•				·		
Part VI Land, Buildings, and		i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de					
Complete if the organ			990, Part IV, line 11	a. See Form 990, P			
Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) !	Book va	llue
1 a Land			52,805.		<u> </u>	52	,805.
b Buildings			370,530.	103,536.		266	,994.
c Leasehold improvements			74,067.	23,600.	<u> </u>	50	,467.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c.)

. ► 377,762. Schedule **D** (Form 990) 2014

2. Liability for uncertain tax positions in Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII.

(9) (10) (11)

Total. (Column (b) must equal Form 990, Part X, column (B) line 25) . . .

1,195.

Schedule D (Form 990) 2014 TEXAS SELF STORAGE ASSOCIATION, INC. 74	-2427590	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
Complete if the organization answered ØesÕo Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,610,776.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments	.	
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)	<u> </u>	
e Add lines 2a through 2d	2 e	14,050.
3 Subtract line 2e from line 1	3	1,596,726.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	l	
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,596,726.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	
Complete if the organization answered ØesÕo Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	1,523,428.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	1 1	
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	15,843.
3 Subtract line 2e from line 1	3	1,507,585.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		<u> 1/30//303.</u>
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		
C Add lines 4a and 4b	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,507,585.
Part XIII Supplemental Information.		

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

Pt XI, Line 2d RENTAL EXPENSES
Pt XII, Line 2d RENTAL EXPENSES

SCHEDULE		Ġ	rants and Oth	Grants and Other Assistance to Organizations,	o Organization	,		OMB No 1545-0047
(Form 990)		6 5	vernments, ar	Governments, and Individuals in the United States omplete if the organization answered Gesão Form 990. Part IV. line 21 or 22	n the United Starm 990. Part IV, line 2	ates 1 or 22.		2014
Department of the Treasury				► Attach to Form 990.	0.			Open to Public
Internal Revenue Service		Information	n about schedule I	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/roringsov	uctions is at www.ifs.g	Joe/Iomisso.	Employer Identification number	ation number
TEXAS SET.E STOR	STORAGE ASSOCIATION	TNC.					74-2427590	06
-	formation on Gr	ا ھ	ance					
1 Does the organizat the selection criteri 2 Describe in Part IV	tion maintain records a used to award the i	to substantiate the argrants or assistance?	mount of the grants o	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees@ligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization@ procedures for monitoring the use of grant funds in the United States	sceligibility for the grant	s or assistance, and	:	X Yes No
딑	d Other Assistar Part IV, line 21 fo	nce to Domestic	Organizations a	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered Øesûo 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.	ernments. Comple can be duplicated	ete if the organizati if additional space	ion answered Ở e s is needed.	são
1 (a) Name and address of organization or government	ss of organization nment	(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
(1) SHRINBRS HOSPITAL_FOR 815_MARKET STRBET GALVESTON TX 77550	_CHI	36-2193608	501(c)(3)	75,181.	0.	CASH	N/A	CONTRIBUTION
[2]								
(3)								
(4)								
(5)								
(6)								
ω							:	
(8)								
 2 Enter total number of section 501(c)(3) and government organizations listed in 3 Enter total number of other organizations listed in the line 1 table BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 	of section 501 (c)(3) and of other organization section Act Notice,	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	nizations listed in the able s for Form 990.	line 1 table		06/19/14	Schedu	Schedule I (Form 990) (2014)

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Schedule I (Form 990) (2014)

(f) Description of non-cash assistance I (Form 990) (2014) TEXAS SELF STORAGE ASSOCIATION, INC.

| Grants and Other Assistance to Domestic Individuals. Complete if the organization answered GesGo Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part III 9 က ß

THE ORGANIZATION REPORTS BACK TO THE ASSOCIATION REGARDING THE USE OF FUNDS. Pt I Line 2

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Schedule I (Form 990) (2014)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Pt VI, Line 19

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number 74-2427590 TEXAS SELF STORAGE ASSOCIATION, INC THE ASSOCIATION'S MEMBERSHIP IS MADE UP OF SELF STORAGE OWNERS AND OPERATORS IN TEXAS. Pt VI, Line 6 ALL MEMBERS VOTE TO ELECT THE BOARD OF DIRECTORS. THREE NEW DIRECTORS ARE ELECTED EACH YEAR. ADDITIONALLY, VENDOR MEMBERS ELECT ONE REPRESENTATIVE ANNUALLY TO THE BOARD OF DIRECTORS. Pt VI, Line 7a THE DECISIONS OF THE BOARD OF DIRECTORS ARE SUBJECT TO APPROVAL OF THE MEMBERS ONLY IF THE CHANGE WOULD AFFECT THE ASSOCIATION'S ARTICLES OF Pt VI, Line 7b INCORPORATION. BOTH THE EXECUTIVE AND FINANCE COMMITTEES, AS WELL AS ANY BOARD MEMBERS, WILL COMPLETE AN INITIAL REVIEW WITH THE PREPARING CPA AND MAKE A RECOMMENDATION TO THE BOARD WHETHER OR NOT TO APPROVE THE RETURN. THE ENTIRE BOARD SUBSEQUENTLY REVIEWS THE RETURN AND WILL VOTE FOR APPROVAL AT A BOARD MEETING BEFORE FILING. Pt VI, Line 11b THE EXECUTIVE DIRECTOR REVIEWS THE CONFLICT OF INTEREST POLICY WITH DIRECTORS AT THE ANNUAL PLANNING SESSION. ALL DIRECTORS SIGN AN ACKNOWLEDGEMENT THAT THEY HAVE READ AND UNDERSTAND THE POLICY. IF ISSUES ARISE BEFORE THE BOARD THAT INVOLVE A DIRECTOR, THAT DIRECTOR IS ASKED TO ABSTAIN FROM DISCUSSION AND LEAVE THE ROOM DURING VOTING. Pt VI, Line 12c THE EXECUTIVE AND FINANCE COMMITTEES REVIEW COMPARABLE COMPENSATION DATA AND MAKE A RECOMMENDATION TO THE FULL BOARD REGARDING COMPENSATION FOR THE EXECUTIVE DIRECTOR. THERE ARE NO OTHER KEY STAFF MEMBERS OR PAID OFFICERS, BUT THE FINANCE COMMITTEE REVIEWS TOTAL PROPOSED COMPENSATION FOR ALL EXEMPT STAFF BEFORE PRESENTING THE ANNUAL BUDGET FOR APPROVAL BY THE BOARD. THE EXECUTIVE DIRECTOR DETERMINES THE SALARY FOR EACH Pt VI, Line 15a EMPLOYEE. GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE FOR REVIEW IN PERSON OR MAILED COPIES UPON

REOUEST.