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DLN: 93493317023045

OMB No 1545-0047

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

Form **990**

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

A Fo	r the 201	4 calendar year, or tax year beginning 04-01-2014 , and ending 03-31-2015				
	eck if applic Tress change	SAN ANTONIO LIVESTOCK EXPOSITION			ntification number	
_	me change	Doing business as		45-453323	/	
┌ Inıt	ial return			E Telephone num	her	
Fina	al urn/termina	Number and street (or P O box if mail is not delivered to street address) Room/suit ted P O BOX 200230	е	(210)225-5		
	ended retui	The City or town, state or province, country, and ZIP or foreign postal code		(210)210		
Application pending SAN ANTONIO, TX 78220 G Gross receipts \$ 11,						
		F Name and address of principal officer KEITH MARTIN		s a group return		
		723 ATT CENTER PARKWAY	subo	rdinates?	ΓYes Γ No	
		SAN ANTONIO,TX 78219	H(b) Are a	ll subordinates	Γ Y es Γ No	
I Ta	x-exempt s	tatus			(see instructions)	
J W	ebsite: ►	WWW SARODEO COM	H(c) Grou	ıp exemption nur	mber ►	
K Forr	n of organiz	ration Corporation Trust V Association Other ►	L Year of fo	mation 2011 M	State of legal domicile TX	
Pa	rt I S	Gummary				
Activities & Governance	OPE	SALE THE EDUCATION FUND IS INTENDED TO BE A TYPE I SUPPORT ERATED, SUPERVISED, OR CONTROLLED BY A PUBLICLY SUPPORTED BY A PUBLICLY SUPPORTED BY A PUBLICLY SUPPORTED CONTROLLED BY A PUBLIC BY	more than 2	5% of its net as		
ď		al number of individuals employed in calendar year 2014 (Part V, line 2a) .		0		
		al number of volunteers (estimate if necessary)		6	20	
	I	unrelated business revenue from Part VIII, column (C), line 12		7a 7b	0	
	D Net	uniferated business taxable income noin form 950-1, line 34	1	r Year	Current Year	
a.	8 C	ontributions and grants (Part VIII, line 1h)		50,000	5,621,227	
Revenue		rogram service revenue (Part VIII, line 2g)		533,393	675,311	
ř		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0/3,311	
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		583,393	6,296,538	
		2)		0	5,987,448	
		enefits paid to or for members (Part IX, column (A), line 4)		0	0	
8		alaries, other compensation, employee benefits (Part IX, column (A), lines – 10)		0	0	
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0	0	
ਬੁ	b To	otal fundraising expenses (Part IX, column (D), line 25) ▶0				
		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		47,475	224,418	
		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses Subtract line 18 from line 12		47,475 535,918	6,211,866 84,672	
<u>8</u> 8			I	of Current	End of Year	
Not Assets or Fund Balances	20 T	otal assets (Part X, line 16)	T	17,815,753	19,028,503	
er As	l	otal liabilities (Part X, line 26)		16,655,255	17,977,363	
		et assets or fund balances Subtract line 21 from line 20		1,160,498	1,051,140	
Unde my ki	r penaltie nowledge	Signature Block s of perjury, I declare that I have examined this return, including accompany and belief, it is true, correct, and complete Declaration of preparer (other tha ny knowledge	in officer) is	based on all info		
Sign		****** Signature of officer		015-11-10 ate		
Here		KEITH MARTIN EXECUTIVE DIRECTOR OF SALE				
	<u> </u>	Type or print name and title Print/Type preparer's name Preparer's signature Da	te la	ck PTIN		
Paid	t	ARTHUR L CAMPSEY ARTHUR L CAMPSEY 20	15-11-10 self	employed P00066		
	parer	Firm's name HAASS LINDOW & CAMPSEY PC		n's EIN 🕨 74-23866		
Use	Only	Firm's address ► 8122 DATAPOINT DR SUITE 830	Pho	ne no (210) 697-0	560	

SAN ANTONIO, TX 78229

. 01111	. , , , ,					rage 2
Par	t III	Statement of Program Check if Schedule O contains				·
1	Brief	y describe the organization's m	ISSION			
IRS A SAN THE INTE	APPRO ANTO BENEF NDED	NTONIO LIVESTOCK EXPOS VAL AS A NONPROFIT ORGA NIO LIVESTOCK EXPOSITIO IT OF, TO PERFORM THE FUN TO BE A TYPE I SUPPORTIN SUPPORTED ORGANIZATION	NIZATION IN FEBF N, INC (S A L E) FE ICTIONS OF, OR TO G ORGANIZATION,	RUARY 2013 IT WAS FO DERAL ID# 74-1075466 D CARRY OUT THE PURP	RMED AS A SUPPORTING O S, AND WILL BE OPERATED POSES OF S A L E THE EDUC	RGANIZATION TO EXCLUSIVELY FOR CATION FUND IS
2	the pr	ne organization undertake any s rior Form 990 or 990-EZ? . s," describe these new service				┌ Yes ┌ No
3		is, describe these new service ne organization cease conductir		at changes in how it condu	icto any program	
3	servi	re organization cease conducting tes?				┌ Yes ┌ No
4	exper	ribe the organization's program ises Section 501(c)(3) and 50 tal expenses, and revenue, if a	1 (c)(4) organization:	s are required to report the		
4a	CORF IT CC FINA	e) (Expenses : NG THE FISCAL YEAR ENDED MARCH : RESPONDING SCHOLARSHIP AND GRAN ULD ADMINISTER AND PAY THE SCHO NCIAL STATEMENTS FOR THEIR FISCAL E TO THE EDUCATION FUND AS A DO	1, 2014, S A L E (SAN A T LIABILITY TO THE EDUC ARSHIPS AND GRANTS S YEAR ENDED MARCH 31	CATION FUND (SAN ANTONIO LI S A L E AND THE EDUCATION F , 2015 IN THE FISCAL YEAR EN	VESTOCK EXPOSITION EDUCATIONA UND HAD AN AUDIT PERFORMED OF NDED MARCH 31, 2015, \$5,621,227	L FUND, INC) SUCH THAT THE CONSOLIDATED WAS TRANSFERRED FROM
4b	(Code	e) (Expenses :	5	ıncludıng grants of \$) (Revenue \$)
4c	(Code	e) (Expenses	5	ıncludıng grants of \$) (Revenue \$)
4d		er program services (Describe i enses \$	n Schedule O) including grants o	f ¢) (Revenue \$)
		I program service expenses ►	6.182.167		, (πονείταε φ	,
+-	iota	i program service expenses F	0,102,10/			

art IV	Checl	clist of	Required	Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A^{2}	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		Νo
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III 2	8		No
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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[6]{4}$	10	Yes	
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		No
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	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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		No
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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
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? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2014)

	Check if Schedule O contains a response or note to any line in this Part V			 /
. .	Fatantha annahan annahadan Ban 2 af Fama 1006 Fatan 0 af antanahan banka 1 4 a 1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b	-		
		-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
а	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			
•	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N (
,	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			١.,
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
1	If "Yes," indicate the number of Forms 8282 filed during the year	-		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N.
:	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
,	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
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		
	Section 501(c)(7) organizations. Enter			
3	Initiation fees and capital contributions included on Part VIII, line 12 10a			
)	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
3	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
		1		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans	1		
	Enter the amount of reserves on hand	 	 	
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

Section A. Governing Body and Management

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O	O contains a response or note to any line in this Part VI	. ~
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	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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	Yes	
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website V Upon request Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶BETTY ROST

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - ◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	check (, unle n office ustee	ss er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) TINA HAYNES	2 00	х						0	0	0
PRESIDENT		^						0	0	0
(2) PAT FROST	2 00	,						0	0	
VICE PRESIDENT		Х						0	0	0
(3) RUSTY COLLIER	2 00								•	
DIRECTOR		Х						0	0	0
(4) FRED PETMECKY	2 00	,,								
DIRECTOR		Х						0	0	0
(5) RICHARD M TRES KLEBERG III	2 00							_		_
DIRECTOR		Х						0	0	0
(6) KIM MOORE	2 00									_
DIRECTOR		Х						0	0	0
(7) NORM NEVINS	2 00									
DIRECTOR		Х						0	0	0
(8) JACKIE VAN DE WALLE	2 00									
DIRECTOR		X						0	0	0
(9) JAMES F CLINGMAN	2 00								_	
DIRECTOR		Х						0	0	0
(10) KEITH MARTIN	2 00							474.750		21.674
EXECUTIVE DIRECTOR	50 00			Х				474,750	0	21,674

Part VII

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is	ne l both	box, an d	heck unless officer stee)	5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	-			
d	Total (add lines 1b and 1c)	•	474,750	0	21,674

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)			
Name and business address	Description of services	Compensation			
Takel many bar of malay and a bar of malay bar of malay bar of ba					

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part V		State
		Check
2 £	1a	Federa
rant	ь	Membe
s, G Am	С	Fundra
Gift ilar	d	Relate
ns, Sim	е	Governr
utio ier (f	All other
a iii Q iii	g	Noncash 1a-1f \$
Cor and	h	Total.
even	2a b	
се Веу	c	
erws	d	
<i>ა</i>) ⊑	e	
വിദ	f	All oth
<u>~</u>	g	Total.
	3	Invest and ot
	4	Income
	5	Royalt
	6a	Gross
	Ь	Less re expense
	С	Rental in or (loss)
	d	Net re
	7a	Gross ar
		from sal
	ь	than inv
		other ba sales ex Gain or
	d	Net ga
·	8a	Gross
nue		events \$
eve		of cont
er Re		
Ç T	b c	Less Net ind
_	9a	Gross
		See Pa
	ь	Less
	c	Net ind
	10a	Gross returns
	b c	Less Net ind
		Misc
	11a	
	Ь	
	c d	All oth
	e	Total.
	12	Totalı

/ 1111	Statement o	f Revenue ule O contains a respor	ase or note to any lir	ne in this Part VIII			_
	CHECK II SCHEU	are o contains a respon	ise of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated camp	paigns 1a					
ь	Membership du	es 1b					
c	Fundraising eve	ents 1c					
d	Related organiz	ations 1d					
e	Government grants						
f		ons, gifts, grants, and 1f	5,621,227				
l '	similar amounts no						
g	Noncash contribute 1a-1f \$	ons included in lines					
h	Total. Add lines	s 1a-1f	📦	5,621,227			
			Business Code				
2a							
ь							
С							
d							
e							
f	All other progra	ım service revenue					
g	Total. Add lines	s 2a – 2f	►				
3	and other simila	ome (including dividender ar amounts) tment of tax-exempt bond	🟲 📗	486,455	486,455		
5	Royalties		proceeds -				
	,	(ı) Real	(II) Personal				
6a	Gross rents						
ь	Less rental expenses						
c	Rental income or (loss)						
d		me or (loss)					
		(ı) Securities	(II) Other				
7a	Gross amount from sales of assets other than inventory	5,181,532					
ь	Less cost or other basis and sales expenses	4,992,676					
С	Gain or (loss)	188,856					
d		s)		188,856			188,856
8a	Gross income f events (not inc						
ь	Loca divast si	noncos h					
C		penses b loss) from fundraising	events .				
9a		rom gaming activities					
.		a					
		penses b loss) from gaming acti	vities - •				
	Gross sales of	ı	· · · · · · · · · · · · · · · · · · ·				
	returns and allo	wances .					
ь	less costofa	a oods sold b					
	_	loss) from sales of inve	entory 🛌				
	Miscellaneous	•	Business Code				
11a							
b							
c							
d	All other reven						
е	Total. Add lines		•			1	
12	Total revenue.	See Instructions .	🕨	6,296,538	486,455	0	188,856

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)						
Section	Check if Schedule O contains a response or note to any line in this					
	ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising	
7b, 8l	b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses	
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,987,448	5,987,448			
2	Grants and other assistance to domestic 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 salaries 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				_	
c	Accounting					
d	Lobbying					
e	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 Schedule O)					
12	Advertising and promotion					
13	Office expenses					
14	Information technology					
15	Royalties					
16	Occupancy					
17	Travel					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings					
20	Interest					
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	3,512		3,512		
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	MANAGEMENT FEE	125,000	125,000			
b	INVESTMENT FEES AND CHA	69,719	69,719			
c	LEGAL AND PROFESSIONAL	14,492		14,492		
d	INSURANCE	11,695		11,695		
e	All other expenses					
25	Total functional expenses. Add lines 1 through 24e	6,211,866	6,182,167	29,699	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)					

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1	790,485
	2	Savings and temporary cash investments	4,023,062	2	4,284,365
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		_	
Š	_			6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	5,715	9	5,981
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	9,645,830	11	9,040,723
	12	Investments—other securities See Part IV, line 11	4,085,755	12	4,861,047
	13	Investments—program-related See Part IV, line 11		13	_
	14	Intangible assets	14,046	14	10,535
	15	Other assets See Part IV, line 11	41,345	15	35,367
	16	Total assets. Add lines 1 through 15 (must equal line 34)	17,815,753	16	19,028,503
	17	Accounts payable and accrued expenses		17	128,238
	18	Grants payable	12,055,653	18	13,599,125
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
аę		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	_
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	4,599,602	25	4,250,000
	26	Total liabilities. Add lines 17 through 25	16,655,255	26	17,977,363
S) d)		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete			
ĕ	27	lines 27 through 29, and lines 33 and 34.	827,865	27	821,204
<u>ಕ</u>	27	Unrestricted net assets	827,800		021,204
<u> </u>	28	Temporarily restricted net assets	332,633	28	229,936
ĭ	29	Permanently restricted net assets	332,633	29	229,936
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
ets ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	1,160,498	33	1,051,140
ž	34	Total liabilities and net assets/fund balances	17,815,753	34	19,028,503
	1	. Sta. Habilities and net assets/fund buildiness	17,015,755	J-7	10,020,000

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,2	296,538
2	Total expenses (must equal Part IX, column (A), line 25)	2		6.3	211,866
3	Revenue less expenses Subtract line 2 from line 1	3		٠,٠	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				84,672
5	Net unrealized gains (losses) on investments	5			L60,498 L94,030
6	Donated services and use of facilities	6			191,000
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,0	51,140
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revi a separate basis, consolidated basis, or both	ewed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	he 2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493317023045

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total 1

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.

2014

Open to Public Inspection

Name of the organization **Employer identification number** SAN ANTONIO LIVESTOCK EXPOSITION **EDUCATIONAL FUND INC** 45-4533237 **Reason for Public Charity Status** (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iii) Type of (iv) Is the organization (v) A mount of (vi) A mount of organization organization listed in your governing monetary support other support (see (described on lines document? (see instructions) instructions) 1- 9 above or IRC section (see instructions)) Yes No (A) SAN ANTONIO LIVESTOCK 741075466 LN9,501(C)(3) Yes 0 **EXPOSITION INC**

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	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	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organizations	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Castian	_	AII	Supporting	0	1:
Section	Α.	AII	Supporting	Organiza	TIONS

Se	ection A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?		163	110
_	If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		No
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		No
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
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.	3с		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		No
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
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 $(2)^7$ 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.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		No
Ŀ	• Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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 .	6		No
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		No
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 II of Schedule L (Form 990).	8		No
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		No
Ŀ	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		No
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 .	9c		No
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		No
Ŀ	DID 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).	10b		
L1	Has the organization accepted a gift or contribution from any of the following persons?	TOD		
	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		No
Ŀ	A family member of a person described in (a) above?	11b		No
	: 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		Νο

Par	t IV Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, 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	Yes	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		No
Se	ection 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 or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All 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 organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax 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		
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		
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 supported organizations played in this regard.	3		
	ation E. Tuna III Functionally Integrated Comparting Organizations			
	The organization is the parent of each of its supported organizations. Complete line 3 below			
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		
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 trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ь	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied 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)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493317023045

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

Open to Public

That Revenue Service Timornation about Schedule B	(1 offil 330) and its instructions is at www.	Hispection Inspection
lame of the organization AN ANTONIO LIVESTOCK EXPOSITION DUCATIONAL FUND INC		Employer identification number 45-4533237
Organizations Maintaining Donor organization answered "Yes" to Form	r Advised Funds or Other Similar n 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate value of contributions to (during year)		
Aggregate value of grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor funds are the organization's property, subject to		onoradvised Yes No
Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?		
	ete if the organization answered "Yes'	to Form 990. Part IV. line 7.
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recressions). Protection of natural habitat Preservation of open space	ne organization (check all that apply) eation or education)	an historically important land area a certified historic structure
Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution i	n the form of a conservation
		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation easeme	ents	2b
Number of conservation easements on a certified	i historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register		2d
Number of conservation easements modified, tra the tax year ▶	nsferred, released, extinguished, or termina	ated by the organization during
Number of states where property subject to cons	ervation easement is located 🗠	<u></u>
Does the organization have a written policy regar enforcement of the conservation easements it ho		andling of violations, and Yes No
Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation eas	ements during the year
A mount of expenses incurred in monitoring, insp	ecting, and enforcing conservation easeme	nts during the year
Does each conservation easement reported on li and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(ı)
In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financ	
rt IIII Organizations Maintaining Collect Complete if the organization answer	ctions of Art, Historical Treasures ed "Yes" to Form 990, Part IV, line 8.	s, or Other Similar Assets.
If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	FAS 116 (ASC 958), not to report in its rev rassets held for public exhibition, educatio	n, or research in furtherance of public
If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide the following amounts relating to	FAS 116 (ASC 958), to report in its revenu rassets held for public exhibition, educatio	ie statement and balance sheet
(i) Revenue included in Form 990, Part VIII, line	e 1	► \$
(ii) Assets included in Form 990, Part X		▶ \$
If the organization received or held works of art, following amounts required to be reported under s		for financial gain, provide the
Revenue included in Form 990, Part VIII, line 1		▶ \$
Assets included in Form 990. Part X		▶ \$

Part	••• Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	cal Tr	<u>easur</u>	es, or C)the	r Simila	ar Ass	ets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of t	he follo	wing that	are a	significa	nt use o	fits	
а	Public exhibition		d	Γ	Loan	rexch	ange prog	rams	;			
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	r the or	ganızatıo	n's ex	cempt pur	pose in		
5	During the year, did the organization solicit of								nılar	_		_
В-	assets to be sold to raise funds rather than t								/" I- E		Yes	No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	ea Y	es to re	orm 99	υ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	forc	ontribut	tions or	r other as:	sets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follov	vingt	able		_					
										Amo	unt	
C	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21,	for e	scrow o	rcusto	dıal accou	ınt lıa	ability?	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	T Check here if the	expl	anatı	on has l	neen pr	ovided in	Part	XIII			\sqcap
Pai	t V Endowment Funds. Complete										· ·	
		(a)Current year) Prior			o years bad				e) Four y	ears back
1a	Beginning of year balance	332,633										
b	Contributions				331,152							
С	Net investment earnings, gains, and losses	1,139			1,481							
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses							_				
g	End of year balance	333,772			332,633							
2	Provide the estimated percentage of the curr	rent year end balan	ce (lın	ie 1g	, columr	n (a)) h	eld as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ► 69 000 %											
c	Temporarily restricted endowment ► 31 (The percentages in lines 2a, 2b, and 2c show	000 % uld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiz	atıon	that	are held	and ad	lmınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations							•		. 3a(i)		No
b	(ii) related organizations	ns listed as require	d on S	che	dule R?			٠.		3a(ii)		No
4	Describe in Part XIII the intended uses of th											
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line:		the o	rgar	ıızatıon	answ	ered 'Ye	s' to	Form 99	0, Parl	t IV, lu	ne
	Description of property	10.			a) Cost o		(b)Cost o basis (of			umulated eciation	(d) B	ook value
1-	_and			+					+		+	
	Buildings		•	\vdash					1			
	Leasehold improvements		•	\vdash					+			
	Equipment		•	\vdash					1			
			•	\vdash					1			
	Other	qual Form 990 Part	X colu	Imp (R) line	10(c))	<u> </u>		1	b -		0
iota	. Aud illies ta tilrough te (Column (a) must e	quai roitti 990, Part	A, COIL	unn (, iine .	LU(C).)		•		F		

Part VII Investments—Other Securities. Cor See Form 990, Part X, line 12.	mplete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
(3)Other		
(A) FROST TOTAL RETURN BOND FUND	4,861,047	С
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	4,861,047	
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	n answered 'Ves' to Form 990	Part IV line 11 d See Form 990 Part V line 15
(a) Descr		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the Part X, line 25.	anization answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
CURRENT PORTION - SCHOLARSHIPS	4,250,000	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	4,250,000	
		e organization's financial statements that reports the

Par		Revenue per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line :		nts With Revenue	per R	leturn Complete If
1	<u>-</u>	er support per audited financial statements			1	37,217,111
2	A mounts included on line 1 b	ut not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a	-194,030		
b	Donated services and use of	facilities	2b			
c	Recoveries of prior year grant	ts	2c		1	
d	Other (Describe in Part XIII)	2d	31,114,603	1	
e	Add lines 2a through 2d				2e	30,920,573
3	Subtract line 2e from line 1 .				3	6,296,538
4	A mounts included on Form 99	90, Part VIII, line 12, but not on line 1				
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b				4c	0
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line	12)		5	6,296,538
Part		Expenses per Audited Financial Stanswered 'Yes' to Form 990, Part IV, line			s per	Return. Complete
1		er audited financial statements			1	32,958,869
2	A mounts included on line 1 b	ut not on Form 990, Part IX, line 25				
а	Donated services and use of	facilities	2a			
b	Prior year adjustments		2b			
c	Other losses		2c		1	
d	Other (Describe in Part XIII)	2d	26,747,003	3	
e	Add lines 2a through 2d				2e	26,747,003
3	Subtract line 2e from line 1 .				3	6,211,866
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b				4c	0
5	Total expenses Add lines 3 a	ınd 4c. (Thıs must equal Form 990, Part I, lır	ie 18)		5	6,211,866
Part	Supplemental In	formation				
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a I, lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
PART	V, LINE 4	THE INITIAL PRINCIPAL CONTRIBUTION FROM THIS IS TO BE USED TO FUND S			ICTE	O AND THE EARNINGS
	XI, LINE 2D - OTHER STMENTS	CONSOLIDATED FINANCIAL WITH S A	LE - S	S A L E 'S ALLOCATIO	N	
<u>A D J U</u>	XII, LINE 2D - OTHER STMENTS	CONSOLIDATED FINANCIAL WITH S A	LE -S	SALE'S ALLOCATIO	N	
SCHE	DULE D, PART V, LINE 4	PRIOR TO THE CURRENT YEAR, DONOR ENDOWMENTS ALTHOUGH NOT FORM EARNINGS FROM THESE ENDOWMENTS AND NEEDY THE TOTAL OF THESE TW	ALIZED S TO BE	D, THE AGREEMENTS E USED TO FUND SCH	WOUL OLAR	D LIMIT THE SHIPS FOR THE POOR

\$333,772 AT MARCH 31, 2015, AND HAVE BEEN INVESTED CONSERVATIVELY IN

CERTIFICATES OF DEPOSIT SINCE THEIR INITIAL DONATIONS

Concada D (Form 330) 2013				
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493317023045 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization SAN ANTONIO LIVESTOCK EXPOSITION 45-4533237 EDUCATIONAL FUND INC Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Schedule I	(Form 990) 2014
Part III	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.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.				
Return Reference	Explanation			
	THE ORGANIZATION GIVES OUT GRANTS AND SCHOLARSHIPS TO SCHOOLS AND OTHER TAX EXEMPT ENTITIES TO FURTHER THEIR EXEMPT PURPOSE THE ORGANIZATION REQUIRES THE AWARDED ENTITIES TO SUBMIT REPORTS RELATED TO THE USEAGE OF THE FUNDS RECEIVED, WHICH HELPS IN THE DETERMINATION OF FUTURE AWARDS			

Schedule I (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 45-4533237

Name: SAN ANTONIO LIVESTOCK EXPOSITION

EDUCATIONAL FUND INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEPHENS INSTITUTEDBA ACADEMY79 NEW MONTGOMERY SAN FRANCISCO,CA 94105	94-1637804	PUBLIC SCHOOL	1,683				SCHOLARSHIPS FOR STUDENTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ABILENE CHRISTIAN UNIVERSITYACU BOX 29007 ABILENE,TX 79699	75-0851900	501 (C)(3)	8,182				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ALAMO COLLEGES FOUNDATION INC201 W SHERIDAN SUITE C-3 SAN ANTONIO,TX 78204	74-2422589	501 (C)(3)	85,963				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ALAMO COMMUNITY COLLEGE DISTRICT201 W SHERIDAN SAN ANTONIO,TX 78204	74-6002173	PUBLIC SCHOOL	0				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
AMARILLO JUNIOR COLLEGE DISTRICTPO BOX 447 AMARILLO,TX 79178	75-6000031	PUBLIC SCHOOL	2,400				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ALVIN COMMUNITY COLLEGE3110 MUSTANG RD ALVIN,TX 77511	74-1405330	PUBLIC SCHOOL	1,000				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ANGELO STATE UNIVERSITYPO BOX 11015 SAN ANGELO,TX 76909	75-6002403	PUBLIC SCHOOL	76,070				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ANGELINA COLLEGEPO BOX 1768 LUFKIN,TX 75902	75-1244347	PUBLIC SCHOOL	1,000				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AUSTIN COLLEGE900 N GRAND AVE SHERMAN,TX 75090	75-0827409	501 (C)(3)	1,250				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AUSTIN COMMUNITY COLLEGE DISTRICT9101 TUSCANY WAY AUSTIN,TX 78754	74-1742036	PUBLIC SCHOOL	5,750				SCHOLARSHIPS FOR STUDENTS			

<u> Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BAYLOR UNIVERSITYONE BEAR PLACE WACO,TX 76798	74-1159753	501 (C)(3)	15,960				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BELHAVEN UNIVERSITY 1500 PEACHTREE ST JACKSON,MS 39202	64-0303069	PUBLIC SCHOOL	8,220				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BEXAR COUNTY MASTER GARDENERS3355 CHERRY RIDGE DR 208 SAN ANTONIO,TX 78230	74-2600978	501 (C)(3)	37,800				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BLINN COLLEGE902 COLLEGE AVE BRENHAM,TX 77833	74-6000400	PUBLIC SCHOOL	52,025				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CENTRAL TEXAS COLLEGE 6200 W CENTRAL EXPWY KERRVILLE,TX 76540	74-1539003	PRIVATE SCHOOL	1,000				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CLARENDON COLLEGEPO BOX 968 CLARENDON,TX 79226	75-6055652	PUBLIC SCHOOL	14,700				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COASTAL BEND COLLEGE 3800 CHARCO ROAD BEEVILLE,TX 78102	74-1542306	PUBLIC SCHOOL	2,250				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EAST TEXAS BAPTIST UNIVERSITY1209 NORTH GROVE ST MARSHALL,TX 75670	75-0859801	501 (C)(3)	2,000				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FORT SCOTT COMMUNITY COLLEGE END2108 S HORTON FORT SCOTT,KS 66701	23-7415312	501 (C)(3)	1,500				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GRAYSON COUNTY COLLEGE6101 GRAYSON COLLEGE DENISON,TX 75020	75-1169719	PUBLIC SCHOOL	1,000				SCHOLARSHIPS FOR STUDENTS		

<u>Form 990,Schedule I, Pa</u>	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GROVE CITY COLLEGE100 CAMPUS DR GROVE CITY, PA 16127	25-1065148	501 (C)(3)	1,537				SCHOLARSHIPS FOR STUDENTS			

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HARDIN-SIMMONS UNIVERSITYHSU 16025 ABILENE,TX 79698	75-0808791	PUBLIC SCHOOL	5,942				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PRESIDENT AND FELLOWS OF HARVARD1033 MASSACHUSETTES AVE 2ND FLOOR CAMBRIDGE, MA 02138	04-2103680	501 (C)(3)	3,342				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HILL COLLEGEPO BOX 619 HILSBORO,TX 76645	74-1404239	PUBLIC SCHOOL	1,000				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HOWARD PAYNE UNIVERSITY1000 FISK AVE BROWNWOOD,TX 76801	75-0800653	501 (C)(3)	3,250				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
JOHN BROWN UNIVERSITY 2000 WEST UNIVERSITY SILOAM SPRINGS,TX 72761	71-0239576	PUBLIC SCHOOL	3,000				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KANSAS STATE UNIVERSITY102 ANDERSON HALL MANHATTAN,KS 66506	48-0771751	PUBLIC SCHOOL	1,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LAMAR UNIVERSITYPO BOX 10003 BEUMONT,TX 77710	74-6000298	PUBLIC SCHOOL	4,000				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LINCOLN EDUCATIONAL SERVICES DBA LINCOLN COLLEGE OF TECHNOLOGY 2915 ALOUETTE DR GRAND PRAIRIE,TX 75052		PUBLIC SCHOOL	2,400				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
LUBBOCK CHRISTIAN UNIVERSITY5601 19TH ST LUBBOCK,TX 79407	75-0950119	501 (C)(3)	4,750				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LYME ACADEMY OF FINE ARTS INC DBA LYME ACADEMY COLLEGE OF FINE ARTS84 LYME ST OLD LYME,CT 060942210	06-0942210	501 (C)(3)	3,532				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
MCLENNAN COLLEGE1400 COLLEGE DR WACO,TX 76708	74-1541260	PUBLIC SCHOOL	2,750				SCHOLARSHIPS FOR STUDENTS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MCMURRY UNIVERSITY BOX 308 MCMURRY STATION ABILENE,TX 79697	75-0855633	501 (C)(3)	7,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MIDWESTERN STATE UNIVERSITY3410 TAFT BLVD WICHITA FALLS,TX 76308	75-6001738	PUBLIC SCHOOL	7,750				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NAVARRO COLLEGE3200 W 7TH AVE CORSICANA,TX 75110	75-6002129	PUBLIC SCHOOL	0				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
N E TEXAS COMMUNITY COLLEGEPO BOX 1307 MOUNT PLEASANT,TX 75456	75-1963242	PUBLIC SCHOOL	2,200				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTH CENTRAL TEXAS COLLEGE1525 W CALIFORNIA GAINESVILLE,TX 76240	75-1050382	PUBLIC SCHOOL	7,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTHWOOD UNIVERSITY 4000 WHITING DR MIDLAND,MI 48640	38-1692468	501 (C)(3)	3,000				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OUR LADY OF THE LAKE UNIVERSITY411 SW 24TH ST SAN ANTONIO,TX 78207	74-1109631	501 (C)(3)	76,875				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PARIS JUNIOR COLLEGE 2400 CLARKSVILLE ST PARIS,TX 75460	75-6002205	PUBLIC SCHOOL	6,500				SCHOLARSHIPS FOR STUDENTS		

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PRAIRIE VIEW A&M UNIVERSITYPO BOX 1005 PRAIRIE VIEW,TX 77446	74-6001078	PUBLIC SCHOOL	26,875				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
RANGER COLLEGE1100 COLLEGE CIRCLE RANGER,TX 76470	75-6002296	PUBLIC SCHOOL	3,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
REDLANDS COMMUNITY COLLEGE1300 SOUTH COUNTRY CLUB ROAD EL RENO,OK 73036	73-6017987	PUBLIC SCHOOL	3,500				SCHOLARSHIPS FOR STUDENTS		

<u>Form 990,</u> Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RICE UNIVERSITY6100 MAIN ST HOUSTON,TX 77005	74-1109620	501 (C)(3)	8,500				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RINGLING COLLEGE OF ART & DESIGN2700 NORTH TAMIAMI TRAIL SARASOTA,FL 34234	59-0637903	501 (C)(3)	1,538				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAM HOUSTON STATE UNIVERSITYPO BOX 2537 HUNTSVILLE,TX 77341	74-6001430	PUBLIC SCHOOL	62,500				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SAN ANTONIO BOTANICAL SOCIETY555 FUNSTON PLACE SAN ANTONIO,TX 78209	74-2178792	501 (C)(3)	9,200				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SAN ANTONIO YOUNG WOMEN'S LEADERSHIP303 PEARL PKWY STE 114 SAN ANTONIO,TX 78215	27-5164994	501 (C)(3)	7,328				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SAN JACINTO COLLEGE 4626 FAIRMONT PKWY STE 103 PASADENA,TX 77504	74-6028285	PUBLIC SCHOOL	3,150				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAVANNAH COLLEGE OF ART & DESIGNPO BOX 2701 SAVANNAH,GA 31402	58-1357177	501 (C)(3)	13,887				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SHERIDAN COLLEGE1430 TRAFALGAR RD OAKVILLE, ONTARIO CA	20-8519039	PUBLIC SCHOOL	3,342				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
SOUTH PLAINS COLLEGE 1401 S COLLEGE AVE LEVELLAND,TX 79336	75-6004667	PUBLIC SCHOOL	20,625				SCHOLARSHIPS FOR STUDENTS				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOUTHERN METHODIST UNIVERSITYPO BOX 750261 DALLAS,TX 75275	75-0800689	501 (C)(3)	1,250				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ST MARY'S UNIVERSITY ONE CAMINO SANTA MARIA SAN ANTONIO,TX 78228	74-1143128	501 (C)(3)	105,750				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
STEPHEN FAUSTIN STATE UNIVERSITY1936 NORTH ST NACOGDOCHES,TX 75962	75-6002514	PUBLIC SCHOOL	7,000				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SUL ROSS STATE UNIVERSITYPO BOX C-144 ALPINE,TX 79832	74-6000027	PUBLIC SCHOOL	29,750				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SW TEXAS JUNIOR COLLEGE2401 GARNER FIELD RD UVALDE,TX 78801	74-6002420	PUBLIC SCHOOL	14,000				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TARLETON STATE UNIVERSITY1333 W WASHINGTON STEPHENVILLE,TX 76401	75-6001870	PUBLIC SCHOOL	117,507				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TARRANT COUNTY COLLEGE FOUNDATION 1500 HOUSTON ST FORT WORTH,TX 76102	75-2277475	501 (C)(3)	1,000				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS 4-H YOUTH DEVELOPMENT FOUNDATIONPO BOX 11020 COLLEGE STATION,TX 77842	74-6091147	501 (C)(3)	6,104				SCHOLARSHIPS FOR STUDENTS AND GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEXAS A&M FOUNDATION 401 GEORGE BUSH DR COLLEGE STATION,TX 77840	74-2245072	501 (C)(3)	47,208				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
TEXAS A&M UNIVERSITY 401 GEORGE BUSH DR COLLEGE STATION,TX 77840	74-6000531	PUBLIC SCHOOL	601,337				SCHOLARSHIPS FOR STUDENTS				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEXAS A&M UNIVERSITY COMMERCEPO BOX 3011 COMMERCE,TX 75429	75-6001353	PUBLIC SCHOOL	11,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS A&M UNIVERSITY AT CORPUS CHRISTI6300 OCEAN DR CORPUS CHRISTI,TX 78412	74-1760663	PUBLIC SCHOOL	14,000				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS A&M UNIVERSITY AT GALVESTONPO BOX 1675 GALVESTON,TX 77553	74-2125225	PUBLIC SCHOOL	6,624				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS A&M UNIVERSITY AT SAN ANTONIO1450 GILLETTE BLVD SAN ANTONIO,TX 78224	26-4168896	PUBLIC SCHOOL	21,625				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS AGRILIFE EXTENSION SERVICE2147 TAMU COLLEGE STATION,TX 77843	74-6000531	PUBLIC SCHOOL	33,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS CHRISTIAN UNIVERSITYPO BOX 297011 FORT WORTH,TX 76129	75-0827465	501 (C)(3)	13,655				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS LUTHERAN UNIVERSITY1000 WEST COURT ST SEGUIN,TX 78155	74-1109748	501 (C)(3)	9,082				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS SOUTHERN UNIVERSITY3100 CLEBURNE ST HOUSTON,TX 77004	74-6001391	501 (C)(3)	4,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS STATE TECHNICAL COLLEGE REGENTS CIRCLE-WACO3801 CAMPUS DR WACO,TX 76705	75-2892470	501 (C)(3)	8,900				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS STATE UNIVERSITY 601 UNIVERSITY SAN MARCOS,TX 78666	74-6002248	PUBLIC SCHOOL	84,730				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEXAS TECH FOUNDATION PO BOX 42123 LUBBOCK,TX 79409	75-6043842	501 (C)(3)	212,633				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS TECH UNIVERSITY PO BOX 42123 LUBBOCK,TX 79409	75-6002622	PUBLIC SCHOOL	283,275				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS WOMEN'S UNIVERSITYPO BOX 425559 DENTON,TX 76204	75-6002618	PUBLIC SCHOOL	1,250				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE FOREVER FOUNDATION FOR TEXAS WILDLIFE2800 NE LOOP 410 SUITE 105 SAN ANTONIO,TX 78218	74-2605516	501 (C)(3)	236,500				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE UNIVERSITY OF TEXAS FOUNDATION INC PO BOX 250 AUSTIN,TX 78767	74-1587488	PUBLIC SCHOOL	267,500				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TRINITY UNIVERSITY715 STADIUM DR SAN ANTONIO,TX 78212	74-1109633	501 (C)(3)	35,064				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TYLER JUNIOR COLLEGE PO BOX 9020 TYLER,TX 75711	75-6002676	PUBLIC SCHOOL	1,250				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF ALABAMA BOARD OF TRUSTEESBOX 870136 TUSCALOOSA,AL 35487	63-6001138	501 (C)(3)	2,574				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MARY HARDIN BAYLOR900 COLLEGE ST BELTON,TX 76513	74-1161940	501 (C)(3)	9,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MISSISSIPPIPO BOX 1848 UNIVESITY,MS 38677	64-6001159	PUBLIC SCHOOL	2,108				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF TEXAS AT ARLINGTON701 S NEDDERMAN DR ARLINGTON,TX 76019	75-6000121	PUBLIC SCHOOL	5,250				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF TEXAS AT DALLAS800 W CAMPBELL RD RICHARDSON,TX 75080	75-1305566	PUBLIC SCHOOL	2,000				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF TEXAS AT AUSTINPO BOX 7758 UT STATION AUSTIN,TX 78713	74-6000203	PUBLIC SCHOOL	27,057				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF NORTH TEXASPO BOX 311370 DENTON,TX 76203	75-6002149	PRIVATE SCHOOL	1,000				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF TEXAS AT SAN ANTONIO6900 N LOOP 1604 SAN ANTONIO,TX 78249	74-1717115	PUBLIC SCHOOL	119,228				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SA7703 FLOYD CURL DR SAN ANTONIO,TX 78229	74-1586031	PUBLIC SCHOOL	9,468				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF TEXAS PAN AMERICAN1201 WEST UNIVERSITY DR EDINBURG,TX 78541	74-6002942	PUBLIC SCHOOL	2,500				SCHOLARSHIPS FOR STUDENTS		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF THE INCARNATE WORD4301 BROADWAY SAN ANTONIO,TX 78209	74-1109661	501 (C)(3)	54,750				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VERNON COLLEGE4400 COLLEGE DRIVE VERNON,TX 76384	75-1325933	PRIVATE SCHOOL	2,500				SCHOLARSHIPS FOR STUDENTS		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WAYLAND BAPTIST COLLEGE1900 WEST 7TH ST PLAINVIEW,TX 79072	75-0859668	501 (C)(3)	7,484				SCHOLARSHIPS FOR STUDENTS			

<u> Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEATHERFORD COLLEGE 225 COLLEGE PARK DR WEATHERFORD,TX 76086	75-6002862	PUBLIC SCHOOL	8,250				SCHOLARSHIPS FOR STUDENTS			

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEST TEXAS A&M UNIVERSITYWTAMU BOX 60939 CANYON,TX 79016	75-6031405	PUBLIC SCHOOL	61,375				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESTMONT COLLEGE955 LA PAZ ROAD SANTA BARBARA,CA 93108	95-1684793	501 (C)(3)	13,394				SCHOLARSHIPS FOR STUDENTS			

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WHARTON COUNTY JUNIOR COLLEGE911 BOLING HWY WHARTON,TX 77488	74-6002562	PUBLIC SCHOOL	8,500				SCHOLARSHIPS FOR STUDENTS			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WILLIAM L PAYLA DBA HAZ CO FIRE TRAININGPO BOX 3063 SHERMAN,TX 75091	45-5021141	PRIVATE SCHOOL	5,000				SCHOLARSHIPS FOR STUDENTS			

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DLN: 93493317023045

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization SAN ANTONIO LIVESTOCK EXPOSITION EDUCATIONAL FUND INC

Department of the Treasury

Internal Revenue Service

Employer identification number

45-4533237

Pa	rtII Questions Regarding Compensatio	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b		
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	hat appl	·			
	Compensation committee	Г	Written employment contract			
	☐ Independent compensation consultant	ᅜ	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymer	nt?	4a		No
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-b	pased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines $4a-c$, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations m	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,	paid or a	accured pursuant to a contract that was			
	subject to the initial contract exception described i					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow th section $534958-6(c)$?	ie rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
	(i) (ii)	374,750 0	100,000	0	15,300 0	6,374	496,424	0

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 4B	IN 2008, THE AUDIT, FINANCE AND COMPENSATION SUBCOMMITTEE OF THE EXECUTIVE COMMITTEE OF SALE ESTABLISHED A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN (SERP) FOR THE EXECUTIVE LEADERSHIP OF SALE WITH THE INTENT TO PROMOTE STABILITY, RETENTION, CAPABILITY, AND ATTRACTIVENESS TO THE EXECUTIVE LEADERSHIP SINCE THE EXECUTIVE DIRECTOR HAD BEEN WORKING AT SALE SINCE 1989 AND THE OTHERS FOR SHORTER PERIODS, SALE WAS HAVING TO ACCELERATE PAYMENTS TO FUND THE PLAN THE FOLLOWING INDIVIDUALS WERE PARTICIPANTS IN THE SECTION 457(F) NONQUALIFIED DEFERRED COMPENSATION PLAN, FOR WHICH A CREDIT BALANCE OF \$(18,675) WAS RECORDED DURING THE FISCAL YEAR ENDED MARCH 31, 2015, (THE CREDIT BALANCE IS DUE TO PAMELA J REW LEAVING SALE PRIOR TO BEING VESTED, AND HER ACCUMULATED CONTRIBUTIONS AND EARNINGS FORFEITED TO
	THE PLAN ADDITIONAL CREDITS RELATED TO THIS ARE AS FOLLOWS) THE INDIVIDUALS ARE GLEN A PHILLIPS, PAMELA J REW, DEBBIE SCHRONK, AND BETTY ROST IN ADDITION, AN ACCRUAL OF THESE BENEFITS WERE MADE FOR CREDIT OF \$(40,703) FOR THE FISCAL YEAR ENDED MARCH 31, 2015 INCLUDED IN PART II, COLUMN C (BUT ALSO INCLUDES THE EMPLOYER'S CONTRIBUTION TO THEIR RETIREMENT PLAN) ARE THE CURRENT YEAR DEFERRALS FOR THE SERP THE TOTALS ARE AS FOLLOWS GLEN A PHILLIPS - \$19,619, PAMELA J REW - (\$146,548), DEBBIE SCHRONK - \$37,237, AND BETTY ROST - \$71,017 A FEW OTHER THINGS CONSIDERED WHEN DRAFTING THE ARRANGEMENT TOOK INTO EFFECT 1) THE FUNDS ARE PAYABLE AT RETIREMENT AND SUBJECT TO SUBSTANTIAL RISK OF FORFEITURE 2) THE AUDIT, FINANCE AND COMPENSATION SUBCOMMITTEE HAS REVIEWED THE FORM 990, AND 3) SALE RELIED UPON REBUTTABLE PRESUMPTION GUIDELINES

Schedule J (Form 990) 2014

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DLN: 93493317023045

Employer identification number

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

Open to Public Inspection

SAN ANTONIO LIV EDUCATIONAL FU	ESTOCK EXPOSITION ND INC							15-45	33237				
	ess Benefit Tra						(c)(29) orgar	nizations		40h		
	ne of disqualified pe			hip between		(c) Desc					(d) Corrected?		
1 (=)				and organiza		(3, 2 33				·	Yes	No	
4958. 3 Enter the Part II Loans to a Complete if the	amount of tax incu amount of tax, if ar nd/or From In ne organization ans mount on Form 990 (b) Relationship with organization	y, on line 2, terested if wered "Yes"	Persons on Form 9 5, 6, or 2	mbursed by 990-EZ, Part 2	the organizati	on	. <u>'</u> .	, line 2	▶ \$	the org	anization (i)Wri	tten	
			+	110			1.05	110	1.05	+	+	1.0	
Total Part III G r	ants or Assista	► \$	fiting Ir	nterested	Persons.					•		,	
	mplete if the org					art IV, line 2	27.						
(a) Name of perso		Relationship ested person organizatio	and the	(c) A mount	t of assistanc	e (d) Туре	ofass	sistanc	e (e) Purpo	se of ass	istance	

Part IV Business Transactions Complete if the organizat (a) Name of interested person		(d) Description of transaction	(e) Sh of organiz reveni	: zation's
			Yes	No
(1) TINA HAYNES	TINA HAYNES IS AN OFFICER/OWNER OF SANGER AND ALTGELT INSURANCE AGENCY	THE EDUCATION FUND/S A L E HAS PROCURED INSURANCE FROM SANGER AND ALTGELT INSURANCE AGENCY FOR MANY YEARS, AND TINA HAS BEEN AN OFFICER WITH THE EDUCATION FUND AND		No

Part V Supplemental Inform	••					
Provide additional information for responses to questions on Schedule L (see instructions)						
Return Reference	Explanation					

Schedule L (Form 990 or 990-EZ) 2014

S A L E THROUGH THE CURRENT FISCAL YEAR ENDED MARCH 31, 2015 efile GRAPHIC print - DO NOT PROCESS

SCHEDULE 0

(Form 990 or 990-EZ)

Return Reference

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493317023045

OMB No 1545-0047

2014

Open to Public
Inspection

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Name of the organization
SAN ANTONIO LIVESTOCK EXPOSITION
EDUCATIONAL FUND INC

Employer identification number
45-4533237

Explanation

990 Schedule O, Supplemental Information

	'
FORM 990, PART VI, SECTION A, LINE 2	ONE OF THE DIRECTORS IS AN OFFICER/PART OWNER OF A BANK THAT PROVIDES SERVICES FOR THE ORGANIZATION
FORM 990, PART VI, SECTION A, LINE 7A	DURING S A L E'S ANNUAL MEETING, THE LIFE MEMBERS ELECT S A L E'S CURRENT YEAR'S OFFICER S FROM A SELECTED GROUP OF INDIVIDUALS NOMINATED BY THE ELECTION COMMITTEE. THE BOARD MEMBERS OF THE EDUCATION FUND ARE SELECTED FROM THIS GROUP OF ELECTED OFFICERS
FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE, A SUB-COMMITTEE OF S A L E 'S FINANCE COMMITTEE/EXECUTIVE COMMITTEE, ALONG WITH SENIOR MANAGEMENT OF S A L E, REVIEWS THE FORM 990, AND ANY RECOMMENDATIONS ARE INCORPORATED IN THE RETURN, FOR WHICH THEY GIVE THEIR FINAL APPROVAL
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST STATEMENTS ARE CIRCULATED TO THE STAFF AND DIRECTORS EACH YEAR AND ANY CONFLICTING INTERESTS ARE NOTED AND FOLLOWED
FORM 990, PART VI, SECTION B, LINE 15	THE EDUCATION FUND HAS NO EMPLOYEES ADMINISTRATIVE AND ACCOUNTING FUNCTIONS ARE TO BE REIMBURSED TO S A L E
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION WILL FURNISH A COPY OF THEIR FORM 990 AND FORM 1023 UPON WRITTEN REQUEST
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION WILL FURNISH A COPY OF THEIR GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS UPON WRITTEN REQUEST
FORM 990, PART XII, PAGE 12, LINE 2C	THERE HAS BEEN NO CHANGE FROM THE PRIOR YEAR IN THE OVERSIGHT OR SELECTION PROCESS PERFORM ED BY THE BOARD IN REVIEWING THE AUDIT AND TAX RETURN AND THE SELECTION OF THE AUDITING FIRM

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DLN: 93493317023045

2014

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

Name of the organization SAN ANTONIO LIVESTOCK EXPOSITION **EDUCATIONAL FUND INC**

Employer identification number

45-4533237

Part I	Identification of Disregarded	Entities Complete	if the organization answered	"Yes" on Form	1 990, Part IV, line 33.
--------	-------------------------------	--------------------------	------------------------------	---------------	--------------------------

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
			·		

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co enti	512(b) ntrolled
						Yes	No
PO BOX 200230	THE EDUCATIONAL FUND SERVES AS A SUPPORTING ORGANIZATION TO SALE	TX	501(C)(3)		SAN ANTONIO LIVESTOCK EXPOSITION INC	Yes	

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	ation ansv	ered "Ye	s" on Form	990, Part 1	۷, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											С

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				,		1	Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)		
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	(b)(13)	
		(state or foreign		corp,		assets		controlled		
		country)		or trust)				entity?		
								Yes No		

Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	
aic v	Transactions with Related organizations complete if the organization answered Tes on Form 350, Further, line 31, 330, or 30.	

 mplete line 1 if any entity is liste	d in Parts II. III. or IV of this schedule	

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- **b** Gift, grant, or capital contribution to related organization(s)
- **c** Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- **f** Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- **p** Reimbursement paid to related organization(s) for expenses
- **q** Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)
- If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SAN ANTONIO LIVESTOCK EXPOSITION INC (SALE)	С	5,621,227	ACTUAL BALANCES TRANSFERRED
(2) SAN ANTONIO LIVESTOCK EXPOSITION INC (SALE)	N	125,000	ACTUAL BALANCES TRANSFERRED/ACC'D

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
/		 .	<u> </u>							

Schedule R (Form 990) 2014

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**