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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

Open to Public Inspection

F	or cal	enda	r year 2015, or tax year	beginning	, 2015	, and ending		<u> </u>	
	lame of fo						Α	Employer identification nur	nber
1	GRACE FOUNDATION Number and street (or PO box number if mail is not delivered to street address) Room/s						В	26-0225881 Telephone number (see instri	ictions)
	1423-B BRAZOS DRIVE						-	(936) 291-759	•
7	City or town, state or province, country, and ZIP or foreign postal code								
٠	HUNT	SVI	LLE		TX	77320	C	If exemption application is	pending, check here.
(C he	ck al	I that apply Initia	ıl return	Initial return of a forme	er public charity	D	1 Foreign organizations, che	ck here ▶ 🗍
				l return	Amended return		Ì	-	<u></u>
_				ess change	Name change			2 Foreign organizations mee here and attach computation	ing the 85% test, check
,	_	_ ′	pe of organization		(c)(3) exempt private for		<u> </u>		
_			ction 4947(a)(1) nonexer			rivate foundation	E	If private foundation status under section 507(b)(1)(A)	
			et value of all assets at end of y II, column (c), line 16)		ounting method XC	ashAccrual	ĺ	2.7001 30011011 507 (2)(1)(1)	
	► s	,,, an	238.		Other (specify) column (d) must be on c	esh basis I	F	If the foundation is in a 60- under section 507(b)(1)(B)	
٢	Part I	TA	nalysis of Revenue				<u> </u>	T	
L	raiti				(a) Revenue and expenses per books	(b) Net investment	t	(c) Adjusted net income	(d) Disbursements for charitable
		cc	xpenses (The total of plumns (b), (c), and (d) m	nay not neces-	expenses per books	l licomic		income.	purposes
			arily equal the amounts in ee instructions))	n column (a)					(cash basis only)
_		1	Contributions, gifts, grants, etc, receiv	ved (attach schedule) • •	38,000.				
		2		ot required to attach Sch B	·				
(C	?	,	Interest on savings and temporary case	ch investments	600			600	
2016) !	3	Dividends and interest from securities		680. 800.	80	0.	680.	
5-4		5 8	3 Gross rents				<u> </u>	000.	<u> </u>
e		ļ	Net rental income or (loss)					 	
\geq	R	R 6 a Net gain or (loss) from sale of assets not on line 10							
NOV	b Gross sales price for all assets on line 6a								
SCANNED	E N U	8	Net short-term capital gain Income modifications					ļ	
4	Ĕ		Gross sales less			<u> </u>			
₹			returns and allowances						
		ŧ	D Less Cast of goods sold	-					
<i>₩</i>		(Gross profit or (loss) (attach schedule	e)					
		11	Other income (attach schedule)					
-		12	Total Add lines 1 through 11		-618,036.	1,48	0.	1,480.	
		13	Other employee salaries and	•					
		15	Pension plans, employee bene	•		 		 	
	A	16:	a Legal fees (attach schedule).						
	D M	ı	Accounting fees (attach sch).					1 Pr	//
	I N	(C Other prof fees (attach sch) .					11	11 rep
	PS	17	Interest					181	
	P S T R A T T	18	Taxes (attach schedule)(see instrs)	EORE IGN, TAX.	120.	12	0.	NON 1991	701
	A A	19	Depreciation (attach schedule) and depletion						1 5 22.5 787
	N Y	20	Occupancy					L OGD	121
	GÉ	21	Travel, conferences, and meet	-	4,500.			(3)	11. 117 3
	A E X D P	22	Printing and publications				_	ļ	
	E	23	Other expenses (attach schedu See Line 23 Stmt	uie)	4,275.				
	N S	24	Total operating and administ	trative	7,213.			 	
	E S	~~	expenses Add lines 13 throug		8,895.	12	0.		
		25	Contributions, gifts, grants paid		663,864.				663,864.
		26	Total expenses and disburse		(70 750	1.0	. ^		662 064
_		27	Add lines 24 and 25 · · · · Subtract line 26 from line 12		672,759.	12	υ.		663,864.
		ι – ·	a Excess of revenue over expe	enses					,
			and disbursements		-1,290,795.				
			b Net investment income (if ne	-		1,36	0.		
-			C Adjusted net Income (if negat	tive, enter -0-)	<u> </u>	<u> </u>		1,480.	L_ <u></u>

Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 1 1,292,954 Enter amount from Part I, line 27a 2 -1,290,795. Other increases not included in line 2 (itemize) . . 3 Add lines 1, 2, and 3 4 2,159. Decreases not included in line 2 (itemize) • See Other Decreases Stmt 5 921 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 238

(a) List and describ	the kind(s) of property sold (e g , real e lise, or common stock, 200 shares MLC C	estate, (b) How a	chase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a					-
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
а					
b					
С					
d					
e					
Complete only for assets show	wing gain in column (h) and owned by the	foundation on 12/31/69		(I) Gains (Co	i (h)
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	T (gain minus col (k), b nan -0-) or Losses (fr	ut not less
a					
b					
c					
d					
e					
2 Capital gain net income or (ne	et capital loss) If gain, also e	nter in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) and	(6).	 -		
If gain, also enter in Part I, line	e 8, column (c) (see instructions) If (loss)	, enter -0-	3		
	ler Section 4940(e) for Reduced		<u> </u>		
	e foundations subject to the section 4940		COITIE		
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable amoun	ete this part		Yes	No
1 Enter the appropriate amount	in each column for each year, see the ins	structions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(col	(d) Distribution (b) divided by co	
2014	167,023.	1,604,322	1 -		0.104108
2013	241,989.	1,870,121			0.129398
2012	163,208.	2,680,746			0.060882
2011	189,746.	3,182,177			0.059628
2010	158,300.	2,708,750	T		0.058440
2 Total of line 1, column (d)			2		0.412456
3 Average distribution ratio for the number of years the foundation	he 5-year base period — divide the total c in has been in existence if less than 5 yea	on line 2 by 5, or by the ars	3		0.082491
4 Enter the net value of nonchar	ritable-use assets for 2015 from Part X, In	ne 5	4		1,175,661.
5 Multiply line 4 by line 3			5		96,981.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		14.
7 Add lines 5 and 6			7	 	96,995.
	rom Part XII, line 4		8	<u> </u>	663,864.
If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI, line	1b, and complete that part using a 1	% tax	rate. See the	

	(1) On the foundation] [
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers * \$	-		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	If the annual of Market later 7, has the foundation formated a popular Form 200 DF to the Atlanta Control			İ
Ç	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)			
J	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	10		١.,
	and addresses	rm 990	DE /	X
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Form	1990-PF (2015) GRACE FOUNDATION 26-022588	1	P	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13		13	Х	
	Website address · · · · · · · · · · · · · · · · · ·			
14	Website address N/A The books are in care of R S OHENDALSKI, TRUSTEE Telephone no (936)	_2 <u>91</u>	<u>-759</u>	1
	Located at 1423B BRAZOS DR HUNTSVILLE TX ZIP+4 //320			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			Х О.
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ì	İ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	}		
t	o If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	i.		
	If 'Yes,' list the years 20 _ , 20 _ , 20 , 20			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	- 5		
	► 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
t	o If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)	3 b	, ~	
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4 b		X
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Form 990-PF (2015) GRACE FOUNDATION			26-022	25881	Page 6		
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)				
5 a During the year did the foundation pay or incur a(1) Carry on propaganda, or otherwise attempt t		ection 4945(e))?	Yes X	No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel, stu	dy, or other similar purpo	oses?	Yes X	No			
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organi	zation described	Yes X	No			
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or ai	rary, or nimals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	transactions fail to qualif current notice regarding	y under the exceptions disaster assistance	· • • • • • • • • • • • • • • • • • • •	5 b			
Organizations relying on a current notice regardi	ng disaster assistance ch	neck here	<i>.</i>				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ılıty for the grant?		Yes] No			
If 'Yes,' attach the statement required by Regular	•	•			ļ		
6 a Did the foundation, during the year, receive any to on a personal benefit contract?]No			
b Did the foundation, during the year, pay premium If 'Yes' to 6b, file Form 8870	is, directly or indirectly, o	n a personal benefit con	tract?	6 b	X		
7 a At any time during the tax year, was the foundati	on a party to a prohibited	I tax shelter transaction?	Yes	INO			
b If 'Yes,' did the foundation receive any proceeds]			
Part VIII Information About Officers, D					s,		
and Contractors							
1 List all officers, directors, trustees, foundation				· · · · · · · · · · · · · · · · · · ·			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other al	e account, llowances		
R S OHENDALSKI							
HUNTSVILLE	TRUSTEE						
TEXAS TX 77320	5.00	0.	0.		0.		
KAY OHENDALSKI HUNTSVILLE	TRUSTEE						
TEXAS TX 77320	1.00	0.	0.	 	0.		
2 Compensation of five highest-paid employee		luded on line 1 – see in	nstructions). If none, e				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other al	e account, lowances		
NONE					·		
				-			
	<u> </u>	<u> </u>	<u> </u>	 			
Total number of other employees paid over \$50,000.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	None		

3 Five highest-paid independent contractors for professional services (see i	nstructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		· · · · · · · · · · · · · · · · · · ·
		
Total number of others receiving over \$50,000 for professional services		Non
Rark X Summary of Direct Charitable Activities		
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1		
2		
3		
		
4		<u>-</u>
PartiX:B Summary of Program-Related Investments (see instru	ictions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	Amount
1		
		· · · · · · · · · · · · · · · · · · ·
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		
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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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663,850.

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				<u>58,769.</u>
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
3 Excess distributions carryover, if any, to 2015			·	
a = 0040				
b From 2011				
c From 2012 163, 284.	1			
d From 2013 242,134.				
e From 2014				
f Total of lines 3a through e	630,087.			
4 Qualifying distributions for 2015 from Part	030,007.			
XII, line 4. \$ 663,864.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior years				
(Election required — see instructions)				
c Treated as distributions out of corpus				
(Election required – see instructions)			i '	
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus .	663,864.			
5 Excess distributions carryover applied to 2015	58,769.			58,769.
(If an amount appears in column (d), the same amount must be shown in column (a))				
(2,7,				ı
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,235,182.			
b Prior years' undistributed income Subtract				
line 4b from line 2b	***	0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed				
· · ·				
d Subtract line 6c from line 6b Taxable amount – see instructions				
		0.		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			^	
			0.	
f Undistributed income for 2015. Subtract lines			İ	
4d and 5 from line 1 This amount must be distributed in 2016				0.
7 Amounts treated as distributions out of				· · ·
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3) (Election				
may be required — see instructions)				
8 Excess distributions carryover from 2010 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	1,235,182.			
10 Analysis of line 9				
a Excess from 2011 0.				
b Excess from 2012		}		
c Excess from 2013 242,134.				{
d Excess from 2014 167,050.				
e Excess from 2015 663,864.				

Form	990-PF (2015) GRACE FOUNDATION		-i! Di	1/II A	26-022588	
	Private Operating Foundat					N/A
1 a	If the foundation has received a ruling or determined is effective for 2015, enter the date of the ruli	ermination letter that	it is a private opera	iting foundation, and	the ruling	
b	Check box to indicate whether the foundation	•			4942(J)(3) or	4942(J)(5)
	Enter the lesser of the adjusted net	Tax year	1	Prior 3 years		
	Income from Part I or the minimum Investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	'Assets' alternative test — enter'					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	'Support' alternative test — enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Par.	Supplementary Information assets at any time during the Information Regarding Foundation Management	e year – see in	part only if the structions.)	e foundation had	d \$5,000 or more	e in
_	List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more than	\$5,000) (See secti	ion 507(d)(2))		
p	List any managers of the foundation who ow a partnership or other entity) of which the foundation who are partnership or other entity) of which the foundation who are partnership or other entity) of which the foundation who are partnership or other entity) of which the foundation who are partnership or other entity) of which the foundation who own	n 10% or more of the Indation has a 10% o	e stock of a corporat or greater interest	tion (or an equally lar	ge portion of the owr	nership of
	Information Regarding Contribution, Gran Check here X if the foundation only marequests for funds If the foundation makes gromplete items 2a, b, c, and d.	akes contributions to lifts, grants, etc (see	preselected charita instructions) to indi-	ble organizations and viduals or organization	ons under other cond	
а	The name, address, and telephone number of	or e-mail address of	the person to whom	applications should	be addressed	
b	The form in which applications should be sub	omitted and informat	ion and materials th	ey should include		
c	Any submission deadlines					
d	Any restrictions or limitations on awards, suc	h as by geographica	ıl areas, charitable f	ields, kınds of ınstıtut	ions, or other factors	
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Form 990-PF (2015) GRACE FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or bus	iness)	substantial contributor	recipient				
a Paid during the year			ļ				
AGAPE FOUNDATION							
HUNTSVILLE							
	rx 77320		501c3	CHARITABLE	597,114.		
CAMPUS OUTREACH							
BIRMINGHAM							
	ĄL		501c3	CHARITABLE	6,500.		
HARVEST PRISON MINISTRI	ES						
NASHVILLE							
	ľN		501c3	CHARITABLE	6,000.		
REFORMED SEMINARY							
ORLANDO	_		.				
	FL		501c3	CHARITABLE	6,000.		
FELLOWSHIP OF CHRISTIAN	ATHLETES		<u> </u>				
HUNTSVILLE			İ				
HUNTSVILLE	ΓX		501c3	CHARITABLE	12,000.		
FELLOWSHIP OF HUNTSVILLE	E CHURCH						
HUNTSVILLE							
	ľX .		501c3	CHARITABLE	12,000.		
MISCELLANEOUS DONEES	,						
HUNTSVILLE							
	ľX		501c3	CHARITABLE	2,250.		
PRETERIST RESEARCH INST							
ARDMORE							
	OK		501c3	CHARITABLE	10,000.		
See Line 3a statement							
					12 000		
					12,000.		
Total				3a	663,864.		
B / ipprovou for future paymone							
		:					
Total		<u> </u>	<u> </u>				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)		
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)		
· ·			code	•			
ab							
			 				
c							
е			 -		· · · · · · · · · · · · · · · · · · ·		
T		<u> </u>					
g Fees and contracts from government agencies			-				
2 Membership dues and assessments							
Interest on savings and temporary cash investmentsDividends and interest from securities							
5 Net rental income or (loss) from real estate			-				
a Debt-financed property			ļ				
b Not debt-financed property							
6 Net rental income or (loss) from personal property							
7 Other investment income							
8 Gain or (loss) from sales of assets other than inventory					-657,516.		
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue		1	1	ı	1		
a							
b							
c							
d							
e							
12 Subtotal Add columns (b), (d), and (e)				<u></u>	-657,516.		
13 Total. Add line 12, columns (b), (d), and (e)				13	-657,516.		
See worksheet in line 13 instructions to verify calculations	.)						
Part XVI-B Relationship of Activities to the	Accomp	lishment of Exemp	ot Purr	oses			
Line No. Explain below how each activity for which inco		ad in actions (a) of Dark	V) // A ==		L .		
Line No. Explain below how each activity for which inco accomplishment of the foundation's exempt put	urposes (othe	ed in column (e) of Part. er than by providing fund	is for suc	ch purposes) (See instru	ne ctions.)		
11 ACTIVITY PROVIDES INCOME FOR	R FOUNDA	TION'S EXEMPT	PURPO	SES.			
INCLUDING CHURCHES, MINISTRI					.,_		
BY IRS UNDER SECTION 501(c)(TODDIC CHARTIII	<u> </u>	I NO V II D			
BI ING GUBBR CHOITGE SOT (C)	<u> </u>			· · · · · · · · · · · · · · · · · · ·			
			-				
							
				 			
	_						
							
	-						
	-						

Part)	(VII]	Information Reg Exempt Organiz	arding Tran	nsfers To	and Trans	saction	ns and	Relationshi	ps With Noncha	ritable	•	
	<u> </u>	· · · · · · · · · · · · · · · · · · ·				·					Yes	No
d	escribe	organization directly or ed in section 501(c) of to political organization	the Code (othe	age in any of r than section	f the following on 501(c)(3) o	g with ang organizati	y other o ions) or i	rganization n section 527,				
	•	rs from the reporting for		noncharitable	e exempt ora:	anızatıon	of					
		sh								1 a (1)		X
		er assets								1 a (2)		X
	•	ansactions								- (-)		
		es of assets to a nonch	naritable evemn	nt organizatio	on					1 b (1)	<u> </u>	X
•	•	chases of assets from	•	-						1 b (2)		X
•	,	ital of facilities, equipm			•					1 b (3)	ļ <u>-</u>	X
•	•	mbursement arrangem	•							1 b (4)	 	
		ns or loan guarantees								1 b (5)		X
•	•	formance of services of								1 b (6)	<u> </u>	X
•	•		•		•					1 c		X
• 3	nanng	of facilities, equipmen	t, mailing lists,	Olliel assets	s, or paid emp	noyees.				10	<u> </u>	X
th a	e good ny tran	swer to any of the abo ds, other assets, or sei saction or sharing arra	rvices given by ingement, shov	the reporting v in column	g foundation (d) the value	If the fou of the go	undation ods, oth	received less the er assets, or ser	an fair market value vices received	ın 		
(a) Line	no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organiz	zation	(d)	Description of tran	sfers, transactions, and s	haring arran	gement	<u>s</u>
							ļ					
												
							 					
							ļ					
						_		 				
												
								·-· 				
				<u> </u>								
												
												
d	escribe	oundation directly or inc ed in section 501(c) of complete the following	the Code (othe							. Yes	X	No
) Name of organization		(b)	Type of organ	nization		(c) Description of relat	ionship		
	•			<u> </u>					·			
			-	· -								
Sign	Under	penalties of perjury, I declare , and complete Declaration of	that I have examined f preparer (other than	d this return, incl n taxpayer) is ba	luding accompany ased on all inform	ying schedu ation of whi	les and sta ch preparer	tements, and to the be has any knowledge	est of my knowledge and be	lief, it is true,	RS disci	use.
Here		1 Hoster	rll"	•	1//-	8-16	<i>(</i> , ▶	71-		this return	n with th	е
	F100	ature of officer or trustee			Date Date) ' / 6		rtle		(see instr	uctions)	2
	ign.	Print/Type preparers name		Prend	arer's signature		'	Date	- - - - - - - - - - 	PTIN	Yes	No
.			-	1.190	a.o. o oigilatuid			1	Checkif	,		
Paid -			<u> </u>	- br	CN2	rac			self-employed	L		
Prepa		Firm's name	SETT	<u>- </u>	<u>cha</u>	$rac{r}{c}$	ı		Firm's EIN			
Use (Only	Firm's address -										
		<u> </u>	····-						Phone no			
BAA										Form 99	0-PF (2015)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2015

Employer Identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Organization type (check one)	
Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	X 4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organization is covered by the Gene	ral Rule or a Special Rule.
Note. Only a section 501(c)(7), (8), or (10) organiz	ation can check boxes for both the General Rule and a Special Rule See instructions
General Rule	
For an organization filing Form 990, 990-EZ, o property) from any one contributor Complete to	r 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or Parts I and II See instructions for determining a contributor's total contributions.
Special Rules	
☐ under sections 509(a)(1) and 170(b)(1)(A)(vi),	e)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Z, line 1 Complete Parts I and II.
For an organization described in section 501(c during the year, total contributions of more that purposes, or for the prevention of cruelty to ch	e)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, in \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational ildren or animals. Complete Parts I, II, and III.
during the year, contributions exclusively for es \$1,000 If this box is checked, enter here the to charitable, etc., purpose. Do not complete any	e)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, eligious, charitable, etc., purposes, but no such contributions totaled more than otal contributions that were received during the year for an exclusively religious, of the parts unless the General Rule applies to this organization because etc., contributions totaling \$5,000 or more during the year
990-PF), but it must answer 'No' on Part IV, line 2	e General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or , of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	of of Part I
Name of org	panization .	Employe	r Identification number
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	e is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILSON HEIRS TRUST	_	Person X
	1423B_BRAZOS_DR	\$20 <u>.</u> 000.	Payroll Noncash
	HUNTSVILLE TX 77320 TX 77320	_	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	F T SERVICES TRUST	_	Person X
(a) Number 2 F	1423B BRAZOS DR	\$18.000.	Payroll
	HUNTSVILLE TX 77320	_	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Complete Part II for noncash contributions)
BAA	TEEA0702 10/12/15	Schedule B (Form 9	l 990, 990-EZ, or 990-PF) (2015)

Net Gain or Loss From Sale of Assets

2015

e •	employer dentification number
ACE FOUNDATION	26-0225881
Asset Information:	
Description of Property C	HARLES SCHWAB ACCOUNT
Date Acquired · Various	How Acquired Purchased
Date Sold 12/31/15	Name of Buyer SCHWAB
Sales Price 596,11	5. Cost or other basis (do not reduce by depreciation) 1,252,950.
Sales Expense 6	81. Valuation Method Cost
	7,516. Accumulation Depreciation:
Description of Property	
Date Acquired:	How Acquired
Date Sold	Name of Buyer
Sales Price	
Sales Expense	
Total Gain (Loss)	Accumulation Depreciation
Description of Property:	, toodhalanan 5 optoblanan 1 - 1
Date Acquired .	How Acquired
Date Sold	How Acquired Name of Buyer
Date Sold	Cost or other basis (do not reduce by depreciation)
Sales Price	Valuation Method:
Sales Expense	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation
Description of Property	Llau Agguerd
Date Acquired .	How Acquired
Date Sold	Name of Buyer
Sales Price	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method
Total Gain (Loss)	Accumulation Depreciation
Description of Property:	
Date Acquired .	How Acquired
Date Sold	Name of Buyer
Sales Price	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method
Total Gain (Loss):	Accumulation Depreciation
Description of Property:	
Date Acquired .	How Acquired:
Date Sold	Name of Buyer
Sales Price	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method
Total Gain (Loss)	Accumulation Depreciation
Description of Property:	
Date Acquired .	How Acquired
Date Sold	Name of Buyer
Sales Price	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method
Total Gain (Loss)	Accumulation Depreciation
Description of Property	
Date Acquired	How Acquired:
Date Sold:	Name of Buyer
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense	Valuation Method
Total Gain (Loss)	Accumulation Depreciation

Form 990-PF, Page 1, Part I, Line 23	
Line 23 Stmt	

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
SUPPLIES EXPENSE	4,155.			
BANK CHARGES	120.			
Total	4,275.	 		

Form 990-PF, Page 2, Part III, Line 5

Other Decreases Stmt

AMOUNTS	HELD	IN	INVESTMENT	ACCT	 1,921.
Total					1.921

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business
Name and address	show any	status of re-		Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	cipient		Amount
Paid during the year				
				Person or Business
				Person or Business
				Person or Business
				Person or Business
PREGNANCY CARE CENTER				Person or
HUNTSVILLE				Business X
HUNTSVILLE TX		501c3	CHARITABLE	12,000.

Total