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Form **990-PF**

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

OMB No. 1545-0052

Department of the Treasury

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

2015

Inter	nai He	venue Service Information about For	n 990-PF and	its separ	ate instruc	tions is at wy	w.irs.gov/torin	issopi.	Open to Public In	spection
For	caler	ndar year 2015 or tax year beginning			, ;	2015, and end	ting		, 20	
Na	me of	f foundation							cation number	
<u>CO</u>	X S	SCHOLARSHIP FUND					26-6091	222		
Nu	mber	and street (or P.O box number if mail is not deli	vered to street ad	idress)		Room/suite	B Telephone	numbe	r (see instruction	ns)
39	24	GRANBURY DRIVE				<u> </u>	(972)30	6-36	57	
Cit	y or to	own, state or province, country, and ZIP or	foreign postal	code		-	C If exemption	applicati	on is pending,	
DA	LLP	AS TX 75287	_				check here			▶ [
G	Check	all that apply Initial return	Initia	al return o	f a former p	ublic charity	D 1. Foreign	organiza	ations, check he	re ▶
		Final return	Ame	ended reti	ırn		2. Foreign o	rganizatic	ons meeting the 85°	%
		Address change	e 🗌 Nan	ne change	e				nd attach computat	
н	Check	type of organization X Section 501	I(c)(3) exempt p	private fou	indation		E If private for	oundatio	on status was	
П	Sectio	n 4947(a)(1) nonexempt charitable trust	Other taxa	able privat	e foundatio	n	terminated 507(b)(1)(A			▶□
I F	air ma	arket value of all assets at end of J	Accounting me	thod X	Cash	Accrual				_
yε	ear (fr	om Part II, col. (c), line 16)	Other (speci	ıfy)	_	_			in a 60-month	
▶ \$		162,827 (Pa	ırt I, column (d)	must be	on cash bas	sis)	termination 507(b)(1)(8			▶□
Pa		Analysis of Revenue and Expenses	(a) Revenue						(d) Disburser	nents
	ì	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the	expenses		' '	nvestment ome	(c) Adjusted income	net	for charita purpose	
_		amounts in column (a) (see instructions))	books	<u> </u>					(cash basis	
	1	Contributions, gifts, grants, etc , received (attach schedule)					<u> </u>			
	2	Check if the foundation is not required to attach Sch. B								
	3	Interest on savings and temp-cash investments								
	4	Dividends and interest from securities		9,418	,	9,418		9,418		
		Gross rents								
	6	Net rental income or (loss)								
		-Net gain/(loss) from sale of assets not on line 10		- 1,235				rs -,		
ē	6	Gross sales price for all assets on line 6a								
Revenue	7	Capital gain net income (from Part IV, line 2)				0				
	8	Net short-term capital gain .						0	L	
	9	Income modifications						0		
		Gross sales less oreturns & allowances								
	0	Less Cost of goods sold								
	C	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)						0	<u> </u>	
	12	Total. Add lines 1 through 11		8,183		9,418		9,418		
	13	Compensation of officers, directors, trustees, etc	ļ	0						
	14	Other employee salaries and wages								
S	15	Pension plans, employee benefits								
J.Se	1	Legal fees (attach schedule)	ļ							
ĕ		Accounting fees (attach schedule)		2 646		1 001			ļ	
e E	I	Other professional fees (attach sche佛庙)		2,646		1,901	REC	FIVE		
J CUIU ative Expe	17	Interest		246					-	
. str∂	18	Taxes (attach schedule) (see instructions 2		246			AUG 1	<u> </u>	701	
Operating and Administrative Expenses	19	Depreciation (attach sch) and depletion					≋ AUG 1	6 20	16	
þ	20	Occupancy							141	
ğ	21	Travel, conferences, and meetings	<u> </u>				OGDF	N		
) ar	22	Printing and publications								<u>.</u>
ij	23	Other expenses (attach schedule)							ļ	
era	24	Total operating and administrative		2 002		1 001		^		_
රි	25	expenses. Add lines 13 through 23		2,892		1,901		0		0
	25 26	Contributions, gifts, grants paid Total exp. & disbursements.		41,250		1 001				11,250
	Ļ	Add lines 24 and 25		44,142		1,901		0	4	11,250
	27 a	Subtract line 26 from line 12 Excess of revenue over expenses		35 050					-	
		and disbursements		35,959		7 535			<u> </u>	
	1	Net investment income (if neg , enter -0-)				7,517		0 430		
	l ¢	Adjusted net income (if neg , enter -0-)	1					9,418	· I	

		Attached schedules and amounts in the	Beginning of year	End o	f year
Ρŧ	art n	Balance Sheets description column should be for end-of-year amounts only (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	ì	Cash non-interest-bearing			
	2	Savings and temporary cash investments	6,065	17,156	17,156
	3	Accounts receivable ▶			
		Less allowance for doubtful accts. ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accts. ▶			
	5	Grants receivable	 		
	6	Receivables due from officers, directors, trustees, and other			-
	1	disqualified persons (attach schedule) (see instructions)			
	1 7	Other notes and loans receivable (attach schedule)		· -	
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			-
Assets		Prepaid expenses and deferred charges			
Ass		· · ·			
-	1	Investments U.S. and state govt. obligations (attach schedule)			-
	1	Investments corporate stock (attach schedule)			
		Investments corporate bonds (attach schedule) Investments land, buildings,			
	İ	and equipment basis			
		Less accumulated depreciation (attach schedule)			
		Investments mortgage loans			
	1	Investments other (attach schedule) #3	204,528	145,671	145,671
		Land, buildings, and equipment basis ▶ Less accumulated depreciation			
		(attach schedule) · · ·			
	t	Other assets (describe)			
	16	Total assets (to be completed by all filers see the			
		instructions Also, see page 1, item l)	210,593	162,827	162,827
	17 -	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ances	24	Unrestricted			
<u>a</u>	25	Temporanly restricted			
9	26	Permanently restricted			
Fund Bal	!	Foundations that do not follow SFAS 117, check here▶⊠			
2		and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds	210,593	162,827	
SSe		Paid-in or capital surplus, or land, bldg., and equipment fund			
Ž	29	Retained earnings, accumulated income, endowment, or other funds			
ž	1	Total net assets or fund balances (see instructions)	210,593	162,827	
	į.	Total liabilities and net assets/fund balances (see instructions)	210,593	162,827	
-Da	rt-III				<u> </u>
1		net assets or fund balances at beginning of year Part II, column		with	· · · · · · · · · · · · · · · · · · ·
•		of-year figure reported on prior year's return)	(a), mise oo (mast agice i	. 1	210,593
2		amount from Part I, line 27a		2	-35,959
3		r increases not included in line 2 (itemize)		3	33, 33
4				4	174,634
5		eases not included in line 2 (itemize) ▶ SEE ATTACHMEN	 T #1	5	11,807
6		net assets or fund balances at end of year (line 4 minus line 5)			162,827
J	1 VICI	The about or faria balances at one of year (line 4 millus line 3)	i arcii, colui(III (D), IIIle 30	<i>.</i>	1 104.04/

Part IV Capital Gains	and Losses for Tax on	Investment	Income				Page_ 3
	ne kınd(s) of property sold (e g ,			(b) How acquired	(c) Da	ate acquired	(d) Date sold
•	use, or common stock, 200 shs			P Purchase D Donation	(mo	., day, yr)	(mo , day, yr)
a SEE ATTACHMENT	#5	<u> </u>					_
b						-	
C							
d				•			
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		Cost or othus expense				n or (loss)) minus (g)
а							
b							-
С						•	
d							
е							· · · · · · · · · · · · · · · · · · ·
Complete only for assets show	wing gain in column (h) and owi	ned by the foun	dation on	12/31/69		(I) Gains (Col	(h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	Excess of ver col (j),	. ,		l. (k), but not	less than -0-) or om col. (h))
а							
b							
c							
d							15.0
e							
2 Capital gain net income or (ne		ın, also enter ın ss), enter -0- ın			2		-1,235
3 Net short-term capital gain or	(loss) as defined in sections 12	22(5) and (6)		_			
Maria also seems to the		\ (4 (\		٦			
If gain, also enter in Part I, line	3 8, column (c) (see instructions) II (IOSS),		_			
If gain, also enter in Part I, line enter -0- in Part I, line 8	e 8, column (c) (see instructions) 11 (loss), 			3		41
enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic priv	Inder Section 4940(e) for vate foundations subject to the s	or Reduced			nent l	ncome	
enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic privile section 4940(d)(2) applies, leave Vas the foundation liable for the section 4940 (d) (e)	Inder Section 4940(e) for vate foundations subject to the set this part blank.	or Reduced section 4940(a)	tax on net	investment inco	nent I	ncome	
enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic privile section 4940(d)(2) applies, leaved was the foundation liable for the section 4940, "Yes," the foundation does not contain the section of the	Inder Section 4940(e) for vate foundations subject to the set this part blank.	per Reduced section 4940(a) able amount of o not complete	tax on net any year ir this part.	investment inco	me.)	ncome	
enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic priviple section 4940(d)(2) applies, leave was the foundation liable for the section does not consider t	inder Section 4940(e) for vate foundations subject to the section 4942 tax on the distributed qualify under section 4940(e). Do not in each column for each year, (b)	per Reduced section 4940(a) able amount of o not complete see the instruct	tax on net any year ir this part. tions befor	investment inco	me.)	Dis	
enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic priviles section 4940(d)(2) applies, leave was the foundation liable for the s "Yes," the foundation does not compare the section appropriate amount (a) Base period years	inder Section 4940(e) for rate foundations subject to the section 4942 tax on the distributed qualify under section 4940(e). Do not in each column for each year, (b) Adjusted qualifying distributed and provided the section 4940(e).	per Reduced section 4940(a) able amount of o not complete see the instruct	tax on net any year ir this part. tions befor	n the base perion the base perion e making any er (c) et value of table-use assets	me.)	Dis	Yes No (d) tribution ratio divided by col (c))
enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic priviles section 4940(d)(2) applies, leaved Vas the foundation liable for the simple si	inder Section 4940(e) for rate foundations subject to the section 4942 tax on the distributed qualify under section 4940(e). Do not in each column for each year, Adjusted qualifying distributions	able amount of o not complete see the instruct	tax on net any year ir this part. tions befor	trable-use assets	me.) d?	Dis	Yes No
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enter -0- in Part I, line 8 Part V Qualification User optional use by domestic priviles section 4940(d)(2) applies, leaver as the foundation liable for the serves," the foundation does not of 1 Enter the appropriate amount (a) Base period years Calendar year (or tax year beginning 2014 2013 2012 2011 2010 2 Total of line 1, column (d) 3 Average distribution ratio for of years the foundation has be	inder Section 4940(e) for the section 4942 tax on the distributed qualify under section 4940(e). Do not in each column for each year, Adjusted qualifying distributed qualifying distr	able amount of o not complete see the instruct butions 29,770 22,500 15,000 20,928 20,937 de the total on life rears	any year in this part. tions before nonchar.	the base perion e making any er (c) et value of table-use assets 223, 231, 233, 244, 252,	d? htries , 513 , 696 , 587 , 901 , 788	Cool. (b)	(d) tribution ratio divided by col (c)) 0.133191 0.097110 0.064216 0.085455 0.082824 0.462796
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enter -0- in Part I, line 8 Part V Qualification U For optional use by domestic priviles section 4940(d)(2) applies, leaved was the foundation liable for the simple of	inder Section 4940(e) for the section 4942 tax on the distributed qualify under section 4940(e). Do not in each column for each year, (b) Adjusted qualifying distributed qualifying	able amount of o not complete see the instruct butions 29,770 22,500 15,000 20,928 20,937	any year in this part. tions before nonchar.	the base perion e making any er (c) et value of table-use assets 223, 231, 233, 244, 252,	d? htries , 513 , 696 , 587 , 901 , 788	2 3 4	(d) tribution ratio divided by col (c)) 0.133191 0.097110 0.064216 0.085455 0.082824 0.462796 0.092559 188,646

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b If 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 . . .

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or

4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete

NONE

10

8b

X

X

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		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address ► N/A			
14	The books are in care of ▶ SEE ATTACHMENT #6 Telephone no ▶			
	Located at ▶ ZIP+4 ▶	_		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			▶
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	_	Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "yes," enter the name of			
	the foreign country	1		ĺ
Par	t 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
1a	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? . Yes No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			ĺ
	a disqualified person?			İ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			ĺ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			ĺ
	(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)?			1
	(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			ĺ
	after termination of government service, if terminating within 90 days.) Yes No			
b	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)?	1b	-	X
	Organizations relying on a current notice regarding disaster assistance check here	·		<u> </u>
С	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?	1c		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))		į	ĺ
а	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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
ь	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)	2b		Х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			1
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			İ
	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.)	3b		Х
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			<u> </u>
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		x

II HORE, EILEF NONE.				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE ATTACHMENT #8				

Total number of other employees paid over \$50,000 .

Total. Add lines 1 through 3

BWF 990

FDA 15 990PF7

▶

Form **990-PF** (2015)

Part VIII	Information About Officers, Directors, Trustees and Contractors (continued)	Foundation Managers, Hig	hly Paid Employees,
3 Five high	est-paid independent contractors for professional services (s	ee instructions). If none, enter "NC	NE."
	ame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE ATTA	CHMENT #9		
Total number of	f others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant and other beneficiaries served, conferences convened, research papers produc		Expenses
1SEE ATT	CACHMENT #10		
			41,250
2			
3			
4		~	
	Summary of Program-Related Investments (see in		
	vo largest program-related investments made by the foundation du	ring the tax year on lines 1 and 2	Amount
1			
2			
All other progra	am-related investments. See instructions		

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Form 990-PF (2015)

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations,	
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
` a	Average monthly fair market value of securities	1a	173,359
þ	Average of monthly cash balances	1b	18,160
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	191,519
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	191,519
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	2,873
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	188,646
6	Minimum investment return. Enter 5% of line 5	6	9,432
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	9,432
2a	Tax on investment income for 2015 from Part VI, line 5 2a 75		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	75
3	Distributable amount before adjustments Subtract line 2c from line 1	3	9,357
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9,357
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	9,357
Pa	rt XII Qualifying Distributions (see instructions)	-	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	41,250
b	Program-related investments total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	<u> </u>	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	41,250
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	75
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	41,175
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundati	on
	qualifies for the section 4940(e) reduction of tax in those years.		
FDA	15 990PF8 BWF 990 Form Software Copyright 1996 - 2016 HRB Tax Group, Inc	F	orm 990-PF (2015)

15 990PF8

Pai	Undistributed Income (see	e instructions)		 	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				9,357
` 2	Undistributed income, if any, as of the end of 2015		·		
а	Enter amount for 2014 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2015				
_	From 2010 . 8, 424				
a 					
D	2 570				
C					
d	From 2013				
е	From 2014 19, 054				
f	Total of lines 3a through e	50,957			
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 41,250				
а	Applied to 2014, but not more than line 2a				
ь	Applied to undistributed income of prior years	-	100		
	(Election required see instructions) .				
	Treated as distributions out of corpus				
·					
ن د	(Election required see instructions)		 -		0 257
	Applied to 2015 distributable amount	21 002			9,357
е	Remaining amount distributed out of corpus .	31,893			
5	Excess distributions carryover applied to 2015 .				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	_			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	82,850			
b	Prior years' undistributed income Subtract		, ., ,,		
	line 4b from line 2b .				
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			1	
	been previously assessed				
a	Subtract line 6c from line 6b. Taxable				
	amount see instructions				
е	Undistributed income for 2014. Subtract				
	line 4a from line 2a. Taxable amount				<u>.</u>
	see instructions				
f	Undistributed income for 2015. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2016				
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (Elec-				
	tion may be required-see instructions)				
8	Excess distributions carryover from 2010			· · · · · · · · · · · · · · · · · · ·	
•	not applied on line 5 or line 7 (see				
	' '				
_	instructions)				
9	Excess distributions carryover to 2016.	00 050			
	Subtract lines 7 and 8 from line 6a	82,850			
10	Analysis of line 9				
а	Excess from 2011 8,827				
b	Excess from 2012 . 3,570				
С	Excess from 2013 11,082				
d	Excess from 2014 19,054				-
е	Excess from 2015 31,893				

Par	t XIV Private Operating For	undations (see in	structions and Part V	II-A, question 9)		
1a	If the foundation has received a ruling of	or determination lette	er that it is a private o	perating		
	foundation, and the ruling is effective fo	r 2015, enter the da	ite of the ruling	•		
b	Check box to indicate whether the four	dation is a private o	perating foundation of	described in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed	<u> </u>	(.,	(0) 2010	(4) 23 / 2	0
b	85% of line 2a · ·					0
c	Qualifying distributions from Part XII,				-	
	line 4 for each year listed					0
d	Amounts included in line 2c not used					
_	directly for active conduct exempt act.					0
e	Qualifying distributions made directly					<u> </u>
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the alternative					· · · · · · · · ·
•	test relied upon					
а	"Assets" alternative test enter					
_	(1) Value of all assets					0
	(2) Value of assets qualifying under					· · · · · · · · · · · · · · · · · · ·
	section 4942(j)(3)(B)(i)		1			0
b	"Endowment" alternative test enter					<u>_</u> _
	2/3 of min. investment return shown in Part X, line 6 for each year listed · · ·			·		0
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)					0
	(2) Support from general public and					
	5 or more exempt organizations					
	as provided in section 4942(j)(3) (B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization					0
	(4) Gross investment income			<u>.</u>		0
Pai	t XV Supplementary Inform	nation (Comple	te this part only	if the foundati	on had \$5,000	or more in assets
	at any time during the				•	
1	Information Regarding Foundation N	lanagers:				
а	List any managers of the foundation wh	o have contributed	more than 2% of the	total contributions re	ceived by the found	ation before the
	close of any tax year (but only if they ha	ave contributed more	e than \$5,000). (See :	section 507(d)(2).)		
SEI	E ATTACHMENT # 11					
b	List any managers of the foundation wh	no own 10% or more	of the stock of a cor	poration (or an equa	lly large portion of th	e ownership
	of a partnership or other entity) of whic	h the foundation has	s a 10% or greater int	erest.		
SE	E ATTACHMENT # 12					
2	Information Regarding Contribution,					
	Check here ▶ ☐ if the foundation on	ly makes contributio	ns to preselected cha	arıtable organızatıons	and does not accep	ot unsolicited
	requests for funds. If the foundation ma	akes gifts, grants, etc	c. (see instructions) to	individuals or organ	izations under other	conditions,
	complete items 2a, b, c, and d.					
	The name, address, and telephone nur	nber or e-mail of the	e person to whom ap	plications should be	addressed	
SE	E ATTACHMENT # 13					
			.		 	
D	The form in which applications should	be submitted and inf	formation and materia	als they should includ	ie	
С	Any submission deadlines					
d	Any restrictions or limitations on awards	s, such as by geogra	aphical areas, charital	ole fields, kinds of ins	stitutions, or other fa	ctors

Part XV Supplementary Information (continued)

3	Grants and Contributions Paid		Approve	d for Future Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
a SEE	Name and address (home or business) Paid during the year ATTACHMENT #14	or substantial contributor	recipient		
		· .			
	Total			▶ 3a	41,25
D	Approved for future payment				
	Total · · · · ·		·	· · • 3b	

Page **12**

(a) (b) Business Amount E	(c) (d) Excl. Amount	(e) Related or exempt function income (See instructions.)
Business Amount E	Excl. Amount	function income
1 Program service revenue code c	code	
<u> </u>	i i	
a		
b		
С		
d		
e		
f		
9 Fees & contracts from government agencies		
2 Membership dues and assessments .		
3 Interest on savings and temporary cash investments		
4 Dividends and interest from securities		9,418
5 Net rental income or (loss) from real estate		•
a Debt-financed property		
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		-1 , 235
9 Net income or (loss) from special events		
10 Gross profit or (loss) from sales of inventory		
11 Other revenue a		
b		
С		
d		
e		
	0	8,183
13 Total. Add line 12, columns (b), (d), and (e)	13	8,183
See worksheet in line 13 instructions to verify calculations.)		
Part XVI-B Relationship of Activities to the Accomplishment of Exe	empt Purposes	
Line No. Explain below how each activity for which income is reported in column (e) of F accomplishment of the foundation's exempt purposes (other than by providing		,

Pa	rt XVII	Information Exempt Org		Transfers To	and Transa	actions a	nd Relation	onships V	Vith None	harita	able	
1	Did the	organization directly	· · · - · ·	gage in any of the	following with	any other or	nanization de	escribed in s	ection		Yes	No
·		of the Code (other th			-	•	-		I .	<u> </u>		
` a		rs from the reporting					to ponticui o	-gariizalionio			l	
u	(1) Ca		ioundation to a	i nonchantable ex	cempt organizati	011 01				9/1\	İ	v
			• •	• •	•			• •	├	a(1)		X
		her assets ·			• •				· ·	a(2)		_X
D		ransactions									ı	3,
	• •	ales of assets to a nor			• • • • •	• •	••	•	⊢	b(1)		X
	·	irchases of assets fro			iization		• • • • •		· ·	b(2)		X
	(3) Re	ental of facilities, equi	pment, or other	assets	• •				1	b(3)		Χ
	(4) R	eimbursement arrang	ements .		• •			•	· · · · · <u> 1</u>	b(4)		X
	(5) Lo	ans or loan guarante	es	•	•				1	b(5)		X
	(6) Pe	erformance of service	s or membersh	ıp or fundraısıng s	solicitations			•	1	b(6)		X
C	Sharing	of facilities, equipme	ent, mailing lists	, other assets, or	paid employees	6				1c		Χ
d	If the a	nswer to any of the a	bove is "Yes," o	complete the follow	wing schedule.	Column (b)) should alwa	ays show the	fair market	value o	the	
	goods,	other assets, or servi	ices given by th	e reporting found	lation If the foui	ndation rece	ived less tha	n fair market	t value in any	/ transa	ction	
	or shar	ing arrangement, sho	w in column (d	d) the value of the	goods, other a	ssets, or ser	vices receive	ed				
(a) L	ine no (b)Amount involved	(c) Name of n	oncharitable exer	mpt organization	(d) Descr	iption of transf	ers, transactio	ns, and sharini	arrange	ments	
2a		oundation directly or 501(c) of the Code (e tax-exemp	ot organizatio			Yes		No
b	If "Yes,	" complete the follow	ing schedule.	 	· -							
	(a) Name of organiza 	tion	(b) Ty	pe of organizati	on		(c) Descript	on of relatio	nship		
	l be	der penalties of perjury, def, it is true, correct, an	I declare that I have	ve examined this retu	urn, including accor	npanying sche	dules and state	ements, and to	the best of my	knowle	dge an	d
Sig Her	n	1	la	1 6	9/9/16	TRUS			May the IRS o	liscuss ti arer sho	vu pel	0 W
		7	or trustee	Dat		Title			(see instruction		Yes	XI No
Pai	d parer	Print/Type prepare	Holly >	Preparer's si	gnature F. Will	7	Date 8-08-2	Chec		итч 0008	<u>37</u> 7	<u>1</u> 8
	Only	Firm's name ► HR		ROUP INC		<i></i>		Firm's EIN	43187	1840)	
<u></u>	- Only	Firm's address ▶ 1	.9009 PR	ESTON RD				Phone no	972267	1460)	

2015 FORM 990 SCHEDULE OF OTHER PROFESSIONAL FEES

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16C

OPEN TO PUBLIC

INSPECTION

For calendar year 2015, or tay ported becomes:

INSPECTION	For calendar year 2015, or tax per	riod beginning	, and e	ending	
Name of Organizatio				Employer Iden	tification Number
COX SCHOLA	RSHIP FUND	_		26-60912	222
	Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
	MANAGEMENT FEES PREPARATION	1,901 745	1,901		

Total:

2,646

1,901

2015 FORM 990 SCHEDULE OF TAXES PAID

ATTACHMENT 2: PAGE 1 - 990- PF PAGE 1, PART I, LINE 18 OPEN TO PUBLIC INSPECTION For calendar year 2015, or tax period beginning , and ending Name of Organization Employer Identification Number 26-6091222 COX SCHOLARSHIP FUND Net Investment Disbursements for Adjusted **Amount** Category Net Income Income Charity FOREIGN INCOME TAX 16 230 INCOME TAX

246

FDA

Total:

2015 FORM 990 SCHEDULE OF INVESTMENTS - OTHERS

ATTACHMENT 3: PAGE 1 - 990-PF PAGE 2, PART II, LINE 13 OPENTO PUBLIC

INSPECTION , and ending For calendar year 2015, or tax period beginning

Name of Organization Employer Identification Number b6-6091222

OX SCHOLARSHIP FUND	,	, , , ,	26-609122	22
Description	Cost	FMV at Year End	Book Value	Fair Market Value
LACKROCK GLOBAL ALLOCATION FD ATON VANCE EQUITY STRATEGY FD PA CESCENT FD VA WORLDWIDE FD VY ASSET STRATEGY FD IMCO TOTAL RETURN FD		X X X X X	31,987 21,062 20,556 20,402 10,544 41,120	31,98 21,06 20,55 20,40 10,54 41,12
· · · · · · · · · · · · · · · · · · ·		-		-
·				
A Form Software Copyright 1996 - 2016 HRB Tax Group, Inc. J1023M		Total:	145,671	145,67

2015 FORM 990 SCHEDULE OF OTHER DECREASES

	- 990- PF PAGE 2, PART 5, or tax period beginning	' III, LINE 5		
Nàme of Organization COX SCHOLARSHIP FUND	b, or tax period beginning		Employer 26-60	Identification Number
	Description of Decrease		20 00	Total Amount 11,807
DECREASE IN FMV				11,807
		•		
	o			
			Total:	11,807

2015 FORM 990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		E 1 - 990-PF PAGE	3, PART IV	, LINE 1		
	EN TO PUBLIC PECTION For colondar	year 2015, or tax period beginning		, and endin	~	
	of Organization	year 2015, or tax period beginning		, and endin	Employer Identific	cation Number
	SCHOLARSHIP F	UND			26-609122	
	(a) List and Describe	e the Kind(s) of Property Sold (e.g., Rerehouse, or Common Stock, 200 shs.	·	P Purchase	(c) Date Acquired (mo., day, yr)	(d) Date Sold (mo , day, yr.)
1	IVY ASSET STRA			D Donation P		01-14-2015
2	IVA WORLDWIDE			P		01-14-2015
3	FPA CRESCENT F	D		P	12-23-2014	01-14-2015
	LOOMIS SAYLES			P		08-12-2015
		AL ALLOCATION FD		P	1	01-14-2015
	FPA CRESCENT F	INVT GRADE BD FD		P P	•	08-12-2015 01-14-2015
		STREGIC INC FD		P		08-12-2015
	IVY ASSET STRA			P		01-14-2015
	IVA WORLDWIDE			P		01-14-2015
11	BLACKROCK GLOB	AL ALLOCATION FD		D	02-07-2008	01-14-2015
	(e) Gross Sales Price	(f) Depreciation Allowed (or allowable)	(g) Cost or Oth Plus Expens		(h) Gain o (e) Plus (f)	· ·
1	6	(or anowable)	rius Experis	7	(e) Flus (i)	-1
2	6			6		_
3	1.5			15		
4	747		-	- 787		40
5	6 34,748			6		1 567
6 7	4,353			36,315 4,209		-1,567 144
8	12,519			12,802		-283
9	704	1		507		197
10	3,704			3,532		172
11	5,117			4,974		143
		owing gain in column (h) and owned	by the foundation o	on 12/31/69	(I) Gains (Col (I	· ·
	(i) F.M V. as of 12/31/69	(j) Adjusted Basis	(k) Excess if			Less Than -0-) or
1		as of 12/31/69	Over Col	(j), if Any	Losses (Tr	om col (h))
5		,				-1
3						
$\overline{4}$						-40
2 3 4 5 6						
6						-1,567
7						144
8 9						-283 197
10						172
11						143
						•
L	<u> </u>		L			

2015 FORM 990 BOOKS ARE IN CARE OF

ATTA	CHMENT	6 - 990-PF PAG	E 5, PART VI	I-A, LINE 14		
	TO PUBLIC					
INSP	ECTION	For calendar year 2014, or tax	period beginning	, ;	and ending	· .
Name o	of Organizatio	n			Employ	er Identification Number
COX	SCHOLA	RSHIP FUND			26-60	091222
Part VII	I-A - Line 14		-			
0				. <u>DALE COX</u>		•
Street A	Address			. 3924 GRAN	BURY DRIVE	
US Ad	idress					
	Zip code or Address	<u>75287</u> c	nty <u>DALLAS</u>		State <u>TX</u>	
	City					
	Province or	State		· · · · ·		
	Country			••••		· · · · ·
	Postal code				<u>-</u>	
	Phone Num	ber				(972) 306-3657
	Fax Number					

2015 FORM 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 7: PAGE 1 - 990-PF PAGE 6, PART VIII OPEN TO PUBLIC INSPECTION , and ending For calendar year 2015, or tax period beginning Name of Organization **Employer Identification Number** COX SCHOLARSHIP FUND 26-6091222 (E) Expense Account (A) Name and Address (B) Title and Average (C) Compensation (If (D) Cont. to Employee Hrs. per Week not paid, enter 0) Ben. Plans & Def. Comp & Other Allowances DALE A COX TRUSTEE 0.20 3924 GRANBURY DR DALLAS, TX 75287 DAVID E COX TRUSTEE 0.05 6441 RIDGLEA CREST FORT WORTH, TX 76116 KIMBERLY A GROGAN TRUSTEE 0.05 5217 OAK LN ARLINGTON, TX 76017

2015 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

ATTACHMENT 8: PAGE 1 990-PF OPEN TO PUBLIC	PAGE 6, PART VI	II, LINE 1		
INSPECTION For calendar year 2015, or tax period	d beginning	, and end		
Name of Organization			Employer Identifica	ation Number
COX SCHOLARSHIP FUND Part VIII Compensation of the Five Highest Paid E			26-6091222	.
(a) Name and Address of Each Employee Paid More	<u>-mployees Other Than Office</u> (b) Title and Average Hours		(d) Contributions to	(e) Expense
Than \$50,000	Per Week Devoted to Position	(c) Compensation	Empl Benefit Plans & Deferred Compensation	(e) Expense Account and Other Allowances
NONE			Deterred Compensation	Other Fillewartes
				_

2015 FORM 990 COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

SPECTION For calendar year 2015, or tax period beginning	, and ending	•
e of Organization	Employer Id	entification Number
K SCHOLARSHIP FUND	26-6091	222
Compensation of the Five Highest Paid Independent Contractors for P	rofessional Services	
) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensati
VE		
- *		
		-
1		
j		
		1

2015 FORM 990 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

INSPECTION For calendar year 2015, or tax period beginning , and ending	
Name of Organization Employer Identificat	
COX SCHOLARSHIP FUND 26-6091222	
Charitable Activity	
SUPPORTED CHRISTIAN HIGHER ED VIA SCHOLARSHIPS TO 6 HARDING UNIV	STUDENTS
· · · · · · · · · · · · · · · · · · ·	

2015 FORM 990 INFORMATION REGARDING FOUNDATION MANAGERS

	ART XV, LINE IA
OPEN TO PUBLIC	
INSPECTION For calendar year 2015, or tax period beginning	, and ending .
Name of Organization	Employer Identification Number
COX SCHOLARSHIP FUND	26-6091222
Contributing M	anager
NONE	

2015 FORM 990 INFORMATION REGARDING FOUNDATION MANAGERS

	PART XV, LINE IB
OPEN TO PUBLIC	
INSPECTION For calendar year 2015, or tax period beginning	, and ending
ame of Organization	Employer Identification Number
OX SCHOLARSHIP FUND	26-6091222
Shareholder Manager	r
ONE	

2015 FORM 990 APPLICATION SUBMISSION INFORMATION

7	
LINE	
XV	
10,	
-PF PAGE	
990-PF	
 1	ŀ
PAGE	
13:	
ATTACHMENT	

ATTACHMENT IS: FAGE I	990-FF FAGE IU, FAKI AV, LINE	7 JUL 2		
OPEN TO PUBLIC	For Calendar year 2015, or tax year period beginning	6	and ending	•
Name of Organization COX SCHOLARSHIP FUND		_	Employer Identification Number 26-6091222	ition Number
Name	Phone Number or E-mail	Info and Materials Included	Submission Deadlines	Restrictions on Awards
DALE COX 3924 GRANBURY DR DALLAS TX 75287	714-478-9225	HS TRANSCRIPT; 5 REFERENCES, INCL FROM STUDENT'S MINISTERS	JULY 4 PRIOR TO FIRST COLLEGE YEAR	POTENTIAL HARDING UNI STUDENTS; 2.5 GPA (ON 4.0 SCALE) TO RENEW
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J1023M

2015 FORM 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 14: PAGE 1 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PU

INSPECTION For calendar year 2015, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

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Name of Organization COX SCHOLARSHIP FUND		26-6091222				
Recipient	If Recipient is an Individual, Show any Relationship to Any Foundation Manager	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount		
Name and Address (home or business) BRENDAN LEMBRICK	or Substantial Contributor	· recipient	EDUCATION			
1011 HUNTERS CREEK CARROLLTON TX 75007			EDUCATION	3,750		
FELICIA BUENO 8706 CLEARLAKE DR			EDUCATION			
ROWLETT TX 75088				7,500		
CORY DREGER 7421 KINGSBARNS THE COLONY TX 75056			EDUCATION	7,500		
HAYDEN BAKER			EDUCATION	7,300		
1902 SUNSET HILL ROWLETT TX 75088			EDOCATION	7,500		
SOPHIA PICKLE			EDUCATION			
2604 PICKWICK LANE PLANO TX 75093				7,500		
JONATHAN GOSSET 1200 MAYBERRY ST			EDUCATION			
WEST MEMPHIS AR 72301				7,500		
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	1	<u> </u>	Total	41 250		