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EXTENDED TO NOVEMBER 16, 2015

Return of Organization Exempt From Income Tax

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

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.lrs.gov/form990. Open to Public Inspection

OMB No 1545-0047

| Α | For the | 2014 calendar year, or tax year beginning and | ending | | |
|---------------|---|--|--------------|---------------------------------------|-------------------------------|
| В | Check if applicable | C Name of organization | | D Employer identific | cation number |
| | Address change | BIG SPRING AREA COMMUNITY FOUNDATION | INC | | |
| | Name change | Doing business as | | 75-2 | 970373 |
| | Initial return | , and the second of the second | Room/suite | E Telephone number | |
| | Final return/ | PO BOX 2007 | | 432- | 263-7676 |
| _ | termin- ated | City or town, state or province, country, and ZIP or foreign postal code | | G Gross receipts \$ | 319,186. |
| Ļ | Amende return | BIG SPRING, IA 19121-2001 | | H(a) is this a group re | |
| L | Applica- tion pending | | | for subordinates | · — — |
| _ | | SAME AS C ABOVE | | H(b) Are all subordinates in | |
| _ | | npt status: X 501(c)(3) | or 527 | 1 | list. (see instructions) |
| _ | | rganization: X Corporation | I Voor | H(c) Group exemption | State of legal domicile: TX |
| _ | art I | Summary | | | |
| ģ | 1 B | riefly describe the organization's mission or most significant activities: RECE | | | |
| Governance | <u>I</u> | OONATIONS TO BE HELD AS ENDOWMENTS THAT | | · · · · · · · · · · · · · · · · · · · | |
| ern | 2 0 | check this box If the organization discontinued its operations or dispose | sed of more | 1 1 | |
| ခွဲ | 3 1 | lumber of voting members of the governing body (Part VI, line 1a) | | 3 | 11 |
| <u>م</u> | 4 1 | lumber of independent voting members of the governing body (Part VI, line 1b) | | 4 | 11 |
| Activities & | 5 7 | otal number of individuals employed in calendar year 2014 (Part V, line 2a) | | 5 | 0 |
| iti. | 6 7 | otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 | | 7a | 0. |
| ĕ | , a | let unrelated business taxable income from Form 990-T, line 34 | . , | 7b | 0. |
| . – | , <u>, , , , , , , , , , , , , , , , , , </u> | Het unitelated business taxable income from 1 orm 330 1, incom | <u> </u> | Prior Year | Current Year |
| 2 | 8 0 | Contributions and grants (Part VIII, line 1h) | | 1,912,853. | 18,325. |
| Revenue | 9 F | Program service revenue (Part VIII, line 2g) | 1 | 0. | 0. |
| e e | 10 1 | nvestment income (Part VIII, column (A), lines 3, 4, and 70), column | | 41,109. | 127,649. |
| , cc | 11 (| Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2015 | 191 <u> </u> | 0. | 0. |
| į | | otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1831 | 1,953,962. | 145,974. |
| , | 13 (| Grants and similar amounts paid (Part IX, column (A), lines (3) | · | 9,834. | 69,704. |
| | | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. |
| ď | 15 8 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | · | 0. | 0. |
| Fxnenses | 16a F | Professional fundraising fees (Part IX, column (A), line 11e) | <u>,</u> ⊢ | 0. | 0. |
| , S | b] | fotal fundraising expenses (Part IX, column (D), line 25) | <u> </u> | 10 004 | 7,550. |
| , – | 11/1 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | - | 10,004. 19,838. | 77,254. |
| | 1 | otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | . - | 1,934,124. | 68,720. |
| 5 | | November 1655 expenses. Cubitact line 10 from time 12 | - Re | ginning of Current Year | End of Year |
| ets | 일 일 20 1 | Fotal assets (Part X, line 16) | <u> </u> | 3,728,705. | 3,777,791. |
| Ass | 21 | Fotal liabilities (Part X, line 26) | | 1,334,533. | 1,350,449. |
| Net Assets or | E 22 I | Net assets or fund balances Subtract line 21 from line 20 | 🗀 | 2,394,172. | 2,427,342. |
| F | Part II | Signature Block | | | |
| | | ties of perjury, I declare that I have examined this return, including accompanying schedule | | | y knowledge and belief, it is |
| tru | e, correct | , and complete. Declaration of preparer (other than officer) is based on all information of w | hich prepare | r has any knowledge. | |
| | | | • | Date Date | · A |
| Si | gn | Signature of Office N | | | |
| H | ere | DREW MOUTON Type or print name and title | | PERSIDAN | <u>'''</u> |
| | | | | Date Check | PTIN |
| Pa | | Print/Type preparer's name JAMES A. WELCH Preparer's signature Common Welle | | 11/12/13 If self-employ | |
| | t | Firm's name LEE, REYNOLDS, WELCH & CO., P.C | | Firm's EIN | 75-1567288 |
| | e Only | Firm's address 417 MAIN ST. | | Tum 3 Ent | .5 250,250 |
| - | | BIG SPRING, TX 79720 | | Phone no. 4 3 | 2-267-5293 |
| M | av the IF | IS discuss this return with the preparer shown above? (see instructions) | | | X Yes No |
| _ | | 7-14 LHA For Paperwork Reduction Act Notice, see the separate instruction | ions. | | Form 990 (2014) |

| | Other program services (Describe in Schedule O.) | - - - - |
|-----|--|------------------|
| | | - - - |
| | | - - - |
| | | _ |
| | | |
| | | _ |
| | | _ |
| | | |
| | | - |
| | | _ |
| 4c | (Code) (Expenses \$ |) |
| | · · · _ · _ · _ · _ · _ · _ · _ | _ |
| | UNITED WAY OF HOWARD COUNTY 1,500 | _ |
| | FOOD FOR KIDS 2,000 | _ |
| | FIRST UNITED METHODIST CHURCH 2,500 | _ |
| | KEEP BIG SPRING BEAUTIFUL 2,500 | _ |
| | HOWARD COUNTY LIBRARY 2,800 | - |
| | HERITAGE MUSEUM 8,250 BIG SPRING MAIN STREET 7,775 | _ |
| | YMCA 10,000 | _ |
| | HANGAR 25 AIR MUSEUM \$10,000 | _ |
| | EXEMPT CIVIC AND RELIGIOUS ORGANIZATIONS: | _ |
| 4b | (Code) (Expenses \$ 47,325. including grants of \$ 47,325.) (Revenue \$ |) |
| | | _ |
| | | _ |
| | ANGELO STATE UNIVERSITY 500 | _ |
| | LUBBOCK CHRISTIAN UNIVERSITY 500 | _ |
| | STRAKE JESUIT COLLEGE 750 | _ |
| | SOUTHWESTERN UNIVERSITY 1,000 | _ |
| | TEXAS A&M UNIVERSITY 1,750 | - |
| | TEXAS TECH UNIVERSITY 3,250 SOUTH PLAINS COLLEGE 2,629 | - |
| | HOWARD COLLEGE \$12,000 | _ |
| | DONATION TO EDUCATIONAL INSTITUTIONS' GENERAL SCHOLARSHIP FUND: | _ |
| 4a | · · · · · · · · · · · · · · · · · · · |) |
| | revenue, if any, for each program service reported. | _ |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. | |
| • | If "Yes," describe these changes on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | , |
| | the prior Form 990 or 990-EZ? |) |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? | |
| | | _ |
| | SPRING AND HOWARD COUNTY AREAS. | _ |
| | WILL PROVIDE CHARITABLE, CULTURAL AND EDUCATIONAL BENEFITS TO THE BIG | _ |
| | RECEIVE GIFTS, BEQUESTS AND DONATIONS TO BE HELD AS ENDOWMENTS THAT | |
| 1 | Check if Schedule O contains a response or note to any line in this Part III | <u>_</u> |
| | t III Statement of Program Service Accomplishments | 1 |
| Par | | <u>-</u> |

| | | | Yes | No |
|----------|---|------|--|--------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | <u>X</u> | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | _3_ | | <u>X</u> |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | dunng the tax year? If "Yes," complete Schedule C, Part II | 4 | | <u> </u> |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | |
| | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | <u>X</u> |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | _ | v | |
| _ | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | X | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | ١ ـ | | v |
| _ | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | ١., | | х |
| 0 | Schedule D, Part III | 8 | | |
| 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 debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | x | |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | ے | | |
| 10 | 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, VIII, 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," complete Schedule D, | | | |
| | Part VI | 11a | | X_ |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | _X_ |
| c | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | 1 |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | <u>X</u> |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes, " complete Schedule D, Part X | 11e | | Х |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | ۱ |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | 40. | | . |
| | Schedule D, Parts XI and XII | 12a | | <u> </u> |
| ā | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 105 | | <u>x</u> |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 120 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | | 1-70 | <u> </u> | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | ļ | | |
| | 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 | | X |
| 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 | | X |
| 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 | 17 | <u> </u> | X |
| 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 | <u> </u> | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | l | ł |
| | complete Schedule G, Part III | 19 | <u> </u> | X |
| | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | ļ | X |
| <u>b</u> | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | <u> </u> |

| Part IV Checklist of Required Schedules (continued | Part | ΙV | Checklist o | f Required Sc | hedules (continued |
|--|------|----|-------------|---------------|--------------------|
|--|------|----|-------------|---------------|--------------------|

| domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 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 | | | | Yes | No |
|--|-----|---|---|--------------|-----------------|
| 22 Lift the organization apport more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 2 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule IS, All The View," complete Schedule IV, If Yes, and the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule IV, If Yes, or to her 25a Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization maritain an escrow account other than a refunding escrow at any time during the year? or the organization are served as any inva-exempt bonds? Did the organization answer that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I Did the organization answer that it engaged in an excess benefit transaction with a disqualified person or a prory year, and that the transaction has not been reported on any of the organization spore or 990-E27 If "Yes," complete Schedule I., Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule II. Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule II. Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employees or disqualified persons? If "Yes," complete Schedule II. Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employees or disqualified persons? If "Yes," complete Schedule II. Part III Did the organization in expert i | 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| Part X, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part NI, Section A, Ine. 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 and the work of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. White Yes of the 125 Control of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. White Yes of the Part III and a returning the year of the december 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. Part II and the organization was an an escrow account other than a returning escrow at any time during the year to defease any tax-exempt bonds? 24b | | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | X | |
| Part X, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part NI, Section A, Ine. 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 and the work of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. White Yes of the 125 Control of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. White Yes of the Part III and a returning the year of the december 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. Part II and the organization was an an escrow account other than a returning escrow at any time during the year to defease any tax-exempt bonds? 24b | 22 | - | | | |
| 23 bit 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 I be 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 | | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | X |
| and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to mee 25a 24b Did the organization invest any proceeds of tax exempt bonds beyond a temporary peniod exception? 24c Did the organization invest any proceeds of tax exempt bonds beyond a temporary peniod exception? 24d Did the organization invest any proceeds of tax exempt bonds outstanding at any time during the year to defease any tax exempt bonds? 24d Did the organization and act as an "on behalf of" issuer for bonde outstanding at any time during the year? 24d Did the organization and act as an "on behalf of" issuer for bonde outstanding at any time during the year? 24d Did the organization and act as an "on behalf of" issuer for bonde outstanding at any time during the year? 24d Did the organization with a disqualified person of uring the year? 24d Did the organization with a disqualified person of uring the year? 24d Did the organization with a disqualified person of uring the year? 24d Did the organization are provided person during the year? 25d 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, griphest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 25d Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantal contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 25d Did the organization receive contributions of art, historical tre | 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | • | | |
| 24a Dit 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization invest as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Section 50(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 b Is the organization aware that the engaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 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, or disqualified persons? If "Yes," complete Schedule L, Part IV or the separation 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 IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of the organiz | | | 1 | | |
| 24a Dit 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization invest as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Section 50(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 b Is the organization aware that the engaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 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, or disqualified persons? If "Yes," complete Schedule L, Part IV or the separation 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 IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of these persons? If "Yes," complete Schedule L, Part IV or any of the organiz | | Schedule J | 23 | | X |
| laat 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 b Old the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrive account other than a refunding escrive at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part II transaction has not been reported on any of the organization with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization is pror Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II and that the transaction has not been reported on any of the organization is pror Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II and 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, indised comployees, or dequalified persons? If "Yes," complete Schedule L, Part IV 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 a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions or the part of the part of the par | 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| Schedule K. If 'No', go to line 25a Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? Did the organization with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I b Is the organization with a disqualified person in a price year, and that the transaction with a disqualified person in a price year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes,' complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II 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 IV instructions for applicable lingling thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV A neithy of which a current for former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Schedule Officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Schedule Contributions? If 'Yes,' complete Schedule L, Part IV Schedule Contributions? If 'Yes,' complete Schedule L, Part IV Schedule Contributions? If 'Yes,' complete Schedule L, Part IV Schedule Contributions? If 'Yes,' co | | | l | | 1 |
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| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a 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? 25a 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-E27 if "Yes," complete Schedule L, Part I 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? if "Yes," complete Schedule L, Part III 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 55% controlled entity or family member of any of these persons? if "Yes," complete Schedule L, Part IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 29 In the analysis of a current or former officer, director, trustee, or key employee? if "Yes," complete Schedule L, Part IV 29 In the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributors? if "Yes," complete Schedule L, Part IV 29 In the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation sections 301.7701.28 missonical to a nentry disregarded as separate from the organization under Regulations sections 301.7701.28 missonical sections 301.7701.28 missonical sections 301.7701.28 missonical sections 301.7701.28 missonical sec | b | | 24b | | |
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| director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c | | | | | |
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| Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 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 | 29 | · | | | |
| contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 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 Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 33 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 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 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 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 | | | | | |
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| Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 | ٠. | | 31 | | × |
| Schedule N, Part II 32 | 32 | , | <u> </u> | | † |
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| Note. All Form 990 filers are required to complete Schedule O | 20 | | 3/ | | ↑ ^ |
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| Form 990 (2014) | BIG SPF | RING AREA | COMMUNITY | FOUNDATION INC | 75-2970373 | Page 5 |
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| | | | | | | |

| rai | Check if Schedule O contains a response or note to any line in this Part V | | | | | |
|--------|---|----------|---|------------|--|----------|
| | Check it Schedule O contains a response of mote to any line in this Part V | <u> </u> | | | · · | <u> </u> |
| | | 1. | ۸ ا | | Yes | No |
| | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 0 | | | |
| | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | _1b_ | <u> </u> | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and r | eporta | ble gaming | | | |
| | (gambling) winnings to prize winners? | | | 1c | | - |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | |
| | filed for the calendar year ending with or within the year covered by this return | _2a | 0 | - | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax retu | | | 2b | | <u> </u> |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions | s) . | | | | |
| | 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 | - | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other | autho | rity over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial | accou | nt)? | 4a | | X |
| b | If "Yes," enter the name of the foreign country: | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A | ccour | its (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction | action | | 5b | | X |
| C | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | | _5c | L | ļ |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did to | he org | anization solicit | | | |
| | any contributions that were not tax deductible as charitable contributions? | | | 6a | | X |
| þ | If "Yes," did the organization include with every solicitation an express statement that such contribution | tions c | r gifts | | | |
| | were not tax deductible? | | | 6b | ļ | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | - | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se | rvices | provided to the payor? | | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w | as rec | uired | l _ | | 3,7 |
| _ | to file Form 8282? | ïï. | · | 7c | | X |
| a | If "Yes," indicate the number of Forms 8282 filed during the year | _7d | L | . . | 1 | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or | | π | 7e | | |
| ' ~ | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont if the organization received a contribution of qualified intellectual property, did the organization file F | | | 7f | | |
| 9 h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | | | 7g 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained | | | 711 | | |
| ٥ | sponsoring organizations maintaining donor advised funds, bid a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year? | a Oy iii | 0 | 8 | - | - |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | ļ | \vdash |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | | | 9a | - | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | • • | • | | 1 | T |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | | |
| b | 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 | 11a | | | | |
| b | | | | | | |
| | amounts due or received from them.) | 11b | | 1 | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | | ? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year . | 12b | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | L | | |
| 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 | | 4 | | | |
| | organization is licensed to issue qualified health plans | 13b | |] | | 1 |
| C | Enter the amount of reserves on hand | 13c | | | | <u> </u> |
| | Did the organization receive any payments for indoor tanning services during the tax year? | | | 14a | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu | le O | | 14b | L | <u> </u> |
| | | | | Forn | n 990 | (2014 |

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|------|--|--------------|--|--------------|
| | 990 (2014) BIG SPRING AREA COMMUNITY FOUNDATION INC 75-297(| | | age 6 |
| Par | tVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. | "No" r | espon | se |
| | | | | X |
| Sect | Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management | <u> </u> | <u>·</u> | |
| 000 | nort 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 | | 1.33 | 1.00 |
| | If there are material differences in voting rights among members of the governing body, or if the governing | 1 | | l i |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | i |
| b | Enter the number of voting members included in line 1a, above, who are independent . 15 | <u>L</u> | | : |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | 1 | | |
| _ | officer, director, trustee, or key employee? | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| • | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | X | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | |
| | more members of the governing body? | 7a | X | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | |
| | persons other than the governing body? | 7b | X |] |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | 1 |
| а | The governing body? | 8a | X | L |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | 1 | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | ļ <u> </u> | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | İ | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | <u> </u> | Ļ |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? | 11a | X | <u> </u> |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | - | | 1 |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | ├ | X |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | ├ | ├─ |
| C | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | in Schedule O how this was done | 12c | ├ ─ | |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? | 14_ | ├- | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | 1 | v |
| а | The organization's CEO, Executive Director, or top management official | 1 <u>5</u> a | <u>i</u> | X |

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE |
|----|---|
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available |
| | for public inspection. Indicate how you made these available. Check all that apply. |
| | X Own website Another's website X Upon request Other (explain in Schedule 0) |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial |
| | statements available to the public during the tax year. |

State the name, address, and telephone number of the person who possesses the organization's books and records:

SANDRA WAGGONER - 432-267-8058

509 HIGHLAND DR., BIG SPRING, TX 79720

b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

15a 15b

| orm 990 (2 | | | | | | FOUNDATION | | | Page |
|------------|--------------|--------|--------------|----------|-----------------|------------------|--------|----------|------|
| Part VII | Compensation | of Off | ficers, Dire | ctors, T | rustees, Key Er | nployees, Highes | st Com | pensated | |

Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

 • List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| (A) | (B) | | | | C) ition | | | (D) | (E) | (F) |
|------------------------|-------------------|--|-----------------------------|---------|-------------|------------------------------|----------|-------------------------|-------------------------|------------------------|
| Name and Title | Average | | (do not check more than one | | | than o | | Reportable compensation | Reportable compensation | Estimated amount of |
| | hours per week | box, unless person is both air officer and a director/trustee) | | | | | from | from related | other | |
| | (list any | jo | | | | | | the | organizations | compensation |
| | hours for | Individual trustee or director | | ĺ | 1 | 8 | | organization | (W-2/1099-MISC) | from the |
| | related | iee oi | ıstee | | | asa | | (W-2/1099-MISC) | | organization |
| | organizations | Tus | nal tru | | oyee | m . | | | | and related |
| | below | ndua | Institutional trustee | 55 | E E | lest c | Je . | | | organizations |
| | ine) | 힐 | 탈 | Officer | Key | Highest compensated employee | Former | | | |
| (1) DREW MOUTON | 2.00 | | | | | | | _ | _ | _ |
| PRESIDENT | | X | | X | | | | 0. | 0. | 0. |
| (2) TOMMY CHURCHWELL | 0.00 | | | | | | | | _ | |
| VICE PRESIDENT | | X | <u> </u> | Х | | | | 0. | 0. | 0. |
| (3) RANDY HILLMAN | 0.00 | | | | ļ | | | | _ | _ |
| SEC/TREAS | | X | | X | | <u>L</u> | | 0. | 0. | 0 . |
| (4) JAN FORESYTH | 0.00 | | | | | | | | _ | _ |
| | | X | | | | <u> </u> | | 0. | 0. | 0 |
| (5) BOBBY MCDONALD | 0.00 | | | | | | | | | _ |
| | | X | | L | L | <u> </u> | | 0. | 0. | 0 |
| (6) MAUREEN HADDAD | 0.00 | l | | | ١ | | | | | _ |
| | | X | | | L | <u> </u> | | 0. | 0. | 0 |
| (7) ROBERT L CROWNOVER | 0.00 | | | | | | 1 | | | |
| | | X | | | | | <u> </u> | 0. | 0. | 0 |
| (8) JERRY WORTHY | 0.00 | | | | | | | | | |
| | | X | | | | | | 0. | 0. | 0 |
| (9) JOHN FERGUSON | 0.00 | | | Ì | 1 | 1 | | | | |
| | | X | L | | _ | | | 0. | 0. | 0 |
| (10) DIANE WOOD | 0.00 | | | ļ | | | | | | |
| | | X | | L | _ | | | 0. | 0. | 0 |
| (11) JIM LITTLE | 0.00 |] | | | | | | | | |
| | | X | | _ | | | L_ | 0. | 0. | 0 |
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| | T VIII | Check if Schedule O conta | | or note to any line | in this Part VIII | | | |
|--|-----------------------|---|--|---------------------|----------------------|--|---|--|
| | | Orieck is deficació d'ocirco | ano a response | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| Contributions, Gifts, Grants and Other Similar Amounts | b c d e f | Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grant similar amounts not included above Noncash contributions included in lines Total. Add lines 1a-1f | s, and 1f | 16,250. | 18,325. | , (, | | |
| | - | TOTAL TITLE TOTAL | | Business Code | | | | , a t |
| Program Service Revenue | 2 a b c d | All other program service reve | | | | | | |
| _ | | Total, Add lines 2a-2f | | • | | * 1 | | * |
| | 3 | Investment income (including other similar amounts) Income from investment of tax | | 🟲 | 108,164. | | | 108,164. |
| | 5 | Royalties | (i) Real | (ii) Personal | | | | |
| | 6 a b c | Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) | (I) Neal | (ii) r ersonai | | 421 | | e e e e e e e e e e e e e e e e e e e |
| | - | Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses | (i) Securities 192,697. 173,212. | | | | * | , |
| | d | Net gain or (loss) | 19,485. | ▶ | 19,485. | | ~~ | 19,485. |
| Other Revenue | 8 a | Gross income from fundraisin including \$ contributions reported on line Part IV, line 18 | of 1c). See | | | | | |
| Ö | c | Less: direct expenses Net income or (loss) from fund | | ▶ | - | | - | A |
| | Ь | Part IV, line 19 Less: direct expenses | . a | | - - | _ | - | |
| | 10 a | Net income or (loss) from gan Gross sales of inventory, less and allowances Less: cost of goods sold | returns a | | | | _ | |
| | с | Net income or (loss) from sale Miscellaneous Revenu | | Business Code | | | | |
| | 11 a | · | | | | | | |
| | 1 | All other revenue Total. Add lines 11a-11d | | ——— | | | | |
| 4320 11-0 | 12_ | Total revenue. See instructions. | | | 145,974 | . 0 | . 0 | 127,649 Form 990 (2014 |

| Section | on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon- | | | mplete column (A). | |
|---------|--|----------------|--------------------------|---------------------------------------|-------------------------|
| Do n | ot include amounts reported on lines 6b, | (A) | (B) | (C) | (D) Fundraising |
| 7b, 8 | b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | r F |
| | and domestic governments. See Part IV, line 21 | 69,704. | 69,704. | | ,, |
| 2 | Grants and other assistance to domestic | | | | ę. |
| | individuals See Part IV, line 22 | | | | , , |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | * | , |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | - | |
| 7 | Other salanes and wages | | | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees): | | | | |
| а | Management | | | | |
| b | Legal . | | | | |
| С | Accounting | 2,400. | | 2,400. | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | · · · · · · · · · · · · · · · · · · · | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch O.) | | | | |
| 12 | Advertising and promotion | | <u>-</u> . | | |
| 13 | Office expenses | | | 0 105 | |
| 14 | Information technology | 2,195. | - | 2,195. | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | | | | - |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | 0 055 | |
| 19 | Conferences, conventions, and meetings | 2,955. | | 2,955. | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | | | | |
| 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.) | | | | |
| а | | | _ | | |
| b | | | | | |
| c | | | | | |
| d | | | <u></u> | | |
| e | All other expenses | _ | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 77,254. | 69,704. | 7,550. | 0. |
| 26 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | <u> </u> | Form 990 (2014) |

Part Y | Balance Shoot

| <u>Part</u> | <u>X</u> | Balance Sheet | | | |
|-----------------------------|----------|---|--|-----|------------------------------------|
| | | Check if Schedule O contains a response or note to any line in this Part X | | | |
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 42,832. | 1 | 20,527. |
| | 2 | Savings and temporary cash investments | 1,678,430. | 2 | 633,103. |
| | 3 | Pledges and grants receivable, net | | 3 | <u> </u> |
| | 4 | Accounts receivable, net | 26,025. | 4 | |
| ĺ | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | • | trustees, key employees, and highest compensated employees. Complete | | | |
| | | Part II of Schedule L | | 5 | AND THE RESIDENCE MANUAL PROPERTY. |
| 1 | 6 | Loans and other receivables from other disqualified persons (as defined under | | | |
| ŀ | J | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing | | | |
| | | employers and sponsoring organizations of section 501(c)(9) voluntary | | | |
| , | | and the self-result of Color I | | 6 | ** · · · · · · · · |
| ž | - | Notes and loans receivable, net | | 7 | |
| Assets | 7 | Inventones for sale or use | | 8 | |
| | 8 | | | | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other | | | |
| | _ | basis. Complete Part VI of Schedule D | | ا ا | v ^ |
| | | Less accumulated depreciation 10b | 1 001 410 | 10c | 2 124 161 |
| - 1 | 11 | Investments - publicly traded securities | 1,981,418. | 11 | 3,124,161 |
| - 1 | 12 | Investments other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments · program-related. See Part IV, line 11 | | 13 | |
| - 1 | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | 2 555 524 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 3,728,705. | 16 | 3,777,791. |
| | 17 | Accounts payable and accrued expenses | ······································ | 17 | |
| 1 | 18 | Grants payable | | 18 | |
| - 1 | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | 4 0 0 0 4 4 0 |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | 1,334,533. | 21 | 1,350,449. |
| S | 22 | Loans and other payables to current and former officers, directors, trustees, | | | |
| | | key employees, highest compensated employees, and disqualified persons. | and residue to the second | ļ. | |
| Liabilities | | Complete Part II of Schedule L | | 22 | |
| - | 23 | Secured mortgages and notes payable to unrelated third parties | <u>.</u> | 23 | |
| ļ | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24). Complete Part X of | | | |
| | | Schedule D | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | 1,334,533. | 26 | 1,350,449. |
| | | Organizations that follow SFAS 117 (ASC 958), check here ▶ X and | | | |
| S | | complete lines 27 through 29, and lines 33 and 34. | | - ' | ··· |
| <u>ا</u> ۾ | 27 | Unrestricted net assets | 106,015. | 27 | 17,988 |
| 39 | 28 | Temporanly restricted net assets | 91,443. | _ | 85,206 |
| <u> </u> | 29 | Permanently restricted net assets | <u>2,196,714.</u> | 29 | 2,324,148 |
| 를 | | Organizations that do not follow SFAS 117 (ASC 958), check here | | | |
| ช | | and complete lines 30 through 34. | | | |
| ets | 30 | Capital stock or trust principal, or current funds | | 30 | |
| Net Assets or Fund Balances | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| <u>ا</u> څ | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| Ž | 33 | Total net assets or fund balances | 2,394,172. | 33 | 2,427,342 |
| - 1 | 34 | Total liabilities and net assets/fund balances | 3,728,705. | | 3,777,791 |

| orm | 990 (2014) BIG SPRING AREA COMMUNITY FOUNDATION INC | <u>75-</u> 2 | <u> 2970373</u> | Pag | ge 12 |
|----------|---|--|-----------------|----------------------------|--------------|
| Pai | rt XI Reconciliation of Net Assets | | | | _ |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | |
| 4 | Tatal surrana (must apus Durt VIII) askumm (A) kas 10) | | 1 / | 5,9 | 71 |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | $\frac{3}{7}, \frac{3}{2}$ | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 20. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 2,39 | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | |
| 5 | Net unrealized gains (losses) on investments | 5 | <3 | <u> </u> | <u>50.</u> > |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | —– | |
| 8 | Pnor period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | l i | | | |
| D | column (B)) | 10 | 2,42 | 7,3 | 42. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | <u></u> | <u> </u> | T | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: X Cash Accrual Other | | _ | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | O. | - | | أـ ــا |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | ↓ | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe | d on a | | | 1 |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | . ' |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa | te basıs, | | | |
| | consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | ne audit, | 1 - | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | . 2c | <u>L</u> _ | L |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | - 1 | 1 | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S | ngle Audi | t | - | |
| | Act and OMB Circular A-133? | | . 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | uired audit | 1 | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | <u>. </u> | 3b | | |
| | | | Forn | 1 990 | (2014) |

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

2011 2011

Open to Public Inspection

Employer identification number Name of the organization 75-2970373 BIG SPRING AREA COMMUNITY FOUNDATION INC 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). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box 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 II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (iii) Type of organization listed in your organization (described on lines 1-9 support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

Schedule A (Form 990 or 990-EZ) 2014 BIG SPRING AREA COMMUNITY FOUNDATION INC75-2970373 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | tion A. Public Support | | | | | ·- | |
|-----------|---|---|------------------------|--------------------------|----------------------|----------------------------|-------------|
| 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.") | 46,274. | 34,195. | 24,225. | 62,800. | 18,325. | 185,819. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 46,274. | 34,195. | 24,225. | 62,800. | 18,325. | 185,819. |
| 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) | | | | | | 75,712. |
| 6 | Public support. Subtract line 5 from line 4 | | ٨ | | | | 110,107. |
| | ction B. Total Support | | | | | | 12072070 |
| | ndar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | Amounts from line 4 | 46,274. | 34,195. | 24,225. | 62,800. | 18,325. | 185,819. |
| 8 | Gross income from interest, | | 0 - 7 - 3 0 0 | 21,2231 | 02,000 | 20,0200 | 200,025 |
| Ü | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | 4,743. | 5,338. | 4,517. | 41,109. | 127 650 | 183,357. |
| 9 | · | 4,745. | 3,330. | 4,31,6 | 41/1006 | 127,0301 | 103/33/1 |
| 9 | activities, whether or not the | | | | | | |
| | business is regularly carned on | | | | | | |
| 40 | Other income. Do not include gain | | | | | | |
| 10 | or loss from the sale of capital | | | | | | |
| | | | | | | | |
| 44 | assets (Explain in Part VI.) Total support. Add lines 7 through 10 | | | | | | 369,176. |
| | • | eta (see instructio | i | l | | 12 | 303,170. |
| | Gross receipts from related activities, First five years. If the Form 990 is for | · · | | d fourth or fifth to | | | |
| 13 | organization, check this box and stor | - | s iirst, second, triir | a, lourni, or mur ta | ix year as a section | 11 30 1(0)(3) | |
| Se | ction C. Computation of Publ | | rcentage | | | • | |
| | Public support percentage for 2014 (| | | olumn (fl) | | 14 | 29.83 % |
| | Public support percentage from 2013 | • | - | olariii (i), | | 15 | 37.32 % |
| | a 33 1/3% support test - 2014. If the | · | | line 13 and line 1 | 14 is 33 1/3% or n | | - 60 |
| 102 | stop here. The organization qualifies | • | | | 1413 00 17070 011 | noro, cricon triis bi | ▶ □ |
| | 33 1/3% support test - 2013. If the | | - | | line 15 te 33 1/3% | or more check th | his box |
| • | and stop here. The organization qual | = | | | 1110 10 10 00 1707 | or more, encor a | ▶ X |
| 17- | a 10% -facts-and-circumstances tes | • • | | | | 201 and line 14 is 10% | |
| 176 | and if the organization meets the "fac | _ | | | | | |
| | _ | | | = | | it viriow the organ | NIZACION ► |
| | meets the "facts-and-circumstances" | - | • | | - | 17a and less 15 :s | ▶∟ |
| | 10% -facts-and-circumstances tes | - | | | | | |
| | more, and if the organization meets the | | | | - | | _ |
| | organization meets the "facts-and-circ | | • | | | • | <u>:</u> |
| <u>18</u> | Private foundation. If the organization | on ala not check a | DOX OR LINE 13, 16a | a, 100, 1/a, or 1/b | o, check this box a | | ns P |

Schedule A (Form 990 or 990-EZ) 2014 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

| Sec | tion A. Public Support | low, piease com | picto i art ii j | | | | |
|------|--|-------------------|--------------------|---------------------------------------|----------------------|-----------------------|-----------|
| 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.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| | Public support (Subtract line 7c from line 6) | | * | | <u> </u> | | |
| Cale | ndar year (or fiscal year beginning in) 🖊 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| _ | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| t | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12) ! First five years. If the Form 990 is for | the ergenization | 'e firet econd the | rd fourth or fifth | tay year as a sect | on 501(c)(3) organi | zation |
| 14 | check this box and stop here | uno organizacioni | a mar, adconu, tri | ia, iourus, or illus | ian year as a secu | on our (c)(o) organiz | L |
| Se | ction C. Computation of Publi | ic Support Po | ercentage | · · · · · · · · · · · · · · · · · · · | | · | |
| 15 | | | | column (fi) | | 15 | % |
| 16 | | | • | | • | 16 | % |
| _ | ction D. Computation of Inves | | |) | | , | |
| 17 | | | | | | 17 | % |
| 18 | | | | | • • | 18 | % |
| | a 33 1/3% support tests - 2014. If the | | | on line 14, and lu | ne 15 is more than | | |
| | more than 33 1/3%, check this box as | | | | | | ▶□ |
| ı | 33 1/3% support tests - 2013. If the line 18 is not more than 33 1/3%, che | organization did | not check a box o | n line 14 or line 19 | 9a, and line 16 is n | nore than 33 1/3%, | |
| 20 | Private foundation. If the organization | | - | | | | |
| | | | | | | | |

Schedule A (Form 990 or 990-EZ) 2014 BIG SPRING AREA COMMUNITY FOUNDATION INC75-2970373 Page 4

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.)

| Se | ction | A. All | Supporting | Organizations |
|----|-------|--------|------------|---------------|
|----|-------|--------|------------|---------------|

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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.
- c 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.
- 4a 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.
- **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.
- c 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.
- 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 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.
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990).
- **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**.
- **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.
- c 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.
- 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.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | | Yes | No |
|---|-----------|------------|----------|
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| | 1 | | |
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| | 8 | - | |
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| | 9a | | |
| | 9b | | |
| | 9c | - | |
| | 10a_ | | 1 |
| | 10b | h | |

| | dule A (Form 990 or 990-EZ) 2014 BIG SPRING AREA COMMUNITY FOUNDATION INC75-29 | <u> 7037</u> | 3 Pa | ige 5 |
|-----|--|--------------|------|--------------|
| Par | TIV Supporting Organizations (continued) | | | |
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | ! |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | L | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| Sec | tion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | ĺ |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | 1 | | ĺ |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | ĺ |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | ĺ |
| | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported | _ | | - |
| | organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | ŀ | | İ |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | : | 1 |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | ĺ |
| | supervised, or controlled the supporting organization. | 2 | | <u> </u> |
| Sec | tion C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | 1 |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| | the supported organization(s). | 1_1_ | | L |
| Sec | tion D. Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | | İ |
| | organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax | | | 1 |
| | year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the | | | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | ļ | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | ļ | <u> </u> |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | 1 | | |
| | supported organizations played in this regard. | 3 | | |
| Sec | tion E. Type III Functionally-Integrated Supporting Organizations | | | _ |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see Instructions). | <i>:</i> | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | | | | |
| C | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins | tructions | s) | |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | - | | , |
| | that these activities constituted substantially all of its activities. | 2a | 1 | <u> </u> |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | 1 |
| | trustees of each of the supported organizations? Provide details in Part VI. | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | 1 | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard | 3b | | |

| | dule A (Form 990 or 990-EZ) 2014 BIG SPRING AREA COMMUNI | | | 75-2970373_Page (|
|------------|---|------------|-----------------------------|--------------------------------|
| Par | Typo in ton tunousnamy intogrates oco (E/(c) ocopporting | | | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | _ | | uctions. All |
| | other Type III non-functionally integrated supporting organizations must co | omplete S | Sections A through E. | , |
| Sect | on 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 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Pnor 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): | | · <u></u> | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| С | Fair market value of other non-exempt-use assets | 1c | · | |
| _ <u>d</u> | 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 | Recovenes of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion 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 | | |
| _ | Check have if the august year is the argent return's first as a non-function of | Ilu intone | ated Time III supporting or | renization (see |

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Schedule A (Form 990 or 990-EZ) 2014 BIG SPRING AREA COMMUNITY FOUNDATION INC75-2970373 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Current Year Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 5 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (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 (i) (ii) (iii) **Excess Distributions Underdistributions** Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 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 Ci ď e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount Carryover from 2009 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2014 from Section D, a Applied to underdistributions of prior years b Applied to 2014 distributable amount c 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). Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions). Excess distributions carryover to 2015. Add lines 3j and 4c. Breakdown of line 7: b d Excess from 2013 e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014

| 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). |
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

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

OMB No 1545-0047 **Open to Public** Inspection

Name of the organization

Employer identification number

| Par | | Funds or Other Similar Funds of | |
|----------|---|--|---|
| <u> </u> | organization answered "Yes" to Form 990, Part IV, line 6 | | Accounts. Complete if the |
| | Organization answered Tes to Form 550, Fait 14, Into | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | 4 | 15 |
| 2 | Aggregate value of contributions to (during year) | 10,000. | 6,250. |
| 3 | Aggregate value of grants from (during year) | 17,500. | 52,204. |
| 4 | Aggregate value at end of year | 131,954. | 2,295,388. |
| 5 | Did the organization inform all donors and donor advisors in wri | | |
| | are the organization's property, subject to the organization's ex | - | X Yes No |
| 6 | Did the organization inform all grantees, donors, and donor adv | | • — |
| | for charitable purposes and not for the benefit of the donor or o | | - |
| | impermissible private benefit? | | X Yes No |
| Par | t II Conservation Easements. Complete if the organ | nization answered "Yes" to Form 990, Par | |
| 1 | Purpose(s) of conservation easements held by the organization | (check all that apply). | |
| | Preservation of land for public use (e.g., recreation or edu | ucation) Preservation of a historic | cally important land area |
| | Protection of natural habitat | Preservation of a certifie | d historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified | d conservation contribution in the form of | a conservation easement on the last |
| | day of the tax year. | | |
| | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| b | Total acreage restricted by conservation easements | | 2b |
| С | Number of conservation easements on a certified historic struc | | 2c |
| d | Number of conservation easements included in (c) acquired aft | er 8/17/06, and not on a historic structure | |
| | listed in the National Register | • | 2d |
| 3 | Number of conservation easements modified, transferred, relea | ised, extinguished, or terminated by the o | rganization during the tax |
| | year > | | |
| 4 | Number of states where property subject to conservation ease | | |
| 5 | Does the organization have a written policy regarding the period violations, and enforcement of the conservation easements it h | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, ar | | — |
| 7 | Amount of expenses incurred in monitoring, inspecting, and en | - | |
| 8 | Does each conservation easement reported on line 2(d) above | - | |
| • | and section 170(h)(4)(B)(ii)? | | Yes No |
| 9 | In Part XIII, describe how the organization reports conservation | easements in its revenue and expense s | • |
| _ | include, if applicable, the text of the footnote to the organizatio | • | |
| | conservation easements. | | |
| Paı | t III Organizations Maintaining Collections of | Art, Historical Treasures, or Oth | er Similar Assets. |
| | Complete if the organization answered "Yes" to Form 99 | 90, Part IV, line 8 | |
| 1a | If the organization elected, as permitted under SFAS 116 (ASC | 958), not to report in its revenue stateme | nt and balance sheet works of art, |
| | historical treasures, or other similar assets held for public exhib | ortion, education, or research in furtheranc | e of public service, provide, in Part XIII, |
| | the text of the footnote to its financial statements that describe | es these items. | |
| b | If the organization elected, as permitted under SFAS 116 (ASC | 958), to report in its revenue statement a | nd balance sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, edu | cation, or research in furtherance of publi | c service, provide the following amounts |
| | relating to these items: | | |
| | (i) Revenue included in Form 990, Part VIII, line 1 | | S |
| | | | > \$ |
| 2 | If the organization received or held works of art, historical treas | - | jain, provide |
| | the following amounts required to be reported under SFAS 116 | 6 (ASC 958) relating to these items: | . |
| a | Revenue included in Form 990, Part VIII, line 1 | | S |
| b | Assets included in Form 990, Part X | | ▶ \$ |

| _ | | | OMMUNITY F | | | | <u>70373</u> | |
|----------|---|---------------------------------------|---------------------------------------|------------------------|------------------|----------------|---------------|---------------------------------|
| Par | t III Organizations Maintaining C | ollections of A | rt, Historical Tr | easures, or Oth | <u>er Simila</u> | ar Asset | S(continu | ued) |
| 3 | Using the organization's acquisition, accessi | on, and other record | ds, check any of the | following that are a | signıficant ı | use of its o | collection | items |
| | (check all that apply): | | | | | | | |
| а | Public exhibition | c | Loan or exc | hange programs | | | | |
| b | Scholarly research | 6 | e Other | | . – | | | |
| C | Preservation for future generations | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and expla | in how they further t | he organization's ex | empt purpo | ose in Part | XIII. | |
| 5 | During the year, did the organization solicit o | r receive donations | of art, historical trea | sures, or other simila | ar assets | | _ | |
| | to be sold to raise funds rather than to be ma | | | | | | Yes | No_ |
| Par | | | ete if the organizatio | n answered "Yes" to | Form 990 | , Part IV, li | ne 9, or | |
| | reported an amount on Form 990, Par | rt X, line 21. | | | | | | |
| 1a | Is the organization an agent, trustee, custod | an or other interme | diary for contributior | ns or other assets no | t included | | - | |
| | on Form 990, Part X? | | | | | L X | Yes | L No |
| þ | If "Yes," explain the arrangement in Part XIII | and complete the fo | ollowing table: | | | | | |
| | | | | | | | Amount | |
| C | Beginning balance | | | | 1c | | 1,334 | |
| | Additions during the year | | | | 1d | | | ,083. |
| е | Distributions during the year | | | | 1e | | 27 | |
| f | Ending balance . | | | | 1f | | <u>1,350</u> | |
| | Did the organization include an amount on F | | | | - | . LX | Yes | ⊢ No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | | X |
| Par | t V Endowment Funds. Complete | | T - " | 1 | | | | |
| | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three y | | (e) Four | |
| 1a | Beginning of year balance | 2,389,588. | 378,088. | 326.542. | | 24,512. | | 280,714, |
| b | Contributions | 16,250. | 1,907,503. | 24.075. | 1 | 28,970. | | 31,074, |
| С | Net investment earnings, gains, and losses | 73,221. | 113,831. | 39,821, | 1 | 11,340. | <u> </u> | 22,917. |
| d | Grants or scholarships | 69,704. | 9,834. | 12,300. | | <u>15,550.</u> | | 10,143, |
| е | Other expenditures for facilities | | 1 | ļ | | | | |
| | and programs | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | Administrative expenses | | | 50. | \- <u></u> | 50. | | 50. |
| g | End of year balance | 2,409,355. | | 378,088, | .13 | 326.542. | | 324,512. |
| 2 | Provide the estimated percentage of the cur | · · · · · · · · · · · · · · · · · · · | · · | a)) neid as: | | | | |
| a | Board designated or quasi-endowment | 3.54 | % | | | | | |
| b | Permanent endowment 92.63 | % 3.83 % | | | | | | |
| С | • | | | | | | | |
| ٥. | The percentages in lines 2a, 2b, and 2c short | • | | and administered for | the evention | | | |
| 3a | Are there endowment funds not in the posse | ession of the organiz | zation that are neid a | ina administered for | une organia | zation | Γ. | No |
| | by: (i) unrelated organizations | | | | | | | Yes No |
| | (ii) unrelated organizations (ii) related organizations | | | | | • • • • • • • | 3a(i) | $\frac{\mathbf{x}}{\mathbf{x}}$ |
| . | If "Yes" to 3a(ii), are the related organization | e listed se required : | on Schodula P2 | • | | | 3a(ii) | |
| 4 | Describe in Part XIII the intended uses of the | • | | • | | | [3b | |
| | t VI Land, Buildings, and Equipm | | OWITIETIC TOLIGIS. | | | | | |
| | Complete if the organization answere | | 0 Part IV line 11a S | See Form 990 Part X | line 10 | | | |
| | Description of property | (a) Cost or | | | Accumulate | ed | (d) Book | . value |
| | bescription of property | basis (invest | 1 7 7 | 1 | epreciation | | (C) DOOR | Value |
| 10 | Land | , | | · | | | | |
| _ | Buildings | | | | | - | | |
| | Leasehold improvements | | | | | | - | |
| | Equipment | - | - | | | | | |
| | Other | | | | | | | |
| | Add lines 1a through 1e (Column (d) must e | agual Form 900 Par | t X column (R) line | 10c) | | | | 0. |

| a) Description of security or category (including name of security) | (b) Book value | 11b See Form 990, Part X, line 12 (c) Method of valuation: Cost | or end-of-year market value |
|--|-------------------------|--|-------------------------------|
| Financial derivatives | | | |
| Closely-held equity interests | | | |
| Other | | | |
| (A) | | | |
| (B) | <u> </u> | | |
| (C) | _ | | |
| (D) | - | | |
| (E) | *** | | |
| (F) | ··· | | |
| (G) | | | |
| (H) | | | |
| al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| art VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" to | | | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost | t or end-of-year market value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | ļ | |
| tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Complete if the organization answered "Yes" to | Form 990, Part IV, line | 11d. See Form 990, Part X, line 15 | |
| | escription | | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| tal. (Column (b) must equal Form 990, Part X, col. (B) line | 15.) | | |
| Part X Other Liabilities. | 5 | 44 0 5 000 5 17 | |
| Complete if the organization answered "Yes" to (a) Description of liability | Form 990, Part IV, line | (b) Book value | line 25. |
| | | (b) Book value | |
| (1) Federal income taxes | | | |
| (2) | ————— —— | | |
| (3) | | | |
| (4) | | | |
| (E) | | | |
| (5) | l l | I | |
| (6) | | | |
| (6) (7) | | | |
| (6) | | | |

Schedule D (Form 990) 2014

| Schedule D (Form 990) 2014 BIG SPRING AREA COMMUNITY | | |
|---|-----------------------|----------------|
| Part XI Reconciliation of Revenue per Audited Financial Stateme | nts With Revenue per | Return. |
| Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. | | |
| 1 Total revenue, gains, and other support per audited financial statements | | 1 |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 1 | 1 1 |
| a Net unrealized gains (losses) on investments | 2a | _ |
| b Donated services and use of facilities | 2b | |
| c Recoveries of prior year grants | 2c | |
| d Other (Describe in Part XIII.) | 2d | |
| e Add lines 2a through 2d | | |
| 3 Subtract line 2e from line 1 | | 3 |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b Other (Describe in Part XIII.) | 4b | <u> </u> |
| c Add lines 4a and 4b | | 4c |
| 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 5 |
| Part XII Reconciliation of Expenses per Audited Financial Statem | ents With Expenses pe | r Retum. |
| Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. | | |
| 1 Total expenses and losses per audited financial statements | | 1 |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | 1 1 | |
| a Donated services and use of facilities | 2a | - |
| b Pnor year adjustments | 2b | 4 |
| c Other losses | 2c | - |
| d Other (Describe in Part XIII) | 2d | waste a |
| e Add lines 2a through 2d | | 2e |
| 3 Subtract line 2e from line 1 | | 3 |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | | |
| b Other (Describe in Part XIII.) | 4b | |
| c Add lines 4a and 4b | | 4c |
| 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | 5 |
| Part XIII Supplemental Information. | | |
| Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add | itional information. | |
| THE FOUNDATION HAS ADOPTED SFAS 136 WHICH ES | TABLISHES STAND | ARDS_FOR |
| REPORTING BY A COMMUNITY FOUNDATION THAT ACC | EPTS DONATIONS | FOR A |
| NOT-FOR-PROFIT ORGANIZATION. THE FOUNDATION | MUST ACCOUNT FO | R THE TRANSFER |
| AS A LIABILITY. AT DECEMBER 31, 2014, THE FO | UNDATION WAS OW | NER OF |
| \$1,349,174 OF SUCH FUNDS. | | |
| PART V, LINE 4: | | |
| FUNDING OF CHARITABLE, CULTURAL AND EDUCATIO | NAL PROGRAMS TH | ROUGH |
| ESTABLISHED PUBLIC CHARITIES AND GOVERNMENTA | L ENTITIES IN B | IG SPRING AND |
| HOWARD COUNTY, TEXAS. | | |

| Schedule D (Form 990) 2014 | BIG SPRING | AREA | COMMUNITY | FOUNDATION | INC75-2970373 | Page 5 |
|---|---------------------|----------|--------------|---------------------------------------|------------------|--------|
| Schedule D (Form 990) 2014 Part XIII Supplemental Info | rmation (continued) | | | <u> </u> | | |
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Open to Public OMB No 1545-0047 Inspection **Employer identification number**

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

Schedule I (Form 990) (2014) % × 75-2970373 (h) Purpose of grant or assistance Yes 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 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 (g) Description of non-cash assistance : (f) Method of valuation (book, FMV, appraisal, other) . : ੰ ö o Ö (e) Amount of assistance non-cash : Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. FOUNDATION INC recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 7 775, (d) Amount of 12,000 10,000 8 250 10,000 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable BIG SPRING AREA COMMUNITY 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 170 (C) (1) Enter total number of other organizations listed in the line 1 table 75-6001827 75-2790454 75-1333435 75-2246942 75-0827470 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization BIG SPRING MAIN STREET, INC. HOWARD COUNTY JR COLLEGE or government BIG SPRING, TX 79720 BIG SPRING TX 79720 BIG SPRING TX 79720 HANGAR 25 AIR MUSEUM BIG SPRING, TX 79720 BIG SPRING, TX 79721 1001 BIRDWELL LANE HERITAGE MUSEUM BIG SPRING YMCA 1911 APRON DR 510 SCURRY ST P.O. BOX 131 801 OWENS Part Part

432101 10-15-14

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) ANY SUCCEEDING GRANT REQUEST. BY REQUESTING A GRANT, THE RECIPIENT GRANTS Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. EXPENDITURE OF GRANT MONIES NOT LESS THAN EVERY SIX MONTHS, AND PRIOR TO Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. THE FOUNDATION THE RIGHT TO AUDIT THE RECIPIENT'S BOOKS RELATIVE TO GRANT RECIPIENTS ARE REQUIRED TO PROVIDE PROGRESS REPORTS ON THE (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients APPROVED GRANT APPLICATION (a) Type of grant or assistance PART I, LINE 2:

Page 2

75-2970373

BIG SPRING AREA COMMUNITY FOUNDATION INC

Schedule I (Form 990) (2014)

Part III

Schedule I (Form 990) (2014)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Open to Public

OMB No 1545-0047

Inspection

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

Name of the organization

Employer identification number

BIG SPRING AREA COMMUNITY FOUNDATION 75-2970373 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CULTURAL AND EDUCATIONAL BENEFITS TO THE BIG SPRING AND HOWARD COUNTY AREAS. FORM 990, PART VI, SECTION A, LINE 6: MEMBERS OF THE FOUNDATION INCLUDE THOSE THAT PAY A \$100 ANNUAL FEE AND THOSE ESTABLISHING A FUND WITH A MINIMUM BALANCE OF \$10,000. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT THE DIRECTORS AS THEIR TERMS EXPIRE. OFFICERS ARE ELECTED BY THE DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: ONLY AMENDMENT OF THE BYLAWS REQUIRES APPROVAL OF THE MEMBERS. ALL OTHER GOVERNING DECISIONS ARE MADE BY THE DIRECTORS. FORM 990, PART VI, SECTION B, LINE 11: THE FOUNDATION PRESIDENT REVIEWS FORM 990 WITH THE PREPARER. AFTER THEIR REVIEW, A COPY IS DISTRIBUTED TO EACH MEMBER OF THE GOVERNING BODY FOR REVIEW AND ACCEPTANCE BEFORE FILING.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION'S MONTHLY FINANCIAL STATEMENTS, ANNUAL FINANCIALS, GOVERNING DOCUMENTS AND FORM 990 ARE AVAILABLE TO THE PUBLIC THROUGHOUT THE YEAR ON A REQUEST BASIS. THE FOUNDATION HOLDS AN ANNUAL MEETING OPEN TO THE PUBLIC TO

PRESENT THE FINANCIAL STATEMENTS, MANAGEMENT'S ANNUAL REPORT AND DISCUSS

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