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## EXTENDED TO AUGUST 15, 2016

Department of the Treasury

Internal Revenue Service

# Return of Organization Exempt From Income Tax 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.

Open to Public Inspection

<u>A I</u>	or the	e 2015 calendar year, or tax year beginning and	ending		
B 9	Check if applicable	C Name of organization		D Employer identific	cation number
Ĺ	_Addre	E HINDS COMMUNITY COLLEGE FOUNDATION, IN	NC.		
	Name chang	Doing business as		64-0	622023
	lnıtıal return	Number and street (or P 0. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return			601-	<u>857-3800</u>
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	5,632,694.
	Amen- return	RAYMOND, MS 39154		H(a) Is this a group re	
	_Applic	Finame and address of principal officer DR. CDIDE MOSE		for subordinates	? ☐Yes X No
	pendi	<sup>ng</sup> 205 EAST MAIN STREET, CLINTON, MS 390	<u> 56</u>	H(b) Are all subordinates in	ncluded? Yes No
1	Гах-өх	empt status X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list (see instructions)
<u>J</u> \	<b>Nebsi</b>	te: N/A		H(c) Group exemptio	
		organization: X Corporation	L Year	of formation: 1978 N	1 State of legal domicile: MS
Pá	art I	Summary		-	
ø	1	Briefly describe the organization's mission or most significant activities $\ \underline{THE}$			
Governance		PROVIDE THE FOLLOWING: (1) SCHOLARSHIP			
ern		Check this box  if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	
ò	3	Number of voting members of the governing body (Part VI, line 1a)		3	30
		Number of independent voting members of the governing body (Part VI, line 1b)		4	30
ies		Total number of individuals employed in calendar year 2015 (Part V, line 2a)		5	0
Activities &		Total number of volunteers (estimate if necessary)	7	6	0
Acı		Total unrelated business revenue from Part VIII, colum <b>ா</b> டு முடிப்பட்ட	1	<u>7a</u>	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
	_	200 a 10 M   1	·I	Prior Year	Current Year
θn			1 -	1,583,083.	1,211,975.
Revenue		r rogram service revende (r art vin, inte 29)	-	430 510	6.0 176
Re		Investment income (Part VIII, column (A), lines 8, 4, and ODEN, UT	-	439,519.	570,176.
		Other revenue (Part VIII, column (A), lines 5, 6d <del>, 8c, 9c, 10c, and 11e)</del>	<b>-</b> ⊢	0.	1 700 151
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,022,602.	1,782,151. 782,121.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	707,599.	
		Benefits paid to or for members (Part IX, column (A), line 4)	<del> </del>	0. 69,876.	<u> </u>
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	09,676.	75,029.
90		Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  71,8	مم ا		<u> </u>
Ä			<del>50.</del>  -	315,013.	276,091.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,092,488.	1,133,241.
	18 19	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 18 from line 12	-	930,114.	648,910.
- Se	19	Nevertue less expenses. Subtract line 10 from line 12		ginning of Current Year	End of Year
ets c	20	Total assets (Part X, line 16)	100	11,709,875.	11,665,039.
Net Assets or   Fund Balances	21	Total liabilities (Part X, line 26)		0.	305.
Net	22	Net assets or fund balances Subtract line 21 from line 20		11,709,875.	11,664,734.
Pi	art II	Signature Block		2277037073	
_		ulties of perjugy, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	v knowledge and belief, it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of wi			,
		1/ Elate mine		6/11/	16
Sig	n	Signature of officer		Date /	
Her		DR. CLYDE MUSE, EXECUTIVE DIRECTOR			
		Type or print name and title	-		
		Print/Type preparer's name		Date Check	PTIN
Paid	1	NATHAN CUMMINS		5/26/16 self-employ	₩ P00986272
Pre	parer	Firm's name MAY AND COMPANY, LLP		Firm's EIN	64-0900153
Use	Only	Firm's address POST OFFICE BOX 821568			
		VICKSBURG, MS 39182-1568		Phone no (6	<u>01)636-4762                                    </u>
Ma	/ the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
5320	01 12-1	6-15 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form <b>990</b> (2015)

 $_{\rm 532001\ 12\text{-}16\text{-}15}$  LHA For Paperwork Reduction Act Notice, see the separate instructions.

	t III   Statement of Program Service Accomplishments
- ai	
1	Briefly describe the organization's mission 'PROVIDES SCHOLARSHIPS AND GRANTS TO DESERVING STUDENTS FOR THE
	PURPOSES OF HIGHER EDUCATION AT HINDS COMMUNITY COLLEGE.
	FORFOSES OF HIGHER EDUCATION AT HINDS COMMONITY CONDEGE:
2	Did the organization undertake any significant program services during the year which were not listed on
2	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
3	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 611,957. including grants of \$ 611,957. ) (Revenue \$)
-74	SCHOLARSHIPS TO STUDENTS
	SCHODAKSHIPS TO STODENIS
	170 164
4b	(Code) (Expenses \$
	ALLOCATIONS FOR GRANTS
4c	(Code) (Expenses \$
	ALLOCATIONS FOR COLLEGE ORGANIZATIONS AND DEPARTMENTS
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 85,322. including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 972,528.
	Form <b>990</b> (2015)

INC.

	•		Yes	No
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	ļ	X
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? If "Yes," complete Schedule C, Part II	4_		X
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 98-197 If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> X</u>
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	ļ	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	ļ	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			<u> </u>
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		7,	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445	, .	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11d	ļ	x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e		X
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110	-	- 21
f	the organization's separate of consolidated infancial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
IZa	Schedule D, Parts XI and XII	12a	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12.4		
U	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
		Eor-	, aa∧	/2015

532004 12-16-15

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Part IV Checklist of Required Schedules (continued)

		-	Yes	No
20.2	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	162	No X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		21
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	04		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		
~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		- 21
		240		
·	any tax-exempt bonds?	24c		
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	Lou		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes, " complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X_
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29_	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7.7
00	Schedule N, Part II	32		<u> </u>
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	00		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		X
J-4	Part V, line 1	24		Х
252	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	SSA		- 21_
_	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?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		-	<del></del>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	
		Form	990 (	2015)

Part V Statements Regarding Other IRS Filings and Tax Compliance · Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 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? **2**b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За 3b b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) X 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 a 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? X 7a 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 Х to file Form 8282? 7с 7d d 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? X 7ө Х 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h 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 8 sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 a Did the sponsoring organization make any taxable distributions under section 4966? 9a 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13c c Enter the amount of reserves on hand Х 14a 14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14h

64-0622023

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

	Check if Schedule O contains a response or note to any line in this Part VI			$\mathbf{x}$
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 30	)		
	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  1b	)		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ū	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	0		
<i>1</i> a	more members of the governing body?			v
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		X
b				v
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
a	The governing body?  Find committee with outbout to got on habit of the governing hady?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
306	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
566	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
10a	Did the organization have local chapters, branches, or affiliates?	100	Yes	No_X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	IIa	Λ	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
_	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	· · ·		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec.	tion C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	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 CARRAWAY - 601-857-3800			
	P O BOX 1100, RAYMOND, MS 39154			

Form 990 (2015)	HINDS	COMMUNITY	COLLEGE	FOUNDATION,	INC.	64-0622023	Page 7
Part VII Compensa	tion of Office	ers, Directors, T	rustees, Key	/ Employees, High	est Com	pensated	
-Employees	, and Indepe	ndent Contract	ors				

 Check if Schedule O contains a response or note to any line in this Pa	art VII
 Officer District Conference and High and Comm	

#### 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

X Check this box if neither the organization	nor any related	orga	anıza	ation	oo r	npe	nsat	ted any current officer, o	director, or trustee	
(A) Name and Title	(B) Average hours per week	(do	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SEE ATTACHED SCHEDULE	0.00							0.	0.	0.
			-							
									-	
							_			
							-			-
			1			1		1	l .	l

		MMUNITY	CC	DLI	ĿΕC	GE_	FC	UI	NDATION, INC	. 64-0622	2023	, Pa	age 8
Pai	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghe	st C	ompensated Employee	s (continued)			
	` (A) Name and title	(B) Average hours per week	юòх	not c unle:	ss pe	ntion more rson	than s bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	1	(F) stimate mount o other	
		(list any hours for related organizations below line)	Indiwdual trustee or director	Institutional trustee	Officer	Көу өтріоуве	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org an	npensa rom the ganizati ad relate anizatio	ed
	- <del> </del>												
													<del>,</del>
•								1					
									0				
С	Sub-total  Total from continuation sheets to Part VI  Total (add lines 1b and 1c)	I, Section A						<b>▶ ▶</b>	0. 0. 0.	0 · 0 ·			0. 0.
2	Total number of individuals (including but recompensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wh	no re	eceived more than \$100	,000 of reportable			0
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	·	ustee	ə, ke	у өп	nplo	уөө,	or I	nighest compensated er	mployee on	3	Yes	No_X
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual		4		<u>x</u>
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comparison B. Independent Contractors								ed organization or indivi		5		Х
1	Complete this table for your five highest co the organization. Report compensation for	-	•							•	sation	from	
	(A) Name and business	address	N	ONE	<u> </u>				(B) Description of s	ervices		C) ensatioi	n ———
		·						_					
												-	

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2015)

\$100,000 of compensation from the organization

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
		Officer if Schedule O cont	ams a response	or note to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts st	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
الح ي	c	Fundraising events	1c					
# j	d		1d					
S'E	e		ions) 1e					
io Sign	f		·					
he	•	similar amounts not included abo		1,211,975.				
풀히	g			224,036.				
a So	_	Total. Add lines 1a-1f		<u> </u>	1,211,975.			
<u> </u>	•	Total. Add into 14 11		Business Code	*,***,3,3,			
	2 a			Basilless ocac				
Š	Z a							
<b>9</b> 20								
E S	d							•
P.S.								
Program Service Revenue	e f		NO.					
		Total. Add lines 2a-2f	51 IU 6	<b></b>				
-	3	Investment income (including	dividende intere					
	3	·	dividends, intere	951, and	245 102			345 192.
		other similar amounts)	v avamnt hand n	•	345,192.			393,192.
	4	Income from investment of ta	x-exempt bond p	oroceeds -				
	5	Royalties	(2 D1	62 Damanal		×,		
	_		(i) Real	(ii) Personal		*.		
	6 a				Sec.			
	b	•			^	,		
	C	` '		1	<b>`</b>	%_ ^		
•	C	, ,		12.011				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	4,075,527.					
	t	Less cost or other basis	1					
		and sales expenses	3,850,543.					
	C	Gain or (loss)	224,984.					
	C	J , ,		<b>D</b>	224,984.			224,984.
en l	8 a	Gross income from fundraisin	•					
/en		including \$	of					
Other Revenue		contributions reported on line	1c) See					
ЭĒ		Part IV, line 18	а					
ott		Less direct expenses	b					
		Net income or (loss) from fund		<u> </u>	-			
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	a					
		Less direct expenses	b					
	i	Net income or (loss) from gan	-					
	10 a	a Gross sales of inventory, less	returns					
		and allowances	а					
		Less cost of goods sold	b					
		Net income or (loss) from sale	es of inventory	<u> </u>				
		Miscellaneous Revenu		Business Code				
	11 a	<u></u>	<del></del>			<u> </u>		
	t					-		
	•	;						
	•	d All other revenue						
	•	Total. Add lines 11a-11d		<b>•</b>				
	12	Total revenue See instructions		•	1 782 151.	0.	0.	570 176

Seci	ion 501(c)(3) and 501(c)(4) organizations must com			mpiete column (A)	·
	Check if Schedule O contains a respon	(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	782,121.	782,121.		
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	75,029.		75,029.	
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				
	Legal	10 500		10.500	
	Accounting	10,500.		10,500.	
d	Lobbying				
9	Professional fundraising services See Part IV, line 17				
T _	investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
40	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion Office expenses				····
13 14	Information technology		·		
15	Royalties				
16	Occupancy	•			
17	Travel				
18	Payments of travel or entertainment expenses		1		
.5	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				· · · . <u></u>
20	Interest				·
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0 )				
а	COLLEGE DEPARTMENTS & O	105,085.	105,085.		
b	FACULTY & STAFF DEVELOP	72,801.	72,801.		
С	NON-MONETARY GIFTS	44,136.	755.		43,381.
đ	HOSPITALITY	28,509.			28,509.
ө	All other expenses	15,060.	11,766.	3,294.	
<u> 25</u>	Total functional expenses Add lines 1 through 24e	1,133,241.	972,528.	88,823.	71,890.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	j			
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				

1 Cash · non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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 instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000 •	(B) End of year 470,307. 25,000.
1 Cash · non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivables, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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 instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	470,307.
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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 instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
3 Pledges and grants receivable, net 4 Accounts receivable, net 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 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 instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
4 Accounts receivable, net 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 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 instr) Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	25,000.
4 Accounts receivable, net 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 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 instr) Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
trustees, key employees, and highest compensated employees Complete Part II of Schedule L  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 instr) Complete Part II of Sch L  7 Notes and loans receivable, net  8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a 204,000.	
Part II of Schedule L  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 instr) Complete Part II of Sch L  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a 204,000.	
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 instr) Complete Part II of Sch L  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a 204,000.	
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 instr). Complete Part II of Sch. L. 7. Notes and loans receivable, net	
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 instr). Complete Part II of Sch. L. 7. Notes and loans receivable, net	
employees' beneficiary organizations (see instr) Complete Part II of Sch L  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a 204,000.	
7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 204,000.	
basis Complete Part VI of Schedule D 10a 204,000.	
b Less accumulated depreciation 10b 24,000. 10c	204,000.
11 Investments - publicly traded securities 11	
12 Investments - other securities See Part IV, line 11 11, 185, 944. 12 10	0,965,732.
13 Investments - program-related See Part IV, line 11	
14 Intangible assets	
15 Other assets See Part IV, line 11	
	1,665,039.
17 Accounts payable and accrued expenses 17	305.
18 Grants payable 18	
19 Deferred revenue 19	
20 Tax-exempt bond liabilities 20	
21 Escrow or custodial account liability Complete Part IV of Schedule D  21 21 22 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25	
22 Loans and other payables to current and former officers, directors, trustees,	
key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	
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 25	
26 Total liabilities. Add lines 17 through 25	305.
Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	
27 Unrestricted net assets 613,861. 27	698,523.
28 Temporarily restricted net assets 4,123,616. 28	3,279,679 <b>.</b>
Complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  32 Tatal not assets or fund belonger.	<u>7,686,532.</u>
Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □	
and complete lines 30 through 34.	
30 Capital stock or trust principal, or current funds	
31 Paid-in or capital surplus, or land, building, or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds	
33 Total het assets of fund balances	1,664,734.
34 Total liabilities and net assets/fund balances 11,709,875. 34 11	1,665,039.

	990 (2015) HINDS COMMUNITY COLLEGE FOUNDATION, INC.	<u>64-</u>	<u> 06220</u>	) <u>23</u>	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	'Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		782		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	13:	3,2	<u>41.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	<del></del>	648	<u>3,9</u>	10.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<b>11</b>	<u>. 709</u>	9,8	<u>75.</u>
5	Net unrealized gains (losses) on investments	5	<	<694	1,0	<u>51.</u> :
6	Donated services and use of facilities	6				
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,	İ				
	column (B))	10	<b>11</b> ,	664	1,7	<u>34.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			Ĭ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	ļ	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Ĺ	2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	1			
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		Ĺ	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	,			
	consolidated basis, or both		ľ			
	X Separate basis Consolidated basis Both consolidated and separate basis		ļ			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audīt,	į	ł		
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	. [			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?		L	3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				Form <sup>9</sup>	9 <b>90</b> (	(2015)

#### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 64-0622023 HINDS COMMUNITY COLLEGE FOUNDATION Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 X 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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) iv) is the organization (III) Type of organization (v) Amount of monetary (vi) Amount of (i) Name of supported (ii) EIN listed in your (described on lines 1-9 support (see other support (see organization governing document? above (see instructions)) instructions) instructions) Yes HINDS COMMUNITY 5 0 COLLEGE Х

0

Schedule A (Form 990 or 990-EZ) 2015 HINDS COMMUNITY COLLEGE FOUNDATION, INC. 64-0622023 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support			·			
Cale	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and	- <del>-</del>					
	membership fees received (Do not				•		
	include any "unusual grants ")	1403469.	1054554.	2977596.	1583083.	1211975.	8230677.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1403469.	1054554.	2977596.	1583083.	1211975.	8230677.
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						8230677.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	1403469.	1054554.	2977596.	1583083.	1211975.	8230677.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	167,793.	193,135.	83,884.	439,519.	570,176.	1454507.
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						9685184.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectioi	n 501(c)(3)	
<u> </u>	organization, check this box and stop	here		<del></del>	<del></del>		<u> </u>
	ction C. Computation of Publ				1	1	
	Public support percentage for 2015 (I	• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		14	84.98 %
	Public support percentage from 2014	-	·	_		15	94.91 %
16a	33 1/3% support test - 2015. If the c	•			14 is 33 1/3% ог п	nore, check this bo	
	stop here. The organization qualifies	. , , , ,	ŭ				<b>▶</b> [X]
b	33 1/3% support test - 2014. If the c	. =			line 15 is 33 1/3%	or more, check th	nis box
4-	and stop here. The organization qual	· · · · · · · · · · · · · · · · · · ·	•		40 40 - 140		
1/a	10% -facts-and-circumstances tes	-					•
	and if the organization meets the "fac				•	t vi now the organ	ization
	meets the "facts-and-circumstances"	_	•		=	70 and 1 45	100/ 07
b	10% -facts-and-circumstances tes	_					
	more, and if the organization meets the						` <b>.</b> _
40	organization meets the "facts-and-circ		-		•		
18	Private foundation. If the organization	n ula not check a	oox on iine 13, 16	a, 100, 1/a, or 1/t	o, check this box a	na see instruction	<u>s</u> ▶∟

# Schedule A (Form 990 or 990 EZ) 2015 | Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support	elow, please comp	Diete Part II )				
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and	12/2-2:-	(=, ==	15,25,5	1-/	1-1	.,
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose		<u> </u>				
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
				<u> </u>	<del>  .</del>	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf			-	<b> </b>		<del></del>
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5				<u></u>		<del> </del>
7a Amounts included on lines 1, 2, and		1				
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received	ļ					
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						
8 Public support, (Subtract fine 7c from fine 6)						
Section B. Total Support				<b>_</b>		· · · · · · · · · · · · · · · · · · ·
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses					,	
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						-
activities not included in line 10b,	1					
whether or not the business is regularly carried on						
12 Other income Do not include gain				-		
or loss from the sale of capital						
assets (Explain in Part VI)						-
13 Total support (Add lines 9, 10c, 11, and 12)		_ (	J.,	_		
14 First five years. If the Form 990 is fo	r the organization:	s tirst, second, thi	ra, iourth, or iiith i	lax year as a secu	on 50 i (c)(3) organiz	zation,
Check this box and stop here	ie Support De	reentere			-	
Section C. Computation of Publ			(O)		45	
15 Public support percentage for 2015 (		•	column (i))		15	
16 Public support percentage from 2014 Section D. Computation of Inve				<del></del>		
					17	%
17 Investment income percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	ne is, column (i))			<u>%</u>
18 Investment income percentage from			on line 4.4	o 15 io mare the =	18	
19a 33 1/3% support tests - 2015. If the						I / IS HOL
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2014. If the						
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	inis box and see ir	nstructions	

#### Schedule A (Form 990 or 990-EZ) 2015 HINDS COMMUNITY COLLEGE FOUNDATION, INC.64-0622023 Page 4

### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A

Section A	A. All Supporting Organizations
•	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)
	and Bill you checked 11b of Part I, complete Sections A and Cill you checked 11c of Part I, complete

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

	dule A (Form 990 or 990-EZ) 2015 HINDS COMMUNITY COLLEGE FOUNDATION, INC. 64-	<u> </u>	3 Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
	·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	ļ	ļ
b	A family member of a person described in (a) above?	11b		ļ
	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		l
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		}	
	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		
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		
<u>Sec</u>	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1		
	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		
Sec	tion 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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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		L. <u></u> .
<u>Sec</u>	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	s):		
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	nstructions	<u> </u>	
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			1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these			1
	activities but for the organization's involvement	2b_	<u> </u>	<u> </u>
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? Provide details in Part VI.	3a		ļ
b	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		l

	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporting			<u>4-0622023 Page 6</u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying	-		actions. All
Sect	other Type III non functionally integrated supporting organizations must co ion A - Adjusted Net Income	этрые	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2	<u>-</u>	
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	-	
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
θ	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non functional	lly integra	ated Type III supporting org	anızatıon (see

Schedule A (Form 990 or 990-EZ) 2015

instructions)

Sche	dule A (Form 990 or 990-EZ) 2015 HINDS COMMUNI			4-0622023 Page 7
Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	· · · · · · · · · · · · · · · · · · ·
Sect	ion D - Distributions			Current Year
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	Ð	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Coot	ion E. Distribution Allocations (see matrustions)	Excess Distributions	Underdistributions	Distributable
<del></del>	ion E - Distribution Allocations (see instructions)		Pre-2015	Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015			
а				
b				
С				
d	From 2013			
ө	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D,			
	line 7 \$			
a	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
	Remaining underdistributions for years prior to 2015, if	41		
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2015 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2016. Add lines 3			
-	and 4c			
8	Breakdown of line 7			
a				
b				
	Excess from 2013	<del></del>		
	Excess from 2014	•		
	Excess from 2015			
_			•	

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	(Form 990 or 990-EZ)	2015 HINDS	COMMUNITY	COLLEGE F	OUNDATION.	INC.64-0622023	Page 8
Part VI	Supplemental II Part IV, Section A, III line 1, Part IV, Section	nformation. Prones 1, 2, 3b, 3c, 4b on D, lines 2 and 3,	ovide the explanati , 4c, 5a, 6, 9a, 9b, Part IV, Section E,	ons required by Par 9c, 11a, 11b, and 1 lines 1c, 2a, 2b, 3a	t II, line 10, Part II, line 1c, Part IV, Section B,	17a or 17b, Part III, line 12, lines 1 and 2, Part IV, Sectio Part V, Section B, line 1e, Pa	n C,
	(See instructions)			-			
			<u> </u>				.,
-						·	
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### **SCHEDULE D**

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

HINDS COMMUNITY COLLEGE FOUNDATION TNC. **Employer identification number** 64-0622023

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the	—
	organization answered "Yes" on Form 990, Part IV, lir	ne 6	•	
		(a) Donor advised funds	(b) Funds and other accounts	_
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds	
	are the organization's property, subject to the organization's	exclusive legal control?	Yes	No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only	
	for charitable purposes and not for the benefit of the donor of		-	
	impermissible private benefit?	, , ,	_	No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, P		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)		
	Preservation of land for public use (e.g., recreation or	education) Preservation of a histo	orically important land area	
	Protection of natural habitat	Preservation of a certif		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a conservation easement on the last	t
	day of the tax year		Held at the End of the Tax Y	
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ire	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax	
	year ▶	•		
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements	t holds?	Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation easements during the year	
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	on easements during the year	
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(	h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?		Yes	No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	statement, and balance sheet, and	
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes t	he organization's accounting for	
	conservation easements			
Par	t III Organizations Maintaining Collections o		her Similar Assets.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	ent and balance sheet works of art,	
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherar	nce of public service, provide, in Part X	an,
	the text of the footnote to its financial statements that descri	bes these items		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, histor	ıcal
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	lic service, provide the following amou	ınts
	relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$	
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$	
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$	
b	Assets included in Form 990, Part X		<b>▶</b> \$	

_		OMMONITI CO						3 Page ∠
Par								
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that are a	significai	nt use of its	collection	ı ıtems
	(check all that apply)							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	θ	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organization's exe	empt pui	pose in Par	t XIII	
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other simila	ar assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?			Yes	☐ No
Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" o	n Form 9	90, Part IV,	line 9, or	
	reported an amount on Form 990, Par		•					
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other assets no	t include	d		
	on Form 990, Part X?		•				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table					
	. ,	•	J				Amount	
С	Beginning balance				10			
	Additions during the year				1d			
- A	Distributions during the year				1e			
f	Ending balance				1f	1		
2a	Did the organization include an amount on Fe	orm 990. Part X. line	21. for escrow or cu	ustodial account liab			Yes	□ No
	If "Yes," explain the arrangement in Part XIII		•		•			
Pai	•							
	<u> </u>	(a) Current year	(b) Prior year	(c) Two years back		e years back	(e) Four	years back
1a	Beginning of year balance	6,972,398.	5,360,863.	5,025,648.		601,972.	1	488,577.
b	Contributions	162,902.	562,001.	170,720.	_	176,404.		100,300.
C	Net investment earnings, gains, and losses		,					
d	Grants or scholarships	551,231.	1,049,534.	164,495.		247,272,		13,095.
е	Other expenditures for facilities					,_,		
_	and programs							
f	Administrative expenses							
g	End of year balance	7,686,531.	6,972,398.	5,360,863.	5	025,648,	4	601,972.
2	Provide the estimated percentage of the curr					,	·	
a	Board designated or quasi-endowment	<b>,</b>	%	<b>,,</b>				
b	Permanent endowment ► 100.00	%	<del>_</del> ' · -					
c	Temporarily restricted endowment ▶	<u>~~~</u> %						
_	The percentages on lines 2a, 2b, and 2c sho							
3a	Are there endowment funds not in the posse		ation that are held a	nd administered for	the orga	nization		
	by	J			3		Γ	Yes No
	(i) unrelated organizations						3a(i)	Х
	(ii) related organizations						3a(ii)	Х
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the	•						
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	), Part IV, line 11a S	See Form 990, Part X	, line 10			
	Description of property	(a) Cost or of	1	T T	Accumula	ated	(d) Book	value
	. , , ,	basis (investr	', '	1 ' '	preciati			
1a	Land	204,0	000.				204	4,000.
b	Buildings							<del></del>
С	Leasehold improvements							
d	Equipment		-					
ө	Other							
	Add lines 1a through 1e (Column (d) must e	quel Form 990 Pert	X column (B) line 1	(Oc.)			204	4.000.

OF - YEAR T	MARKET	VALUE  -of-year market value
OF - YEAR T	MARKET	VALUE
T Form 990, Part X	, line 13	
T Form 990, Part X	, line 13	
T Form 990, Part X	, line 13	
T Form 990, Part X	, line 13	
T Form 990, Part X	, line 13	
orm 990, Part X		-of-year market value
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		-of-year market value
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<del></del>		
		.c.us
orm 990, Part X	(, line 15	
		(b) Book value
_		
<del>-</del> ·		
_		
		·
		<del></del> ·
See Form 990	Dart Y line 25	
	-ait A, 1110 23	
ļ		
-	See Form 990, alue	See Form 990, Part X, line 25

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X

HINDS COMMUNITY COLLEGE FOUNDATION, INC.

64-0622023 Page 3

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 HINDS COMMUNITY COLLE			0622023 Page <b>4</b>
Part XI Reconciliation of Revenue per Audited Financial	-	oer Return	•
* Complete if the organization answered "Yes" on Form 990, Part IV			
1 Total revenue, gains, and other support per audited financial statements		1	1,088,100.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	1-1 .04.0		
a Net unrealized gains (losses) on investments	2a <694,0	21.0	
b Donated services and use of facilities	2b		
c Recoveries of prior year grants d Other (Describe in Part XIII )	2c   2d		
e Add lines 2a through 2d	20	2ө	<694,051.
3 Subtract line 2e from line 1		3	1,782,151.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			1,702,131.
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIII )	4b		
c Add lines 4a and 4b		4c	0.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	5	1,782,151.
Part XII Reconciliation of Expenses per Audited Financial	Statements With Expenses	per Retui	r <b>n.</b>
Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a		
1 Total expenses and losses per audited financial statements		1	1,133,241.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments	<u>2</u> b		
c Other losses	2c		
d Other (Describe in Part XIII )	2d		•
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	1,133,241.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b	1 45		
<ul><li>a Investment expenses not included on Form 990, Part VIII, line 7b</li><li>b Other (Describe in Part XIII)</li></ul>	4a 4b		
c Add lines 4a and 4b	40	4c	0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18 )	5	1,133,241.
Part XIII Supplemental Information.	10 70 7		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a a	and 4, Part IV, lines 1b and 2b, Part V	/, line 4, Part )	X. line 2: Part XI.
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provid		,	,
	,		
PART V, LINE 4:			
PERMANENTLY RESTRICTED ENDOWMENT FUNDS	ARE USED TO SUPPOR	T SCHOI	JARSHIPS
700 WTW7 0000 0000 0000 0000 0000 0000 0			
FOR HINDS COMMUNITY COLLEGE. CONTRIBUTI	ONS TO THE ENDOWME	NT FUNI	)S ARE
CIDIECTO TO DONOR RECORDICATIONS THE CONTR		DD 71101	
SUBJECT TO DONOR RESTRICTIONS THAT STIP	OLATE THE ORIGINAL	PRINCI	PAL OF THE
GIFT IS TO BE HELD AND INVESTED BY THE	ECIMDATION INDEETN	י עוסתד	NID TNCOME
OTT TO TO BE HELD AND INVESTED BY THE	FOUNDATION INDEFIN	TIEDI P	MD INCOME
FROM THE FUND IS EXPENDED FOR SCHOLARSH	TPS.		
THE POLICE TO SELECTION TO A CONTROLLED IN	110.		
PART X, LINE 2:			
THE FOUNDATION IS A NON-PROFIT FOUNDATI	ON, WHICH IS EXEMP	T FROM	INCOME
TAXES UNDER SECTION 501(C)(3) OF THE IN	TERNAL REVENUE COD	E	<del> </del>
THE DISTIBUTION THE POINT AND AND AND AND AND AND AND AND AND AND	TOTONIC AND ACCRITAT	o primi	יי זרי גע איי יי דרו
IN EVALUATING THE FOUNDATION'S TAX PROV	TETONE AND ACCRUAL		
09-21-15		Sched	ule D (Form 990) 2015

Schedule D (Form 990) 2015 HINDS COMMUNITY COLLEGE FOUNDATION, INC.64-0622023 Page 5 Part XIII Supplemental Information (continued)
INCOME, AND THE REVERSAL OF TEMPORARY DIFFERENCES, INTERPRETATIONS, AND
TAX PLANNING STRATEGIES ARE CONSIDERED. THE FOUNDATION BELIEVES THEIR
ESTIMATES ARE APPROPRIATE BASED ON CURRENT FACTS AND CIRCUMSTANCES.

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

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

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

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

OMB No 1545-0047

Open to Public Inspection

**2** Employer identification number 64-0622023 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. HINDS COMMUNITY COLLEGE FOUNDATION, INC. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part I Part II

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

Schedule I (Form 990) (2015)

Schedule I (Form 990) (2015) (f) Description of non-cash assistance (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance o 611,957, (c) Amount of cash grant 630 (b) Number of recipients SCHOLARSHIPS TO STUDENTS AT HINDS COMMUNITY (a) Type of grant or assistance 532102 10-28-15 COLLEGE

Page 2

64-0622023

HINDS COMMUNITY COLLEGE FOUNDATION, INC.

Schedule I (Form 990) (2015)

Part III

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

Employer identification number

	HINDS COMMUN	ITY CO	LLEGE FOU	NDATION,	INC.		64-06	2202	3
Pai	t I Types of Property					-			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contril amounts report Form 990, Part VII	ed on		(d) Method of determining noncash contribution amounts		nts
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								-
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles	-							
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded			1000					
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous	-							
13	Qualified conservation contribution -				·				
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (OTHER NON-MON)	Х	0	224	,036.	FAIR MA	RKET	<u>VALU</u>	E OF
26	Other ()								
27	Other ()								
28	Other (								
29	Number of Forms 8283 received by the organiz								
	for which the organization completed Form 828	83, Part IV, I	Donee Acknowled	gement	29		- 4		
							_	Ye	No.
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, line	s 1 throug	gh 28, that it			
	must hold for at least three years from the date	of the initia	il contribution, and	which is not requii	red to be	used for			1
	exempt purposes for the entire holding period?	?					13	Юа	<u> </u>
	If "Yes," describe the arrangement in Part II								
31					<u> </u>				
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell	noncash				
_	contributions?						3	2a	<u> </u>
	If "Yes," describe in Part II								
33	If the organization did not report an amount in	column (c) f	or a type of proper	ty for which columi	n (a) is ch	ecked,	İ		
	describe in Part II		<del> </del>					L	

Schedule M	(Form 990) (2015)	HINDS	COMMUNITY	COLLEGE	FOUNDATION,		64-0622023	Page 2
Part II	Supplemental us reporting in Part this part for any ac	: I, column (l	b), the number of co	nformation require entributions, the r	ed by Part I, lines 30b, 3 number of items receive	32b, and 33, d, or a comb	and whether the organizonation of both Also con	ation
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### **SCHEDULE 0**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

HINDS COMMUNITY COLLEGE FOUNDATION, INC. 64-0622023
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DEVELOPMENT, AND (3) NEW LEARNING OPPORTUNITIES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ALLOCATIONS TO FACULTY AND STAFF AND OTHERS
EXPENSES \$ 85,322. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11:
A COPY OF THE FORM 990 WAS PROVIDED TO THE CLIENT PRIOR TO FILING. THE
CLIENT CHECKS THE FORM 990 FOR ACCURACY AND COMPLETENESS PRIOR TO ITS
FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
ALL POTENTIAL CONFLICTS ARE REVIEWED BY THE EXECUTIVE DIRECTOR AND
INFORMATION IS TO BE HELD ON FILE, THE BOARD WILL BE INFORMED OF THE
CONFLICT, OR THE PERSON IN CONFLICT WILL BE ASKED TO RELINQUISH THEIR
DUTIES.
FORM 990, PART VI, SECTION C, LINE 19:
THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFICT OF INTEREST POLICY,
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART XII, LINE 2C
THERE WERE NO CHNAGES IN THE PROCESS FROM THE PREVIOUS YEAR.