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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ 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 Inspection , 2014, and ending A For the 2014 calendar year, or tax year beginning , 20

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		return	L	ARLINGTON, TX 76004-3111 F Name and address of principal officer NEIL LEIBMAN										G Gross r			717,			
	L	pendir	19			-	-					_				H(a) is this subord	a group inates?	return for	⊣ ⊢	X No
			j				1	GTON,					·			H(b) Are all			Yes _	No
			empt sta		501(c)(501(c)			no)	4	947(a)(1) c	or	527		If 'No,	attach a	a list (see insti	uctions)	
						1	GERS.N	ILB.COM		,						H(c) Group	exemption	on number	•	
	_		of organi	zation 🛚 🗅	Corpora	ation	Trust	Associati	on	Other	<u> </u>			L Year of	format	tion 1991	M St	ate of legal of	lomicile	TX
	Pa	art I		nmary																
		1	Briefly	describe	the orga	nızatıon	's missior	or most si	gnıfıcar	nt activit	ies _	THE FO	ומטכ	MOITAC	<u>I</u> S	OPERA:	ED I	BY THE	TEXAS	
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	Activities & Governance	3	Numbe	er of votin	ng membe	ers of th	e governi	ng body (Pa	art VI, li	ne 1a)							. [3	3	_	12.
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	_	8	Contril	outions a	nd grants	(Part VI	II. line 1h)							Ī		2,623	408	. 2	,682,	741.
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	Revenue											1	,244							
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	- s	19	Reven	ue less e	expenses	Subtrac	time to ir	om line 12	. 18	lia: · I	} V Č	2·4 201	10.	13	Regun	ining of Curi	_		d of Year	
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	May	the IF	RS disc	cuss this	return wi	th the p	eparer sh	own above?	see ir	nstructio	ons)			<i>.</i> .					Yes	No
	For	Pance	nwork !	Reduction	n Act No		the cons	rata instru	ctions										99n	(2014)

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Form 9	90 (2014)	Page 2
Part		
	Check if Schedule O contains a response or note to any line in this Part III	.
	riefly describe the organization's mission	
M	DNE	
_		
_		
2 D	d the organization undertake any significant program services during the year which were not listed on the	
		X No
lf	'Yes," describe these new services on Schedule O	
	d the organization cease conducting, or make significant changes in how it conducts, any program	
		X No
lf	'Yes," describe these changes on Schedule O	
4 D	escribe the organization's program service accomplishments for each of its three largest program services, as mea-	sured by
	penses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others
th	e total expenses, and revenue, if any, for each program service reported	
	ode) (Expenses \$ _{935,176} including grants of \$ _{935,176}) (Revenue \$)
	EXAS RANGERS BASEBALL FOUNDATION PROVIDES SCHOLARSHIPS TO	
_	ALLAS/FORT WORTH AREA STUDENTS, MAKES GRANTS TO SUPPORT BASEBALL	
	ND SOFTBALL PROGRAMS IN THE DALLAS/FORT WORTH AREA, MAKES GRANTS	
	O OTHER CHARITABLE ORGANIZATIONS, AND RECOGNIZES OUTSTANDING	
TE	CACHERS IN THE DALLAS/FORT WORTH AREA WITH ANNUAL GRANTS.	
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4b (C		
	XAS RANGERS BASEBALL FOUNDATION CONDUCTS CHARITABLE ACTIVITIES	
	N THE DALLAS/FORT WORTH AREA, INCLUDING SEVERAL YOUTH PROGRAMS	
	HAT PROVIDE HEALTH, WELLNESS, AND EXCERCISE EDUCATION, AS WELL AS	
_	HE PROVISION OF RANGERS BASEBALL GAME TICKETS TO UNDERPRIVILEGED	
<u>C</u> 1	HILDREN.	
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4- 10	odo \/Emperod (Figure 1)	
4c (C	ode) (Expenses \$ including grants of \$) (Revenue \$)	
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	ther program services (Describe in Schedule O)	
	xpenses \$ including grants of \$) (Revenue \$)	
4e 10	otal program service expenses ► 1,418,682.	

	90 (2014)	·	<u> </u>	Page 3
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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	1		
	election in effect 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,	_		Ι,,
^	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			i
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	}		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			V
	complete Schedule D, Part VI	11a		X
D	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		Х
_	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			.,
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	144		
U	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	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part I	V Checklist of Required Schedules (continued)			
			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 "Yes," 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 2º If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Χ
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 "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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 "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	!		
	If "Yes," complete Schedule L, Part I	25b		Х
26	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		į	
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial 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		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 "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		1	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," 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 "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		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	Х	
35 a	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 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? 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? Note. All Form 990 filers are required to complete Schedule O	38	X	l
		Form	990	(2014)

Form	990 (2014)		F	Page 5
Pai	tV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .	<u> </u>	. X
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	-1 1		1
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			ĺ
	reportable gaming (gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ŀ	ì
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 2			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			١
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4 a	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	_	l	v
h	account)?	4a		X
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5.2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	Ť	X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1	-
	and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_ <u>X</u> _
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	<u>X</u>
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	\longrightarrow	
0	Sponsoring organizations maintaining donor advised funds Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	Ì	
9	Sponsoring organizations maintaining donor advised funds.	°		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring 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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter]		
а	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	
	against amounts due or received from them)]		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]	1 1	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	 		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		-	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans		1	
C	Enter the amount of reserves on hand	4.		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u> _
ISA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	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 12	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
2	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			
3	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		Х
4	· · · · · · · · · · · · · · · · · · ·	5		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	6		X
6				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Х
		, a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		Х
	stockholders, or persons other than the governing body?	7.5		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1		
	the year by the following		Х	
a	The governing body?	8a 8b	Λ	X
b	Each committee with authority to act on behalf of the governing body?	00		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue		s)	···
Secu	on b. Policies (This Section & requests information about policies not required by the internal Nevenue	COU	Yes	No
	D. I. I	10a		X
10a	Did the organization have local chapters, branches, or affiliates?	IVa		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	110		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a		Х
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	120		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b		
	rise to conflicts?	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c		
4.0	describe in Schedule O how this was done	13		Х
13	Did the organization have a written whistleblower policy?	14		X
14	Did the organization have a written document retention and destruction policy?			
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a		Х
	The organization's CEO, Executive Director, or top management official			X
р	Other officers or key employees of the organization	15b		
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		Х
	with a taxable entity during the year?	104		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	-		
	organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure	1100		
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			
10	available for public inspection. Indicate how you made these available. Check all that apply	301(-)(3)5	Offig)
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	nolics	/ and
. 5	financial statements available to the public during the tax year	CICOL	ریانی	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and record	is >		
	STARR GULLEDGE 1000 BALLPARK WAY STE 400 ARLINGTON, TX 76011 817-273-5254	-		

JSA 4E1042 1 000

Part VII	Compensation of Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contractors								
	Check if Schedule O contains	a resnonse	or note to	anv lii	ne in this Part	VII			

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if neither the organization nor	any related	orga	nıza	tion	col	npen	sate	ed any current offic	er, director, or trus	stee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r box,	not cl unles	Pos neck ss pe	c) ition more	than or/trust ethor/trust employee	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)JAMES H. SUNDBERG	10.00									
PRESIDENT- THROUGH 06/2014	30.00	Х		Х				C	0	0
(2)KELLIE L. FISCHER	10.00									
TREASURER	30.00	Х	<u> </u>	Χ		<u></u>	<u> </u>	C	0	0
(3)NEIL LEIBMAN	5.00		ł							
CHAIRMAN- 07/2014 FORWARD	10.00	Х		Х				C	0	0
(4) DEREK HOLLAND	1.00									
BOARD MEMBER- 11/2014 FORWARD	39.00	Х				l		ļ c	0	0
(5)MICHAEL YOUNG	1.00									
BOARD MEMBER- 11/2014 FORWARD	39.00	X						[c	0	0
(6)CRISTINA BARBOSA	1.00									
BOARD MEMBER- 11/2014 FORWARD	0	X						C	0	0
(7)BOB INNAMORATI	1.00	1								
BOARD MEMBER-THROUGH 6/2014	8.00] x					1	C	0	0
(8)JOHN C. BLAKE	10.00									
BOARD MEMBER	30.00	1 x						() 0	0
(9)JONATHAN H. DANIELS	5.00									
BOARD MEMBER	35.00	Х					ļ		0	0
(10)GARY COLEMAN	1.00									
BOARD MEMBER	39.00	Х						() 0	0
(11)LAURI GREER	1.00									
BOARD MEMBER	39.00	Х							0	0
(12)ROB MATWICK	5.00									
BOARD MEMBER	35.00	X							0	<u> </u>
(13) TAUNEE PAUR TAYLOR	10.00									
BOARD MEMBER	30.00								0	0
(14)THAD LEVINE	5.00				Γ	Ī	T			
BOARD MEMBER	40.00	У.	<u>L.</u>	<u>L.</u>	<u> </u>	<u></u>			00	0

an	6	8
au	C	·

(A) Name and title	Average hours per week (list any hours for related organizations below dotted	burs per (do not check more than one box, unless person is both an officer and a director/trustee) the compensation compensation related						Reportable compensation fro	other compensati		of tion e on ed	
	imej	trustee	al trustee		yee	Highest compensated employee					,	
15) KATE JETT CASSIDY	1.00											
SECRETARY	39.00			Х	_			0		0		0
					-							
			-									
		 								+		
	+											
												<u></u>
	+											
					<u> </u>							
1b Sub-total	Section A ,	 	 	 		 <u></u>	> >	C C		0 0 0		C C
2 Total number of individuals (including but not reportable compensation from the organization)			liste 0	d a	bov	e) wh	o re	eceived more than	\$100,000 of			
3 Did the organization list any former offi employee on line 1a? If "Yes," complete Scheo	cer, directo	or, or	r tru	uste	e,	key e	emp	oloyee, or highes	t compensated	3	Yes	No X
For any individual listed on line 1a, is the organization and related organizations g	sum of re	oortal	ole d	com	per	nsatio	n a	nd other compens	sation from the			
ındıvıdual										4	-	Х
5 Did any person listed on line 1a receive of for services rendered to the organization? If "										5	<u> </u>	X
Complete this table for your five highest cor compensation from the organization Report year	npensated compensat	ndep ion fo	ende r the	ent e ca	con	tracto dar ye	ors t	that received more ending with or with	than \$100,000 nin the organiza) of tion's ta	×	
(A) Name and business ac	ddress					•		(B) Description of se	ervices	(Compe		
NONE			•				+					
							+					
							+					

75-2404714 Page **9**

Pai	rt VII					
		Check if Schedule O contains a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b				
fts, r An	С	Fundraising events 1c 1,236,33	24		}	
ig G	d	Related organizations 1d				
Sin	е	Government grants (contributions). 1e				
he ti	f	All other contributions, gifts, grants,				
풀혀		and similar amounts not included above . 1f 1,446,4				
Cor	g	Noncash contributions included in lines 1a-1f \$ 939,70				
	h	Total Add lines 1a-1f			<u> </u>	
Program Service Revenue		Busiless Co	local control of the			
ě	2a					
ï.	b					
ě	ء ا					
E	ľ				 	
gra	,	All other program service revenue				
Pro	'g	Total. Add lines 2a-2f	> 0			
	3	Investment income (including dividends, interest				
	-	and other similar amounts)	. I			
	4	Income from investment of tax-exempt bond proceeds . I	. 1	-		
	5	Royalties				
		(i) Real (ii) Persona				
	6a	Gross rents				
	ь	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)	0			
	7a	Gross amount from sales of (i) Securities (ii) Other				j
		assets other than inventory				
	ь	Less cost or other basis				
		and sales expenses				
	С	Gain or (loss)				
	d	Net gain or (loss)	> 0			
ne	8a	Gross income from fundraising				
eu		events (not including \$1,236,324				}
ě		of contributions reported on line 1c)				1
<u>.</u>		See Part IV, line 18	28			
Other Revenu	b	Less direct expenses b 653,10				†
Ó	С	Net income or (loss) from fundraising events	-617,974			-617,974
	9a	Gross income from gaming activities				1
		See Part IV, line 19	_			
	b	Less direct expenses	; ;			1
	40-		0			
	10a	Gross sales of inventory, less returns and allowances				
	ь	Less cost of goods sold b				1
	٥	Net income or (loss) from sales of inventory	0		İ	1
		Miscellaneous Revenue Business Co				
	11a	SALES TAY DISCOUNTS 900099	€4			64
	ь					
	_ c					
	d	All other revenue				
	e	Total Add lines 11a-11d	64			
	12	Total revenue. See instructions	2,064,831			-617,910

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21	576,402.	576,402.									
2	Grants and other assistance to domestic											
	individuals See Part IV, line 22	338,774.	338,774.									
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals See Part IV, lines 15 and 16	20,000.	20,000.									
4	Benefits paid to or for members	O_										
5	Compensation of current officers, directors,											
	trustees, and key employees	0										
6	Compensation not included above, to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)	0										
7	Other salaries and wages	140,220.	56,088.	21,033.	63,099.							
8	Pension plan accruals and contributions (include											
	section 401(k) and 403(b) employer contributions)	<u> </u>										
9	Other employee benefits	18,481.	5,544.	2,772.	10,165.							
10	Payroli taxes	11,213.	3,364.	1,682.	6,167.							
11	Fees for services (non-employees)											
а	Management ,	0										
b	Legal	<u> </u>										
c	Accounting	18,448.		18,448.								
d	Lobbying	68,319.		68,319.								
	Professional fundraising services See Part IV, line 17,	0										
1	Investment management fees	O O										
Q	Other (If line 11g amount exceeds 10% of line 25, column											
	(A) amount, list line 11g expenses on Schedule O)	0		2.562								
12	Advertising and promotion	3,563.	0.050	3,563.								
13	Office expenses , ,	12,882.	2,950.	9,932.								
14	Information technology	0										
15	Royalties	<u> </u>										
16	Occupancy	12 420		12 420								
17	Travel	13,429.		13,429.								
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials	0										
19	Conferences, conventions, and meetings	0										
20	Interest	0										
21	Payments to affiliates	0										
22	Depreciation, depletion, and amortization	<u> </u>										
23	Insurance	<u> </u>										
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)											
	,	142,495.	91,147.		51,348.							
	JUST KEEP LIVIN'	114,985.	114,985.		J1, J40.							
	GRANTS PROGRAM EXPENSES	64,821.	64,821.									
	SPECIAL PROJECTS	58,644.	58,644.									
	MLB RBI WORLD SERIES	93,452.	85,963.	7,471.	18.							
	All other expenses Add loss 1 through 34e	1,696,128.	1,418,682.	146,649.	130,797.							
	Total functional expenses Add lines 1 through 24e Joint costs Complete this line only if the	1,090,120.	1,310,002.	140,040.	130,131.							
_0	organization reported in column (B) joint costs											
	from a combined educational campaign and fundraising solicitation Check here]										
	following SOP 98-2 (ASC 958-720)	d										
JSA		<u> </u>			Form 990 (2014)							

JSA 4E 1052 1 000

Pa	rt X				
		Check if Schedule O contains a response or note to any line in this Pa	rt X		<u>,,</u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	3,106,304.	1	3,492,591.
	2	Savings and temporary cash investments	0	2	(
	3	Pledges and grants receivable, net	0	3	(
	4	Accounts receivable, net	9,957.	4	33,858.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	0	5	(
Assets	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 employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	O	6	(
	7	Notes and loans receivable, net	0	7	(
	8	Inventories for sale or use	0	8	(
	9	Prepaid expenses and deferred charges	5,443.	9	27,432.
	10 a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a			
	ь	Less accumulated depreciation	0	10c	C
	11	Investments - publicly traded securities	0	11	C
	12	Investments - other securities See Part IV, line 11	0	12	(
	13	Investments - program-related See Part IV, line 11	0	13	(
	14	Intangible assets	0	14	(
	15	Other assets See Part IV, line 11	0	15	(
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,121,704.	16	3,553,881.
	17	Accounts payable and accrued expenses	30,888.	17	94,362.
	18	Grants payable	0	18	(
	19	Deferred revenue	0	19	(
	20	Tax-exempt bond liabilities	C		(
ŝ	21	Escrow or custodial account liability Complete Part IV of Schedule D	C	21	(
≝	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
=		disqualified persons Complete Part II of Schedule L	C	22	(
	23	Secured mortgages and notes payable to unrelated third parties	C	23	(
	24	Unsecured notes and loans payable to unrelated third parties	C	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	C	1 1	(
	26	Total liabilities. Add lines 17 through 25	30,888.	26	94,362.
es		Organizations that follow SFAS 117 (ASC 958), check here ▶			
auc	27	Unrestricted net assets		27	
Bai	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here X and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds	(30	(
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	(31	(
Ä	32	Retained earnings, endowment, accumulated income, or other funds	3,090,816.	32	3,459,519.
Net	33	Total net assets or fund balances	3,090,816.	33	3,459,519.
	34	Total liabilities and net assets/fund balances	3,121,704.	34	3,553,881.

TEXAS RANGERS BASEBALL FOUNDATION

Form 99	90 (2014)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,0	64,8	331.
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,6	96,1	128.
3	Revenue less expenses Subtract line 2 from line 1	3		3	68,	703.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,0	90,8	316.
5	Net unrealized gains (losses) on investments	5			_	0
6	Donated services and use of facilities	6	·			0
7	Investment expenses	7		_		0
8	Prior period adjustments	8	-			0
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		3,4	59,5	519.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
-					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		Γ			
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaır	ıın			
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	or			
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audi					
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	aht			
·	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c		
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O	··		ļ		
3 =	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	ın İ			
Ja	the Single Audit Act and OMB Circular A-133?			3a		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	lerao	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits		3b		

SCHEDULE A (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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Employer identification number Name of the organization 75-2404714 TEXAS RANGERS BASEBALL FOUNDATION 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 4 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). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 1.70(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B Type II A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C Type III functionally integrated A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization g Provide the following information about the supported organization(s) (vi) Amount of (i) Name of supported organization (iii) Type of organization (IV) Is the organization (v) Amount of monetary (described on lines 1-9) isted in your governing support (see other support (see above or IRC section document? instructions) instructions) (see instructions)) Yes Nο (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2014

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Part II

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,059,307	2,317,636	2,150,029	2,623,408	2,682,741	10,833,121
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total Add lines 1 through 3	1,059,307	2,317,636	2,150,029	2,623,406	2,682,741	10,833,121
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)						0
6	Public support. Subtract line 5 from line 4						10,833,121
	tion B. Total Support					1	
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	1,059,307	2,317,636	2,150,029	2,623,408	2,682,741	10,833,121
	sources	5,129	5,048	3,839	1,244		15,260
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) . ATCH. 1		207	106	89	6.4	466
11	Total support. Add lines 7 through 10						10,848,847
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years If the Form 990 is f organization, check this box and stop here						
Sec	tion C. Computation of Public Sup			.		1 1	22.26
14	Public support percentage for 2014 (In	ine 6, column (f) divided by line	11, column (f))		14	99.86% 90.26%
15	Public support percentage from 2013	Schedule A, Pa	art II, line 14			15	
16a	33 1/3 % support test - 2014. If the c						
	this box and stop here. The organizati	•		-			• •
D	33 1/3 % support test - 2013. If the check this box and stop here. The org						
170	10%-facts-and-circumstances test						
174	10% or more, and if the organization						
	Part VI how the organization meets						
	organization			=			>
b	10%-facts-and-circumstances test -						and line
_	15 is 10% or more, and if the org						
	Explain in Part VI how the organizat						
	supported organization						
18	Private foundation. If the organization						
	instructions	. <u></u>	<u></u> . <i></i> .	<u></u>	<u> </u>	<u> </u>	▶ □
						Schedule A (Form 9	

Part III	Support Schedule for	Organizations	Described in Section	509(a)(2
7 EU C IIII	oupport ochequie for	Organizations	Described in Occuon	

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

Sec	tion A. Public Support			,	·			
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and membership fees							
	received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise	İ						
	sold or services performed, or facilities							
	furnished in any activity that is related to the	:						
	organization's tax-exempt purpose							
3	Gross receipts from activities that are not an							
	unrelated trade or business under section 513							
4	Tax revenues levied for the	1						
	organization's benefit and either paid	ı						
	to or expended on its behalf							
5	The value of services or facilities	ı						
	furnished by a governmental unit to the	ı						
	organization without charge							
6	Total Add lines 1 through 5							
7 a	Amounts included on lines 1, 2, and 3	i]			
	received from disqualified persons							
b	Amounts included on lines 2 and 3							
	received from other than disqualified persons that exceed the greater of \$5,000							
	or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from		:					
	line 6)	<u> </u>			<u></u>			
Sec	tion B. Total Support					_		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
	Amounts from line 6							
10 a	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				ļ			
	acquired after June 30, 1975							
С	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 VI)				<u></u>			
13	Total support. (Add lines 9, 10c, 11,					T		
	and 12)					<u> </u>		
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year	as a section 501	(c)(3)	
	organization, check this box and stop here		<i></i>			<u> </u>	▶ 🔲	
Sec	tion C. Computation of Public Sur	port Percent	age					
15	Public support percentage for 2014 (line 8	, column (f) divid	led by line 13, colu	mn (f))	. .	15	%	
16	Public support percentage from 2013 Scho	edule A, Part III, li	ne 15	<u> </u>		16	%	
Sec	tion D. Computation of Investme	nt Income Per	rcentage					
17	Investment income percentage for 2014 (I	ine 10c, column	(f) divided by line	13, column (f))		17	%	
18	Investment income percentage from 2013	Schedule A, Parl	t III, line 17			18	%	
19 a	33 1/3 % support tests - 2014 If the or					re than 331/3 %,	and line	
	17 is not more than 331/3%, check th							
b	33 1/3 % support tests - 2013. If the org							
	line 18 is not more than 331/3%, check	this box and s	stop here. The o	rganization qualif	ies as a publicly	supported organ	ization 🕨 🔲	
20	Private foundation If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
с 6	Substitutions only Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990)	8		-
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	}		1

10b

determine whether the organization had excess business holdings)

JSA 4E1230 2 000 Schedule A (Form 990 or 990-EZ) 2014

2b

3а

Parent of Supported Organizations Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	S	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov 20, 1970 See in	structions. All
other Type III non-functionally integrated supporting organizations must co			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		-
b Average monthly cash balances	1b		1
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6	· · · · · · · · · · · · · · · · · · ·	
7 Recoveries of prior-year distributions	7	· · · · · · · · · · · · · · · · · · ·	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		***
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	lv-integra	ted Type III supporting	organization (see
instructions)	, 5		

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014

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Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organization	tions (continued)				
Sect	on D - Distributions			Current Year			
1_	Amounts paid to supported organizations to accomplish e	xempt purposes					
2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo						
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6						
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI) See instructions						
9	Distributable amount for 2014 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
;	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2014						
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2014						
а							
b							
С							
d							
е	From 2013						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2014 distributable amount						
i	Carryover from 2009 not applied (see instructions)						
j	Remainder Subtract lines 3g, 3h, and 3i from 3f						
4	Distributions for 2014 from Section						
	D, line 7 \$						
а	Applied to underdistributions of prior years						
	Applied to 2014 distributable amount						
С	Remainder Subtract lines 4a and 4b from 4						
5	Remaining underdistributions for years prior to 2014, if						
	any Subtract lines 3g and 4a from line 2 (if amount		:				
	greater than zero, see instructions)						
6	Remaining underdistributions for 2014 Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see						
	instructions)						
7	Excess distributions carryover to 2015 Add lines 3j						
	and 4c						
8	Breakdown of line 7						
а							
b							
С							
d	Excess from 2013						
е	Excess from 2014						
			0.1.1.1	A /5 000 000 TT 000			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014

Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information. (See instructions)

SCHEDULE A, PART II -	AT	TACHMENT 1				
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
SALES TAX DISCOUNTS		207	106	89	64.	466
TOTALS			106	89_	64	466

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

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

If the organization answered "Yes," to 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

► Complete if the organization is described below

Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to 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 Part II-B.

lf th	` , ` , ` ,	to Form 990, Part IV, line 5 (Pro		,,	· · · · · · · · · · · · · · · · · ·
Tax)	(see separate instructions), their	1	ny runy (see separate r	modulations, or rotting and a	LL, Full V, Illic GGC (Flox)
	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III	·		
Nam	e of organization			Employer ide	ntification number
	AS RANGERS BASEBALL			75-24	
Pai		organization is exempt unde			nization.
1	•	organization's direct and indirec			
2	Political expenditures			▶ \$	
3	Volunteer hours				
Par	t I-B Complete if the c	organization is exempt unde	r section 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organiza	tion under section 495	55 ▶ \$	
2		ise tax incurred by organization			
3	If the organization incurred a	a section 4955 tax, did it file For	m 4720 for this year?		. Yes No
4a	Was a correction made?				. Yes No
b	If "Yes," describe in Part IV				
Pai	t I-C Complete if the c	rganization is exempt unde	er section 501(c), e	xcept section 501(c)(3	3).
1	Enter the amount directly e	xpended by the filing organizat	ion for section 527 e	exempt function	
	activities				
2		ng organization's funds contribut			
		es			·
3		enditures Add lines 1 and 2			
5	Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification nur s. For each organization listed, ributions received that were produced or a political action committee.	nber (EIN) of all secti enter the amount pai omptly and directly de	on 527 political organiza d from the filing organiz elivered to a separate po	ations to which the filing cation's funds. Also enter plitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's 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			<u> </u>

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

Schedule C (Form 990 or 990-EZ) 2014

CODDYING Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total					
2a Lobbying nontaxable 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										

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).		u rui	·III 5/			
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(;	a)		(b)	
	cription of the lobbying activity	Yes	No		Am	ount	
1	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			l			
a	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X				
b			X	ĺ			
C	Media advertisements?		X	 			
d	Mailings to members, legislators, or the public?		X				
e f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?	-	X				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X				68	,319
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X				, 5 = 5
i	Other activities?		Х				
i	Total Add lines 1c through 1i					68	,319
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	. i	Х				
b	If "Yes," enter the amount of any tax incurred under section 4912						
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Χ				
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectio	n		
	301(3)(3).					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? till-B Complete if the organization is exempt under section 501(c)(4), section 501					<u> </u>	<u> </u>
1 2	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts)			1			·
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
C	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	oppyir	ng				
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			5			
_	Supplemental Information	· · ·	• • • •				
Prov 2 (se	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliate e instructions), and Part II-B, line 1. Also, complete this part for any additional information. PAGE 4	d grou	up list), Part	II-A,	lines	1 and
							

Schedule C (Form 990 or 990-EZ) 2014

Page 4

Part IV Supplemental Information (continued)

PART VII-B, QUESTION 1G

THE LOBBYING EXPENSES INCURRED WERE TO CHANGE THE TEXAS STATE CONSTITUION AND RAFFLE AMMENDMENTS SO THAT TEXAS RANGERS BASEBALL FOUNDATION (AND THE OTHER 9 SPORT TEAM FOUNDATIONS IN TEXAS) CAN OPERATE RAFFLES AS FUNDRAISERS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

THE OF THE OF GRADE				Employer identifica	
TEXAS RANGERS BASEBALL FO	UNDATION			75-240471	1
Part I General Information Form 990, Part IV, line 1		Outside the U	Jnited States. Complete	if the organization answe	ered "Yes" on
1 For grantmakers. Does the organs assistance, the grantees' eligibility grants or assistance?	ity for the gran	ts or assistance	e, and the selection criteri	a used to award the	X Yes No
2 For grantmakers. Describe in assistance outside the United St	ates		_		and other
3 Activities per Region (The follow (a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) NORTH AMERICA			GRANTMAKING		20,000
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)				t	
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total b Total from continuation sheets to Part I					20,000

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

Totals (add lines 3a and 3b)

Schedule F (Form 990) 2014

20,000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	ved more than \$5,000	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM' appraisal other)
)			NOPTH AMERICA	GENEPAL SUPP	20,000	WIPE THSFP			
2)									
)									,
<u></u>									
5)									
5)									
<u>'</u>									
)									
9)							· · · · · · · · · · · · · · · · · · ·		
0)	W-10		,						
1)									
2)									
13)									
4)	1								
15)	···········								
16)									
2 Ente	r total number of recipien	it organizations listed abo	ove that are recognized	as charities by the f	oreign country, re	cognized as tax	-exempt		0
by th 3 Ente	ne IRS, or for which the grant total number of other or	antee or counsel has pro	vided a section 501(c)(3	3) equivalency letter					- <u>0</u> 1
- Line	. Total humber of other of	gamzanona or critices,	········		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·		Schedule F	

	Part III can be duplicated if add	T T T T T T T T T T T T T T T T T T T	-		(e) Manner of	(f) Amount of	(g) Description	(h) Method of
	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(n) Method of valuation (book, FMV appraisal, other)
(1)								
(2)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
(3)								
(4)	¬							
(5)								
(6)					ļ			
(7)								·
(8)								
(9)				<u> </u>				
10)								
11)								
12)								
13)								
14)								
	·							
17)								

Schedule F (Form 990) 2014

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Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Ye	s No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Ye	s X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Ye	s X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Ye	s X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Ye	s X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Ye	s X No

Schedule F (Form 990) 2014

Schedule F (Form 990) 20

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable Also complete this part to provide any additional information (see instructions)

SCHEDULE F, PART I, LINE 2

DESCRIPTION OF PROCEDURES FOR MONITORING GRANTS

AS PART OF THEIR CHARITABLE PURPOSE, THE TEXAS RANGERS BASEBALL FOUNDATION MAKES GRANTS TO OTHER PUBLIC CHARITABLE ORGANIZATIONS. GRANTS TO PUBLIC CHARITIES ARE BASED UPON WHETHER OR NOT THEY ARE HELPING YOUTH OR HAVING A POSTIIVE IMPACT ON YOUTH THROUGH THEIR PROGRAMS. GRANTS OF \$5,000 OR LESS ARE APPROVED BY THE PRESDIENT OF THE FOUNDATION. FOR THOSE GRANTS THAT ARE OVER \$5,000, OR GRANTS THAT ARE SIGNIFICANT IN NATURE, APPROVAL IS REQUIRED FROM BOTH THE PRESIDENT AND THE TREASURER.

SCHEDULE G

Internal Revenue Service

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the	organization					Employer identification	on number
TEXAS R	RANGERS BASEBALL FOUNDA					75-2404714	
Part I	Fundraising Activities. Con Form 990-EZ filers are not				"Yes" to Form 9	90, Part IV, line	17
1 Indi	cate whether the organization rai	sed funds through	any of the	following	activities Check a	all that apply	
a	Mail solicitations	е	Solid	itation of i	non-government g	rants	
ь	Internet and email solicitations	f	1 1		government grants	5	
c	Phone solicitations	g	☐ Spe	cial fundra	ising events		
d []	In-person solicitations						
ork b If "Y	the organization have a written of ey employees listed in Form 990 (es," list the ten highest paid and apensated at least \$5,000 by the	, Part VII) or entity ividuals or entities	in connec	tion with p	rofessional fundra	ising services?	Yes No fundraiser is to be
(1)	Name and address of individual or entity (fundraiser)	(II) Activity	custody o	draiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (l)	(vi) Amount paid to (or retained by) organization
		-	Yes	No		, , , , , , , , , , , , , , , , , , ,	
1							
2							
3					· •		
4							7,
5							
6							
7							
8							
9			 		······································		
10							
Total		J			· · · · · · · · · · · · · · · · · · ·		
3 List	all states in which the organiza stration or licensing				contributions or	has been notified	it is exempt from

		·					
	· · · · · · · · · · · · · · · · · · ·		•				
							
		· · · · · · · · · · · · · · · · · · ·					

Schedule G	(Form 990 or 990-EZ) 2014				P
Part II	Fundraising Events. Complete than \$15,000 of fundraising every gross receipts greater than \$5	vent contributions and g			
		(a) Event #1 TRIPLE PLAY	(b) Event #2 GOLF CLASSIC	(c) Other events	(d) Total events (add col (a) throu

		gross receipts greater than 40,00	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		•	TRIPLE PLAY	GOLF CLASSIC	6.	(add col (a) through
a)			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	661,722.	160,000.	449,730.	1,271,452.
1		Less Contributions	670,844.	160,000.	405,480.	1,236,324.
	3	Gross income (line 1 minus line 2)	-9,122.		44,250.	35,128.
	4	Cash prizes	-			
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
t Exp	7	Food and beverages	45,000.			45,000.
Dire(8	Entertainment				
	9	Other direct expenses	278,097.	73,725.	256,280.	608,102.
	10	Direct expense summary Add lines 4	through 9 in column (d)		.	653,102.
	11	Net income summary Subtract line 1	0 from line 3, column (d)	· · · · · · · · · · · · · · · · · · ·		-617,974.
Pa	rt il	Gaming. Complete if the orga	anization answered "Y			
		than \$15,000 on Form 990-E	Z, line 6a			
nue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue						
<u></u>	1	Gross revenue				
ses	2	Cash prizes	V.V. (
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
_	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary Add lines 2	through 5 in column (d)			
	8	Net gaming income summary Subtra	act line 7 from line 1, coli	umn (d)	.	
	Ť	<u> </u>		····· (-/		
9		nter the state(s) in which the organizat				
		the organization licensed to conduct g "No," explain	jaming activities in each			Yes No
	_					· · · · · · · · · · · · · · · · · · ·
		ere any of the organization's gaming I "Yes," explain	icenses revoked, suspe			Yes No
	_					

Sched	dule G (Form 990 or 990-EZ) 2014		Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		
	formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in		
а	The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ►		
	Address ▶		
15 a	Does the organization have a contract with a third party from whom the organization receives gaming	<u></u>	_
	revenue?	Yes _	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		
_	amount of gaming revenue retained by the third party ► \$		
С	If "Yes," enter name and address of the third party		
	Name ▶		
	Address ▶		
16	Gaming manager information		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а			
	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations		
	or spent in the organization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional informations (see instructions)		

Schedule G (Form 990 or 990-EZ) 2014

SCHEDULE I (Form 990)

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

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

Attach to Form 990

formation about Schedule I (Form 990) and its instructions is at www.irs.gov/form

2014

OMB No 1545-0047

Department of the Treasury

Open to Public

Internal Revenue Service Informa	tion about Si	chequie i (Form	1 990) and its insti	uctions is at wwi	w irs gov/rorm990		mspection
Name of the organization						Employer identificat	oon number
TEXAS RANGERS BASEBALL FOUNDATION						75-2404714	4
Part I General Information on Grants and	d Assistanc	е					
Does the organization maintain records to si the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D	s or assistanc tures for mor	e?	of grant funds in the	United States			X Yes No
Part IV, line 21, for any recipient the	nat received	more than \$5	,000 Part II can I	be duplicated if a		needed	
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 assastance	(book FMV appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JOPDAN CASEY WPIGHT FOUNDATION 1076 COUNTRY RD 1035, GPEENVILLE, TY 75401	46-5762797	501 (C) (3)	10,000				GENEPAL SUPPORT
(2) DALLAS YOUTH ATHLETIC ASSOCIATION 1625 S TYLER ST, DALLAS, TY 75224	80-0848707	501 (C) (3)	10,000				GENERAL SUPPOPT
(3) JEWISH COMMUNITY CENTER OF DALLAS 7900 NOPTHHAVEN RD, DALLAS, TX 75230		501(C)(3)	10,000				JCC MACCABI GAMES
(4) CHINA SPRING ATHLETIC ASSOCIATION PO BOX 309, CHINA SPPING, TY 76633		501 (C) (3)	10,920				
(5) PROJECT 938, INC	74-2200429	301 (C) (3)	10,920				GENEPAL SUPPORT
5273 CHESSIE CIPLCE, HALTOM CITY, TY 76137	20-5116721	501 (C) (3)	10,000			<u> </u>	GENERAL SUPPOPT
(6) KAPLAN YOUTH ATHLETIC ASSOCIATION INC	27-0673145	F01 401 401					FAST PITCH
PO BOX 524, NAPLAN, TY 70548 (7) BAJED BASEBALL INCOPPORATED	27-06/3145	1501 (C) (3)	10,000				SOFTBALL FIELD
100 W 4TH ST, STE 202, BAIRD, TX 79504	38-3694685	501 (C) (3)	7,500				OVERHAUL BASEBALL Fleld
(8) LONGVIEW PAPAS & LEISUPE SEPVICES	_						
PO BOX 9938, LONGVIEW, T/ 75608	75-2645064	501 (C) (3)	10,000			L	MIRACLE LEAGUE FIEL
(9) THE FOR CITY NETWORF	Ţ						JP RBI
P1033 LAPOSADA DP, STE 210, AUSTIN, TX 78752	80-0329998	501 (C) (3)	10,000			<u> </u>	PROGRAM
(10) MC'INNEY LITTLE LEAUGE							
5100 ELDORADO PFY, #012291, MCKINNEY, TX 75070	75-2723052	501 (C) (3)	10,000				GENERAL SUPPOPT
(11) BOBBY BRAGAN YOUTH FOUNDAION	_						
3116 W 6TH ST, # 200, FOPT WOPTH, TX 76107	75-2404628	501 (C) (3)	5,350			<u> </u>	GENEPAL SUPPOPT
(12) BOYS & GIRLS CLUB OF AMERICA	_					1	
13110 HIGHWAY 290 MEST, AUSTIN, TV 78737	20-1493423	561 (C) (3)	15,000			i	GREAT FUTURES GALA
2 Enter total number of section 501(c)(3) an	•	•				▶	
3 Enter total number of other organizations I	isted in the lii	ne 1 table	<u> </u>			<u> ,,</u> ▶	

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Schedule I (Form 990) (2014)

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SCHEDULE I (Form 990)

Department of the Treasure

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

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

► Attach to Form 990

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

OMB No 1545-0047 2014

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number TEXAS RANGERS BASEBALL FOUNDATION 75-2404714 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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 1 (a) Name and address of organization or government (d) Amount of cash grant (e) Amount of non cash assistance or assistance non-cash assistance (1) PROFESSIONAL BASEBALL SCOUTS FOUNDATION PERFECT GAME SPONSORSHIP 5010 N PKY, STE 201 CALABASAS, CA 91302 48-1294418 501(C)(3) 7,500 (2) JUST KEEP LIVIN FOUNDATION 9777 WILSHIRE, #1018, BEVERLY HILLS, CA 90212 20-3921057 501(C)(3) 10,000 ENERAL SUPPORT (3) CP3 DIABETES ASSOCIATION, INC. 225 N SALEM ST, STE 201 APE>, NC 27502 56-2158365 501(C)(3) 10,000 GENERAL SUPPOPT (4) CITY OF DALLAS - PARKS & RECREATION 5620 PARKDALE, DALLAS, TX 75227 75-6000508 CITY OF DALLAS 30,000 RBI PPOGRAM (5) FWP&R - SPORTS ADVISORY COUNCIL, INC GENERAL SUPPORT 75-2183580 501(C)(3) 40,000 4726 BOAT CLUB PD, FORT WOPTH, TY 76135 (6) MICHAEL YOUNG FAMILY FOUNDATION 1880 CENTURY PARK E, STE 1511, LA, CA 90067 45-2623056 501(C)(3) 10,000 GENERAL SUPPORT (7) ESPERANZA INTERNATIONAL 600-108TH AVE, NE,#1014 BELLEVUE, WA 98004 91-1585511 501(C)(3) 15,000 GENERAL SUPPOPT (8) BY KIDS FOR KIDS, CO 1177 HIGH RIDGE PD, STANFORD, CT 06905 20-0689730 501(C)(3) 25,000 GENERAL SUPFORT PETS FOR (9) OPERATION KINDNESS OF GARLAND 3201 EARNHAFT DP, CARROLLTON, TX 75006 75-1553350 501(C)(3) 7,500 VETS PROGRAM (10) TURN 2 FOUNDATION, INC. 1360 E 9TH ST, STE 1100 CLEVELAND, OH 44114 34-1847687 501(C)(3) NEW CULTURAL (11) KOREAN SOCIETY OF DALLAS 11445 EMERALD ST, STE 111, DALLAS, TX 75229 46-3300784 501(C)(3) ENTER (12) FALLS LAFE ACADEMY, INC. 1701 E LYON STATION PD, CREEDMOOR, NC 27522 46-1167805 501(C)(3) 20.000 GENERAL SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . ▶

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Schedule I (Form 990) (2014)

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SCHEDULE I (Form 990)

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

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

➤ Attach to Form 990

OMB No 1545-0047

2014

Open to Public

Department of the Treasury Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www irs gov/form990						Inspection		
Name of the organization	* *************************************			ero, and no mon		w no govilorimoso	Employer identificat	
-	ASEBALL FOUNDATION						75-240471	
	formation on Grants and	1 Assistanc	Δ			·-····································	75-240471	1
	ation maintain records to si	· · · · · · · · · · · · · · · · · · ·		grants or assista	nce the granteer	' also bilty for the acan	uts or assistance, and	
	na used to award the grant							X Yes No
2 Describe in Part IV	V the organization's proced	lures for mor	utoring the use o	of arant funds in the				
			<u>_</u>	 				
	Other Assistance to De 21, for any recipient the							'es" to Form 990,
	ddress of organization vernment	(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) ROBINSON CHIRINOS	FOUNDATION					İ		
608 NATCHEZ CT, HUI		46-3783185	501 (C) (3)	10,000				GENEPAL SUPPORT
(2) GPANVILLE COUNTY SO								
101 DÉLACROI> ST. 0		56-6001038	GRANVILLE CNT1	20,000			1	GENERAL SUPPORT
(3) COMMUNITY FOOD BANK								
	ORT WORTH, TX 76111	75-1813170	501 (C) (3)	7,500				GENERAL SUPPOPT
	PUTEE SOFTBALL TEAM, INC							
2121 EISENHOWER AVI	E#300, ALEXANDPIA, VA 22314	27-3628041	501 (C) (3)	10,000				GENERAL SUPPORT
(5) BOYS & GIRLS CLUB (OF APLINGTON							
608 N ELM ST, APL		75-1046644	501 (C) (3)	10,000		1		P.BI PPOGRAM
(6) NEWARK HIGH SCHOOL	•							
314 GRANVILLE ST, 1	NEVAPA, OH 43055	54-2195858	CITY OF NEWARK	10,000				GENERAL SUPPORT
(7) STARTLIGHT CHILDPEN	NS FOUNDATION							
2049 CENTURY PARK I	E, #4320 LA, CA 90067	95-3802159	501 (C) (3)	10,000				GENERAL SUPPOPT
(8) WALLACE STATE COMM	UNIT: COLLEGE							BASEBALL PROGRAM
PO BO/ 2000, HANCE	VILLE AL 35077	63-0498828	STATE OF AL	10,000				SUPPORT
(9) DOWN SYNDROME GUILI	D							
PO BOX 821174 LALL	AS, TX 75382	75-108091	501 (C) (3)	10,000				GENERAL SUPPORT
(10) VOGEL ALCOVE FOUND	ATION	_						
1738 GANO ST DALLA	s, TX 75215	46-3970388	501 (C) (3)		5,950	EMV	TICKETS	DONATED TICKETS
(11) WOUNDED WARPIORS P	ROJECT, INC	j						
4899 BELFOPT PD,#	300, JACKSONVILLE, FL 32256	20-2370934	501 (C) (3)	5,490				GENERAL SUPPOPT
(12)			1					
		1						
	per of section 501(c)(3) and						>	33.
3 Enter total numb	er of other organizations l	isted in the lir	ne 1 table				>	2

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

Schedule I (Form 990) (2014)

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Page 2

Schedule I (Form 990) (2014) Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal other)	(f) Description of non-cash assistance
1 TEACHER APPRECIATION GRANTS	137	17,300			
2 COLLEGE TUITION SCHOLARSHIPS	75	119,750			
3 HARDSHIP GRANT FOR MEDICAL EXPENSES	1	23,000			
4 HAPDSHIP GRAFT EDUCATION		178,724			
5					
6					
7					

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

SCHEDULE I, PART I, LINE 2

DESCRIPTION OF PROCEDURES FOR MONITORING GRANTS AS PART OF THEIR CHARITABLE PURPOSE, THE TEXAS RANGERS BASEBALL FOUNDATION MAKES GRANTS TO OTHER PUBLIC CHARITABLE ORGANIZATIONS. GRANTS TO PUBLIC CHARITIES ARE BASED UPON WHETHER OR NOT THEY ARE HELPING YOUTH OR HAVING A POSTIIVE IMPACT ON YOUTH THROUGH THEIR PROGRAMS GRANTS OF \$5,000 OR LESS ARE APPROVED BY THE PRESDIENT OF THE FOUNDATION. FOR THOSE GRANTS THAT ARE OVER \$5,000, OR GRANTS THAT ARE SIGNIFICANT IN NATURE, APPROVAL IS REQUIRED FROM BOTH THE PRESIDENT AND THE TREASURER

Schedule I (Form 990) (2014)

chedule I (Form 990) (2014)						Page 2				
Part III	Grants and Other Assistance to Individ	uals in the U	nited States. Co	mplete if the c	rganization answered	"Yes" on Form 990, Part IV, line 22					
	Part III can be duplicated if additional space is needed										
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(a) Mark ad ad unknown (bank	40 Description of non-onch assistance					

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal other)	(f) Description of non-cash assistance
					
3					
1					
<u> </u>					
8					
,					

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

THE TEACHER APPRECIATION GRANTS ARE GIVEN EACH YEAR TO PRE-SELECTED

DISTRICT AND REGIONAL TEACHERS OF THE YEAR IN THE DALLAS/FORT WORTH AREA

AT THE ANNUAL TEACHER APPRECIATION NIGHT AT THE RANGERS BALLPARK. THE

DISTRICT AND REGIONAL TEACHERS OF THE YEAR ARE SELECTED THROUGH A

SELECTION PROCESS CONDUCTED OUTSIDE OF THE TEXAS RANGERS BASEBALL

FOUNDATION

THE TEXAS RANGERS FOUNDATION REQUIRES EACH SCHOLARSHIP RECIPIENT TO SUBMIT HIS OR HER SCHOOL TRANSCRIPTS AT THE END OF EACH SEMESTER WITH AN ESSAY DESCRIBING THE SEMESTER THE TRANSCRIPT MUST SHOW THAT THE STUDENT

Schedule I (Form 990) (2014)

TEXAS RANGERS BASEBALL FOUNDATION

75-2404714

Schedule I (Form 990) (2014)					Page
Part III	Grants and Other Assistance to Part III can be duplicated if addition	Individuals in the Un nal space is needed	ited States Co	omplete if the c	organization answered "Y	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal other)	(f) Description of non-cash assistance
_1	· · · · · · · · · · · · · · · · · · ·					
2	· · · · · · · · · · · · · · · · · · ·			<u></u>		
_3	·					
4						
5						
_6	==					

Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

IS ENROLLED FULL-TIME WITH 12 OR MORE CREDIT HOURS AND THAT HE OR SHE HAS

EARNED A GRADE POINT AVERAGE OF 3 0 OR BETTER. IF THESE REQUIREMENTS ARE

NOT MET, THE STUDENT IS PUT ON PROBATION AND DOES NOT RECEIVE THE

SCHOLARSHIP FUNDS FOR THE FOLLOWING SEMESTER

Schedule I (Form 990) (2014)

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

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

OMB No 1545-0047 2014

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TEXAS RANGERS BASEBALL FOUNDATION

Employer identification number 75-2404714

Par	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash con			
1	Art - Works of art							
2	Art - Historical treasures						-	
3	Art - Fractional interests							
4	Books and publications					_		
5	Clothing and household							
	goodsi							
6	Cars and other vehicles							
7	Boats and planes	_						
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests		~~~	name				
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other		9-9					
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other				,			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts				·,			
23	Scientific specimens						***	
24 25	Archeological artifacts		163.	936,703.				
25 26	Other ►(ATCH 1)		105.	930,703.				
27	Other ►() Other ►()				····			
28	Other ►()							
29	Number of Forms 8283 received	by the ora:	anization during the tax ve	ear for contributions for	1			
23	which the organization completed F		= -	1	29			
	which the organization completed i	01111 0200,	artiv, bonce Acknowledg	ement			Yes	No
30a	During the year, did the organizat	ion receive	by contribution any propei	rty reported in Part I lines	s 1 through		100	
	28, that it must hold for at least th				_			
	to be used for exempt purposes for					30a		Х
b	If "Yes," describe the arrangement in					V		
31	Does the organization have a		ance policy that require:	s the review of any n	on-standard			
	contributions?					31		Х
32a	Does the organization hire or use	third parti	es or related organizations	s to solicit, process or s	ell noncash			
	contributions?					32a		Х
b	If "Yes," describe in Part II							
33	If the organization did not report ar	amount in	column (c) for a type of pro	perty for which column (a)	is checked.			
	describe in Part II		,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	· · · · · · · · · · · · · · · · · · ·				

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

Schedule M (Form 990) (2014)

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SUPPLEMENTAL INFORMATION 1

WITH REGARD TO THE AUCTION ITEMS REPORTED IN PART I, LINE 25, THE ORGANIZATION IS REPORTING IN COLUMN B THE NUMBER OF CONTRIBUTIONS RECEIVED.

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
AUCTION ITEM	Х	162.	891,703.	FAIR MARKET VALUE
FOOD AND BEVERAGES	Х	1.	45,000.	FAIR MARKET VALUE
TOTALS	_ =	163.	936,703.	

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TEXAS RANGERS BASEBALL FOUNDATION

Employer identification number

75-2404714

GENERAL STATEMENT 1

PART I, LINE 1 - SUMMARY

TEXAS RANGERS BASEBALL FOUNDATION (THE "FOUNDATION") PROVIDES

SCHOLARSHIPS TO DALLAS/FORT WORTH AREA STUDENTS, MAKES GRANTS TO OTHER

CHARITABLE ORGANIZATIONS, AND RECOGNIZES OUTSTANDING TEACHERS IN THE

DALLAS/FORT WORTH AREA WITH ANNUAL GRANTS. THE FOUNDATION ALSO CONDUCTS

SEVERAL YOUTH PROGRAMS TARGETING FITNESS AND EDUCATION, AND PROVIDES

TEXAS RANGERS BASEBALL GAME TICKETS TO UNDERPRIVILEGED CHILDREN.

GENERAL STATEMENT 2

PART V: STATEMENTS REGARDING OTHER IRS FILINGS AND TAX COMPLIANCE PART V:

QUESTION 2A - THE NUMBER OF EMPLOYEES REPORTED IN PART V, LINE 2A IS

NONE. THE SALARIES REFLECTED ON FORM 990, PART IX, LINES 5 AND 7 WERE

ALLOCATED TO THE FOUNDATION BY THE RANGERS BASEBALL EXPRESS AND THEY ARE

REPORTED ON THE FORM W-3, TRANSMITTAL OF WAGE AND TAX STATEMENTS, OF THE

RANGERS BASEBALL EXPRESS. THE FOUNDATION REIMBURSED THE RANGERS BASEBALL

EXPRESS FOR THE SALARIES, AND ALL OTHER EXPENSES INCURRED ON BEHALF OF

THE FOUNDATION.

Employer identification number 75-2404714

GENERAL STATEMENT 3

PART VI: SECTION A. GOVERNING BODY AND MANAGEMENT PART VI: QUESTION 2 THE FOUNDATION IS AWARE OF THE FOLLOWING RELATIONSHIPS BETWEEN THE
ORGANIZATION'S OFFICERS AND DIRECTORS: KELLIE L. FISCHER, AND JONATHAN H.
DANIELS - BUSINESS RELATIONSHIP THESE TWO DIRECTORS ARE ALSO KEY
EXECUTIVES FOR RANGERS BASEBALL EXPRESS, LLC, A RELATED ENTITY.

GENERAL STATEMENT 4

PART VI: SECTION A. GOVERNING BODY AND MANAGEMENT

PART VI: QUESTION 8B - THE TEXAS RANGERS BASEBALL FOUNDATION DOES NOT HAVE COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. THEREFORE, NO DOCUMENTATION OF COMMITTEE MEETINGS WAS REQUIRED.

GENERAL STATEMENT 5

PART VI: SECTION B. POLICIES

PART VI: QUESTION 11A AND 11B - THE ORGANIZATION ENGAGES A PAID PREPARER EXPERIENCED IN THE PREPARATION OF THE FORM 990 TO PREPARE THE FORM. THE FOUNDATION CONTROLLER REVIEWS THE RETURN AS PREPARED BY THE PREPARER. A COPY OF THE RETURN IS THEN MAILED OR EMAILED TO THE BOARD OF DIRECTORS PRIOR TO FILING.

GENERAL STATEMENT 6

PART VI: SECTION C. DISCLOSURE

PART VI: QUESTION 19 - TEXAS RANGERS BASEBALL FOUNDATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST.

TEXAS RANGERS BASEBALL FOUNDATION

75-2404714

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service Name of the organization

TEXAS RANGERS BASEBALL FOUNDATION

Employer identification number 75-2404714

OMB No 1545-0047

Name, addre	(a) ess, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controllin entity
1)						
2)						
3)						
1)						
5)						
9)			1			

(a)
Name address, and EIN of related organization
Primary activity
Primary activity
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Primary activity
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Primary activity
Exempt Code section
Public charity status
(if section 501(c)(3))
Public charity status
(if section 501(c)(3))
Public charity status
(if section 501(c)(3))
Public charity status
(if section 501(c)(3))
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For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule R (Form 990) 2014

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(7)

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Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year (c) Legal domicile (state or foreign (e)
Predominant
income (related
unrelated
excluded from (a) Name address and EIN of (b) Primary activity (d) Direct controlling (i) Code V-UBI amount in box 20 of Schedule K-1 (j) General or managing (f) Share of total (k) Percentage (g) Share of end-of-(h) related organization entity partner (Form 1085) tax under sections 512-514) country) Yes No Yes No (1) RANGERS BASEBALL EX,27-0887998 ARLINGTON, TX 76004 (2) (3) (4) (5) (6) (7) Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Part IV (c) Legal domicie (state or foreig country) (g) Share of end-of-year assets (i) Section 512(b)(13) controlled entity? (a) Name, address and EIN of related organization (b) Primary activity (d) Direct controlling (e) Type of entity (f) Share of total елtity (C corp S corp, or trust) Yes No (1) PANGEPS CLUB TRUST 51-6179200 1100 NOPTH MAPKET ST LILMINGTON, DE 19890 BASEBALL (2) (3) (4) (5) (6)

Schedule R (Form 990) 2014

Page 2

Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form	990, Part IV, line 34, 35b, or 36			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	No
	During the tax year, did the organization engage in any of the following transactions with one or more related organ			Ι	
a R	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			Ι	λ
ьG	Sift, grant, or capital contribution to related organization(s)		1b	I	Х
c G	Sift, grant, or capital contribution from related organization(s)		1c	Ι	Х
d Lo	oans or loan guarantees to or for related organization(s)		1d	Ī	Х
e Lo	oans or loan guarantees by related organization(s)		<u>1e</u>	[X
f D	Dividends from related organization(s)		11	<u> </u>	-
g S	Sale of assets to related organization(s)		<u>1</u> g	J_	Х
h P	Purchase of assets from related organization(s)		1h	Γ_	X
ı E:	Exchange of assets with related organization(s)		11		Х
j Le			11	 	X
k Le	ease of facilities, equipment, or other assets from related organization(s)		. 1k		Х
1 P	Performance of services or membership or fundraising solicitations for related organization(s)		11	Ι	X
m P	Performance of services or membership or fundraising solicitations by related organization(s)		<u>1 m</u>	L	X
n S	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n		X
o S	Sharing of paid employees with related organization(s)		10	II	Х
			_	Π	
рR	Reimbursement paid to related organization(s) for expenses		1p	<u> </u>	X
q R	Reimbursement paid by related organization(s) for expenses		1q		Х
					-
гΟ	Other transfer of cash or property to related organization(s)		<u>1r</u>	L_	×
	Other transfer of cash or property from related organization(s),				Х
_2 If	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line, inclu		n threshol	is	
	(a) (b) Name of related organization Transac type (a	ction Amount involved N	(d) Method of det amount in		ng
<u>(1)</u> _					
(2)					
(3)					
(4)					
<u>(5)</u>					
<u>(6)</u>					
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Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

(a) Name address and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related unrelated excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income			(h) (l) Disproportionate Code V - U altocations? amount in bo of Schedule		(I) General or managing partner?		(k) Percentage ownership	
			sections 512 514)		No		<u> </u>	Yes	No	(Form 1065)	Yes	No		
(1)														
(2)								1						
(3)										, , , , , , , , , , , , , , , , , , , ,				
(4)				\vdash					-	 				
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Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

SCHEDULE R, PART III

LISTED BELOW IS THE COMPLETE NAMES AND STREET ADDRESS FOR PART III:

1) RANGERS BASEBALL EXPRESS, LLC; P.O. BOX 90111