Return of Organization Exempt From Income Tax

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

2016

DLN: 93493319003467 OMB No 1545-0047

Open to Public

Department of the Treasury

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

nterna	l Reven	nue Service						Inspection
A F	or the	2016 c		ning 01-01-2016 $$, and ending 12	2-31-2016			
		plicable	C Name of organization EAST TEXAS COMMUNITIES FOUNDA	TION		D Employe	er identif	ication number
	dress c me cha	-				75-2309	138	
	me cna tial reti	-	Doing business as					
Final Deturn/terminated								
	n/term nended		Number and street (or P O box if ma 315 N BROADWAY AVE	il is not delivered to street address) Room	ı/suıte	E Telephon	e number	•
		n pending				(903) 5	33-0208	
		']	City or town, state or province, count TYLER, TX 75702	try, and ZIP or foreign postal code				
			<u> </u>			G Gross red	eipts \$ 4	4,048,275
			F Name and address of principal	officer	H(a) I	s this a group ret	urn for:	
						ubordinates?		□Yes 🗹 No
						are all subordinat ncluded?	es	☐ Yes ☑ No
Ta	x-exem	npt status	☑ 501(c)(3) □ 501(c)() ◄ (i	nsert no) 4947(a)(1) or 527	I	f "No," attach a l	•	•
W	ebsite	e:► ww	w etcf org		H(c) @	Group exemption	number	>
F orr	n of org	ganızatıon	Corporation Trust Assoc	ciation D Other ►	L Year of	formation 1989	M State	of legal domicile TX
-		C						
Fa	rt I	Sum	mary scribe the organization's mission or	most significant activities				
				s philanthropy by offering simple way	s for donors	to achieve their	lona-ter	m charitable
Ų				able funds including scholarships, end				
É	-							
ACUMUES & GOVERNANCE	, ,	Check thi	s hox >	continued its operations or disposed o	of more than	25% of its net as	ssets	
2				g body (Part VI, line 1a)			з	27
A A	4 1	Number o	of independent voting members of	the governing body (Part VI, line 1b)			4	27
	5 -	Total nun	nber of individuals employed in cal	endar year 2016 (Part V, line 2a) .			5	5
5	6 -	Total nun	nber of volunteers (estimate if nec	essary)			6	31
ŧ.	7a -	Total unr	elated business revenue from Part	VIII, column (C), line 12			7a	C
	b	Net unrel	ated business taxable income from	Form 990-T, line 34			7b	
						Prior Year	\neg	Current Year
_	8 (Contribut	nons and grants (Part VIII, line 1h)			10,928,8	16	7,630,359
Ravenua	l		service revenue (Part VIII, line 2g)				_	(
ďΛċ		-	ent income (Part VIII, column (A), I			5,408,8	303	2,368,245
α	l		venue (Part VIII, column (A), lines			· · · · · · · · · · · · · · · · · · ·		
	l			st equal Part VIII, column (A), line 12	,	16,420,6		112,253 10,110,853
			nd similar amounts paid (Part IX, c		<u> </u>	5,198,2	65	6,647,506
	l		paid to or for members (Part IX, co	* **			_	
S			, ,	nefits (Part IX, column (A), lines 5–10)) <u> </u>	398,3	98	389,26
S.	l		inal fundraising fees (Part IX, colun		·	,-		(
Expenses	l .		aising expenses (Part IX, column (D), lir				+	
ă	l		penses (Part IX, column (A), lines :	639,4	77	617,150		
	l		enses Add lines 13-17 (must equa	•		6,236,1	_	7,653,92
			,	m line 12				
. Ø		Revenue	iess expenses subtract line to no		Begin	ning of Current Y		2,456,936 End of Year
Fund Balances								
334	20	Total ass	ets (Part X, line 16)			75,685,2	11	80,269,573
2	21	Total liab	ılıtıes (Part X, lıne 26)			8,677,6	65	9,351,522
23	22	Net asset	s or fund balances Subtract line 2	1 from line 20		67,007,5	46	70,918,05
Pai	t II	Signa	ature Block					
				ned this return, including accompany				
	nowle		r, it is true, correct, and complete	Declaration of preparer (other than o	omcer) is bas	sed on all informa	ition of v	wnich preparer has
		1.						
		* * * * * * *	* ure of officer			2017-11-14 Date		
ign		Joigilatt	are or officer			Date		
lere	•		Penney President					
			r print name and title	T	T = :			
_	_	P	rınt/Type preparer's name	Preparer's signature	Date	Check I If	TIN	
Paid		-		1		self-employed		
	pare	'' -	ırm's name ► ırm's address ►			Firm's EIN ►		
Jse	Onl	ly ˈ	mm 3 audicoo 🚩			Phone no		
						1		
				n above? (see instructions)		<u>.</u>	<u> </u>	ſes □No
ar D	anery	work Da	duction Act Notice see the sen:			No 11707V		Form 990 (2016

Form	990 (2016)						Page 2
Par	t IIII Statement	of Program Service	e Accomplis	hments			
	Check If Sche	edule O contains a respo	nse or note to	any line in this Part III			. \square
1	Briefly describe the	organization's mission					
					nors to achieve their long-term cha and donor-advised funds	arıtable objectı	ves We
2	Did the organization	undertake any significa	nt program ser	vices during the year wh	nich were not listed on		
	the prior Form 990 o	or 990-EZ?				☐ Yes	☑ No
	If "Yes," describe the	ese new services on Sch	nedule O				
3	Did the organization	cease conducting, or m	ake significant	changes in how it condu	cts, any program		
		ese changes on Schedul				☐ Yes	☑ No
4	Describe the organize Section 501(c)(3) are	zation's program service	accomplishmer	to report the amount of	largest program services, as measu f grants and allocations to others, t		ses
4a	(Code) (Expenses \$	6,844,592	including grants of \$	6,647,506) (Revenue \$)	
	See Additional Data						
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)	
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)	
4d	Other program servi (Expenses \$	ices (Describe in Schedi	ıle O) udıng grants of	\$) (Revenue \$)	
4e	Total program ser	vice expenses ▶	6,844,5	92			

or X as applicable

Page 3

No

Nο

Nο

Nο

Nο

Nο

No

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Nο

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Nο

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Nο

No

Nο

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Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

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

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Yes

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11a

11b

11c

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12a

12b

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14a

14b

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Yes

Yes

Yes

Yes

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

Section 501(c)(3) organizations.

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No

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26

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28a

28b

28c

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35a

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Yes

Yes

Yes

Form 990 (2016)

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Nο

Nο

Νo

Νo

Nο

	the last day of the year, that was issued after December 31, 2002° If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No

С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X. line 5. 6 or 22 for receivables from or payables to any current or		

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🕏

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

instructions for applicable filing thresholds, conditions, and exceptions)

	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 3
FGI	Check if Schedule O contains a response or note to any line in this Part V			П
	Check in beheatile of contains a response of fisca to any line in this fact vir.		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 _{1c}		No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a		No
Va	solicit any contributions that were not tax deductible as charitable contributions?	Ua		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the annual transfer and a discretization of the second			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
_	required?	7g		No
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
17~	Section 4947(a)(1) non-exempt charitable trusts. Is the organization files Form 200 in law of Form 10412	12a		No
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		INO
U	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			orm 99	0 (2016)

Par		, Governance, Management, and DisclosureFor each "Yes" response to lines 2 t 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched			" respo	nse to li	nes
	I	Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction /	A. Governing Body and Management					
			ı			Yes	No
1a	Enter t	he number of voting members of the governing body at the end of the tax year	1a	27	·		
	body, o	e are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or committee, explain in Schedule O					
b	Enter t	he number of voting members included in line 1a, above, who are independent	1b	27	,		
2	Did an	y officer, director, trustee, or key employee have a family relationship or a busine director, trustee, or key employee?	ss rela	ationship with any other	2		No
3		e organization delegate control over management duties customarily performed by ers, directors or trustees, or key employees to a management company or other p			3		No
4	Did the	e organization make any significant changes to its governing documents since the	prior l	Form 990 was filed?	4		No
5	Did the	e organization become aware during the year of a significant diversion of the organ	nızatıo	n's assets?	5		No
6		e organization have members or stockholders?			6		No
	Did the	e organization have members, stockholders, or other persons who had the power ters of the governing body?	to elec	t or appoint one or more	7a		No
b	Are an	y governance decisions of the organization reserved to (or subject to approval by) s other than the governing body?) mem	bers, stockholders, or	7 b		No
8	,	e organization contemporaneously document the meetings held or written actions	under	taken during the year by			
а	The go	verning body?			8a	Yes	
b	Each c	ommittee with authority to act on behalf of the governing body?			8b	Yes	
9		e any officer, director, trustee, or key employee listed in Part VII, Section A, who zation's mailing address? If "Yes," provide the names and addresses in Schedule C		t be reached at the	9		No
Se	ction l	B. Policies (This Section B requests information about policies not requ	ired b	y the Internal Revenu	e Code	e.)	
						Yes	No
10a	Did the	e organization have local chapters, branches, or affiliates?			10a		No
b		," did the organization have written policies and procedures governing the activitie anches to ensure their operations are consistent with the organization's exempt pi			10b		
11a	Has the	e organization provided a complete copy of this Form 990 to all members of its go	vernın •	ng body before filing the	11a	Yes	
b	Describ	pe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did the	e organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b	Were c	officers, directors, or trustees, and key employees required to disclose annually integrs?	terests	that could give rise to	12b	Yes	
С	Did the	e organization regularly and consistently monitor and enforce compliance with the ile O how this was done	policy	? If "Yes," describe in	12c	Yes	
13		e organization have a written whistleblower policy?			13	Yes	
14		e organization have a written document retention and destruction policy?			14	Yes	
15	Did the	e process for determining compensation of the following persons include a review s s, comparability data, and contemporaneous substantiation of the deliberation and	and ap	proval by independent			
а		ganization's CEO, Executive Director, or top management official			15a	Yes	
		officers or key employees of the organization			15b	Yes	
•		" to line 15a or 15b, describe the process in Schedule O (see instructions)	•			, 03	
16a	Did the	e organization invest in, contribute assets to, or participate in a joint venture or sile entity during the year?	mılar a	arrangement with a	16a		No
b	If "Yes ın joint	," did the organization follow a written policy or procedure requiring the organizat venture arrangements under applicable federal tax law, and take steps to safegu with respect to such arrangements?	ard th		16b		
Se	ction (C. Disclosure					
17		e States with which a copy of this Form 990 is required to be filed▶					
18	Section	n 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99 ile for public inspection Indicate how you made these available. Check all that app		990-T (501(c)(3)s only)			
		wn website 🗹 Another's website 🗹 Upon request 🔲 Other (explain in Sc		e O)			
19	Describ	pe in Schedule O whether (and if so, how) the organization made its governing do and financial statements available to the public during the tax year		•			
20	State t	he name, address, and telephone number of the person who possesses the organ Penney 315 N Broadway Ave Ste 210 Tyler, TX 75702 (903) 533-0208	ızatıor	's books and records			

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
La Complete	e 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

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

(B)

(A)

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

Form 990 (2016) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo	ox, u an off	ot che unles fficer	eck mo ss pers r and a :ee)	son	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table							\Box			
							П			
							\Box			
							\Box			
							П			
					,					
1b Sub-Total										
c Total from continuation sheets to Pa d Total (add lines 1b and 1c)	•					>		122,963		
Total number of individuals (including of reportable compensation from the compensa	but not limited	to those				e) who	rece	eived more than \$1	00,000	

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

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Name and business address Description of services Compensation

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

Part	VIII Statement of R						
	Check If Schedule	O contains a resp	onse or note to any l	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	1a Federated campaigns	1a			revenue		512-514
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues .	. 1b					
ق	c Fundraising events .	. 1c					
ifts. ar A	d Related organizations	1d					
<u>ن</u> £ ي	e Government grants (con	tributions) 1e					
ions	f All other contributions, g and similar amounts not		7,630,359				
buti the	above g Noncash contribution:	L	,,,,,,,,,,,				
	in lines 1a-1f \$		74,096				
S E	h Total.Add lines 1a-1f		.	7,630,359			
- Le			Business	Code			
٧٠٩	2a 						
Service Revenue	b ————						
ا ∡	c —						
× ×	d ————————————————————————————————————						
Program	f All other program serv	ice revenue					
ě	9 Total. Add lines 2a-2f		•	0			
	3 Investment income (inc		ınterest, and other	1,869,887	1,869,887		
	similar amounts) 4 Income from investmen		oond proceeds	1,809,887			
				90			90
		(ı) Real	(II) Personal	j			
	6a Gross rents						
	b Less rental expenses						
	c Rental income or						
	(loss)						
	d Net rental income or (0			
	7a Gross amount	(ı) Securities	(II) Other				
	from sales of assets other	34,435,77	5				
	than inventory						
	b Less cost or other basis and	33,937,41	8				
	sales expenses C Gain or (loss)	498,35					
	d Net gain or (loss)	<u> </u>	<u> </u>] 498,358	498,358		
	8a Gross income from fun						
Other Revenue	(not including \$ contributions reported	on line 1c)					
₹.	See Part IV, line 18	a	١				
ď	b Less direct expenses c Net income or (loss) fr		L]			
the	9a Gross income from gar		vents •	1			
0	See Part IV, line 19 .						
	b Less direct expenses	b					
	c Net income or (loss) fr			J 0			
	10aGross sales of inventor		·				
	returns and allowances		 				
	b Less cost of goods sol	d I					
	c Net income or (loss) fr		ntory ►	0			
	Miscellaneous Ri		Business Code 900099	85,315	85,315		
	11aADMIN FEES FROM AC	GENCY EN	900099	63,313	83,313		
	b Other Income		900099	26,848	26,848		
	- Other income]			
	с —		1				
	d All other revenue .						
	e Total. Add lines 11a-1	l1d		112,163			
	12 Total revenue. See Ir	nstructions .		·			90
	<u> </u>			10,110,857	1 2,400,408	<u> </u>	Form 990 (2016)

Form 990 (2016)					Page 10
	t of Functional Expenses 1(c)(4) organizations must complete all col	lumns All other orga	nizations must comp	lete column (A)	
Check if Sche	dule O contains a response or note to any	line in this Part IX	<u>.</u>		🗆
Do not include amount 7b, 8b, 9b, and 10b of	ts reported on lines 6b, Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
	sistance to domestic organizations and its See Part IV, line 21	6,466,706	6,466,706		
2 Grants and other ass IV, line 22	sistance to domestic individuals. See Part	180,800	180,800		
	sistance to foreign organizations, foreign oreign individuals. See Part IV, line 15	0			
4 Benefits paid to or fo	or members	0			
5 Compensation of cur key employees .	rent officers, directors, trustees, and	134,912	40,474	65,432	29,006
	cluded above, to disqualified persons (as n 4958(f)(1)) and persons described in	0			
7 Other salaries and w	ages	169,757	50,927	82,332	36,498
	s and contributions (include section 401 oyer contributions)	15,814	4,744	7,670	3,400
9 Other employee ben	efits	43,814	13,144	21,250	9,420
10 Payroll taxes		24,968	7,490	12,110	5,368
11 Fees for services (no	n-employees)				
a Management		0			
b Legal		0			
c Accounting		20,192		20,192	
d Lobbying		0			
e Professional fundrais	ing services See Part IV, line 17	0			
f Investment manager	ment fees	364,123		364,123	
	nount exceeds 10% of line 25, column 11g expenses on Schedule 0)	20,348	6,104	9,869	4,375
12 Advertising and pror	notion	83,880	36,907	20,131	26,842
13 Office expenses .		40,852	11,847	17,158	11,847
14 Information technology	ogy	28,108	8,151	11,806	8,151
15 Royalties		0			
16 Occupancy		20,703	6,004	8,695	6,004
17 Travel		13,362	3,875	5,612	3,875
18 Payments of travel of federal, state, or local	r entertainment expenses for any al public officials	0			
19 Conferences, conver	itions, and meetings	5,531	1,604	2,323	1,604
20 Interest		0			
21 Payments to affiliate	s	0			
22 Depreciation, deplet	on, and amortization	2,858	829	1,200	829
23 Insurance		5,435	1,576	2,283	1,576
miscellaneous expen	mize expenses not covered above (List ses in line 24e If line 24e amount 25, column (A) amount, list line 24e le O)				
a Dues and Subscript	tions	11,779	3,416	4,947	3,416
b Ad valorem taxes		-21	-6	-9	-6
d					
e All other expenses		0			
<u></u>	penses. Add lines 1 through 24e	7,653,921	6,844,592	657,124	152,205
Joint costs. Comple reported in column (educational campaig	ete this line only if the organization B) joint costs from a combined n and fundraising solicitation	,,555,521	5,577,532	337,124	
check nere 🚩 🗀 II	following SOP 98-2 (ASC 958-720)	l			

Forn	990	(2016)				Page 11
Pa	rt X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part IX			🗆
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1	0
	2	Savings and temporary cash investments .	[1,218,664	2	1,107,722
	3	Pledges and grants receivable, net			3	0
	4	Accounts receivable, net	[4	0
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L	ited employees Complete Part		5	0
ssets	6 7	Loans and other receivables from other disqualisection 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L Notes and loans receivable, net	n 4958(c)(3)(B), and itions of section 501(c)(9)		6	0
SS	8	Inventories for sale or use			8	0
V	9	Prepaid expenses and deferred charges		16,303	9	20,663
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 111,708			
	b	Less accumulated depreciation	10b 88,774	25,792	10c	22,934
	11	Investments—publicly traded securities .		74,424,452	11	79,118,254
	12	Investments—other securities See Part IV, line	11		12	0
	13	Investments—program-related See Part IV, line	e 11		13	0
	14	Intangible assets	[14	0
	15	Other assets See Part IV, line 11	[15	0
	16	Total assets.Add lines 1 through 15 (must equ	al line 34)	75,685,211	16	80,269,573
	17	Accounts payable and accrued expenses		10,710	17	21,975
	18	Grants payable		60,050	18	62,500
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Ś	21	Escrow or custodial account liability Complete F	Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee				
<u> </u>		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties		24	
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17-24) Complete Part X of Schedule D		8,606,905	25	9,267,047
	26	Total liabilities. Add lines 17 through 25		8,677,665	26	9,351,522
3alances	27	Organizations that follow SFAS 117 (ASC 9) complete lines 27 through 29, and lines 33 Unrestricted net assets		1,556,732	27	1,627,942
331	28	Temporarily restricted net assets		65,450,814	28	69,290,109

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30 31

32

33

34

70,918,051

80,269,573

Form **990** (2016)

67,007,546

75,685,211

Net Assets or Fund Ba

29

30

31

32

33

34

Permanently restricted net assets

Total net assets or fund balances .

Total liabilities and net assets/fund balances

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Form	990 (2016)				Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10	,110,857
2	Total expenses (must equal Part IX, column (A), line 25)	2		7	,653,921
3	Revenue less expenses Subtract line 2 from line 1	3		2	,456,936
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		67	,007,546
5	Net unrealized gains (losses) on investments	5		1	,453,569
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		70	,918,051
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>	 Yes	□ No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a

3b

Νo

Form **990** (2016)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Form 990, Part III, Line 4a:

Form 990 (2016)

Software Version: 2016v3.0

Grants (schedule attached) distributed to local, national, and international non-profit organizations to further their charitable missions

EIN: 75-2309138

Software ID: 16000303







Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional MISC) related organizations MISC) below dotted organizations employee line) 1 00 Michael D Allen Χ 0.00 1 00 Х

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Director
GREGORY J WRIGHT
POLICY CHAIR
Mark L Boon
Director

BARBARA BASS

John W Ferguson Jr

SUPPORT CHAIR

EDWIN HOLT

Fritter McNally

ROE BUCKLEY

AUDIT CHAIR

Thomas Woldert

John Pavne

Director

Director

Director

Director

Director

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Key employee Institutional MISC) related organizations MISC) below dotted organizations line) Trustee

Jon Alexander	1 00	_			0	0	
Director	0 00	^			0		
Thomas Smith	1 00				0	0	
INVSTMT CHAIR	0 00	^			3	0	
ALAN ROSEMAN	1 00	.,					
Director	0 00	X			0	0	
Steve Dement	1 00	.,					
Director		X			U	٥	

Director	0 00						
Steve Dement	1 00	V			0	0	
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STEVE ROOSTH	1 00						

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Douglas G Bolles

VICE CHAIR

Dale Lunsford

Michael Bosworth

Director

Director

Lisa Lujan

Director

SHANNON GLENNEY	1 00	×			0	0	,
Director	0 00					J	·
STEVE ROOSTH	1 00				0	0	
Director	0.00	^			0	o o	

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Compensated Employees, and Independent Contractors (D) (C) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and

(F)

Estimated

from the

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122,963

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	organizations below dotted line)	ndrwdual trustee or director	Institutional Trustee	Officer	Ť	tighest compensated employee	Former	MISC)	MISC)	related organizations
Tony Morgan	1 00	×						_	0	
Director	0.00							ľ		

		Stee	Trustee	Đ	pensated			
Tony Morgan Director	1 00	X				0	0	
Brad Brookshire	1 00	X				0	0	
Director	0 00							
Dawn Franks	1 00	×				0	0	

Tony Morgan	1 00	×				0	0	0
Director	0 00	l				,	,	
Brad Brookshire	1 00	×				0	0	0
Director	0 00	l				,	,	
Dawn Franks	1 00	×				0	0	0
GRANTS CHAIR	0 00	l				,	,	
Tıffany Kırgan	1 00	.,						
Director	0 00	×					0	0
The state of the s		ı —			. —	1		

Brad Brookshire	1 00	l				0	0	0
Director	0 00	^					0	
Dawn Franks	1 00	l					0	
GRANTS CHAIR	0 00	_ ^				٥	0	
Tiffany Kirgan	1 00	l 🗸				0	0	
Director	0 00	_ ^				0	0	
Kristen Seeber	1 00	,						
		X	l	l	l	0	0	1 0

GRANTS CHAIR	0 00	^				3	
Tiffany Kirgan	1 00	x			0	0	0
Director	0 00	,,			,	,	
Krısten Seeber	1 00	×			0	0	0
MARKETING CHAIR	0 00	^				,	

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Tiffany Kirgan	1 00	×			,		
Director	0 00				9	Ĭ	
Kristen Seeber	1 00	_			0		
MARKETING CHAIR	0 00	^				Ŭ	
Gordon Northcut	1 00						

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BOARD CHAIR

BOB DYER

Treasurer

President

Kyle L Penney

efile	GR/	APHIC prii	nt - DO NOT PROCES	S As Filed Data -			DLN: 9	3493319003467	
SCH	IED	ULE A	Public	Charity Statu	s and Pul	olic Supp	ort	OMB No 1545-0047	
(Forn	n 990			organization is a sect	ion 501(c)(3) d	organization o		2016	
990E	Z)			4947(a)(1) nonexe ▶ Attach to Form				2010	
		the Treasury	► Information ab	out Schedule A (Form			uctions is at	Open to Public Inspection	
Name	of th	ue Service ie organiza		<u>www.irs.g</u>	<u>0V/10/111990</u> .		Employer identific	<u> </u>	
AST TI	EXAS (COMMUNITIES	FOUNDATION				75-2309138		
Par			for Public Charity Sta					_	
	ganız:		a private foundation becau	•	•	,			
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2			scribed in section 170(b		,				
3		•	or a cooperative hospital s	-					
4			esearch organization oper and state	ated in conjunction with	a hospital descri	bed in section	170(b)(1)(A)(iii). E	nter the hospital's	
5			ation operated for the ben (iv). (Complete Part II)	efit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170	
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(4)(v).		
7	✓		ation that normally receive (O(b)(1)(A)(vi). (Comple		s support from a	governmental (unit or from the gener	al public described in	
8		A communi	ty trust described in sect i	on 170(b)(1)(A)(vi)	(Complete Part I	I)			
9			ural research organization rant college of agriculture					ege or university or a	
LO		from activit	ation that normally receive ties related to its exempt for income and unrelated but see section 509(a)(2).	unctions—subject to cer siness taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross	
1			ation organized and opera	•	r public safety S	ee section 509)(a)(4).		
12		more public	ation organized and opera ly supported organization through 12d that describ	s described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509 (a		
а		Type I. A so	supporting organization op n(s) the power to regularl Part IV, Sections A and	perated, supervised, or copy appoint or elect a major	ontrolled by its s	upported organi	zation(s), typically by		
b		Type II. A manageme	supporting organization s nt of the supporting organ plete Part IV, Sections	upervised or controlled i lization vested in the sar					
c		Type III f	unctionally integrated. organization(s) (see instru	A supporting organizatio				ited with, its	
d		Type III n functionally	on-functionally integra integrated The organization i) You must complete F	ted. A supporting organition generally must satis	ization operated fy a distribution i	in connection w requirement and	th its supported organ		
e		Check this	box if the organization red or Type III non-functiona	eived a written determir	nation from the II		ype I, Type II, Type II	I functionally	
f	Enter		of supported organization		o.gamzation				
			ing information about the	supported organization(s)				
(i) Na	me of	f supported o	organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No	1		
Γotal			tion Act Notice, see the		Cat No 11285		 Schedule A (Form 9		

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

▶□ supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-FZ) 2016

Section A. Public Support									
the organization fails to qualify under the tests listed below, please complete Part II.)									
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT								

Se	ection A. Public Support									
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total			
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and									
_	membership fees received (Do not	I								
	ınclude any "unusual grants`")	<u> </u>								
2	Gross receipts from admissions,	I								
	merchandise sold or services performed, or facilities furnished in	I								
	any activity that is related to the	I								
	organization's tax-exempt purpose	I								
_	Cross receipts from activities that are									
3	Gross receipts from activities that are not an unrelated trade or business	I								
	under section 513	I								
4	Tax revenues levied for the									
	organization's benefit and either paid	I								
5	to or expended on its behalf The value of services or facilities									
,	furnished by a governmental unit to	I								
	the organization without charge	ļ								
6	Total. Add lines 1 through 5	<u></u>								
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I								
	5 received from disqualified persons	<u> </u>								
b	Amounts included on lines 2 and 3									
	received from other than disqualified	I								
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I								
	13 for the year	I								
C	Add lines 7a and 7b									
8	Public support. (Subtract line 7c									
	from line 6)									
31	ection B. Total Support	Г	1	T	Т					
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f)Total			
9	Amounts from line 6									
.0a	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties and									
ь	income from similar sources Unrelated business taxable income									
U	(less section 511 taxes) from									
	businesses acquired after June 30,									
	1975									
	Add lines 10a and 10b Net income from unrelated business									
11	activities not included in line 10b,									
	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) First five years. If the Form 990 is fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization			
14	check this box and stop here	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCON 301(C)(3) 01	yanızatıon, ► □			
<u> </u>	ection C. Computation of Public	Support Perce	ntage							
15	Public support percentage for 2016 (lin			column (f))		15				
16	Public support percentage from 2015 S		· ·	(.,,		16				
	ection D. Computation of Invest	<u> </u>				10				
17	Investment income percentage for 20:			line 13, column (f))	17				
18	Investment income percentage from 2			,(••	18				
	331/3% support tests—2016. If the			on line 14, and lir	e 15 is more than		e 17 is not			
	more than 33 1/3%, check this box and						▶ □			
		b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is								

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

ightharpoons

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

7

8

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V) Section 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	1		
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			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	1 - '		l

	(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)	L
	W 20010 305 (4)(1) 01 (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	Ĺ
	below	ſ
•	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	

	III Section 309(a)(1) or (2)	2	i	
3a	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	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				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			

	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		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below		
	Did the eventualities have obtained and discussion in deciding whather to make make to the fewer or comparted	\Box	

		30	l		
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				
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b			
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections	·			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				

	to the foleigh supported organization was used exclusively for section 170(e)(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		

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	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		
C-	ection B. Type I Supporting Organizations			
se	ection B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗀	1.03	""
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	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		
			•	•
Se	ection C. Type II Supporting Organizations		Yes	N.
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [res	No
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	or		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
				•
Se	ection D. All Type III Supporting Organizations		Τ.,	
	Did the appropriate analysis to each of the growth of annual to the last the second of the second of the	,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of			
	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?	<u> </u>	-	<u> </u>
2	Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported arrangement	n 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)	<u> </u>		
_	Divinion of the valeting described in (2) did the surround of	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	actions)		
a				
b				
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))
2	Activities Test Answer (a) and (b) below.	_	Yes	No
a	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 supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3		
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>		
	substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the			
	organization's position that its supported organization(s) would have engaged in these activities but for the organization	s		
_	involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	\vdash	1	
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		
		,	1	

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		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	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .



efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D (Form 990)

For Paperwork Reduction Act Notice, see the Instructions for 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.

DLN: 93493319003467 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** EAST TEXAS COMMUNITIES FOUNDATION 75-2309138 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 101 167 2 Aggregate value of contributions to (during 4,793,331 2,097,354 3 3,781,978 2,307,359 Aggregate value of grants from (during year) 26,547,767 39,486,743 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? **V** Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No ✓ Yes Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2016

Pai	t III	Organizations Ma	aintaining Col	lections o	of Art, Hi	stori	cal Tı	eas	ures, or Othe	r Similar	Assets (continued)
3		the organization's acq (check all that apply)	uisition, accessior	n, and other	r records, c	heck a	any of	the f	ollowing that are	a significa	nt use of its	collection
а		Public exhibition				d		Loar	n or exchange pr	ograms		
b		Scholarly research				e		Oth	er			
С		Preservation for future	e generations									
4	Provi	de a description of the	organızatıon's col	lections and	d explain ho	ow the	ey furth	ner th	ne organization's	exempt pu	irpose in	
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No											
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.	odial Arrange ganization answ	ments. vered "Yes	" on Form	າ 990	, Part	IV,	line 9, or repor	ted an ar		
1a		e organization an agent ded on Form 990, Part I		an or other	ıntermedia	ry for	contril	outio	ns or other asset	s not	☐ Ye	s 🗆 No
b	If "Y€	es," explain the arrange	ement in Part XIII	and comple	ete the follo	owing	table				Amount	
c	Begir	nning balance				_			1c			
d	Addıt	ions during the year							1d			
е	Dıstrı	butions during the year	-						1e			
f	Endır	ng balance							1f			
2a	Did tl	he organization include	an amount on Fo	rm 990, Pai	rt X, line 2	1, for	escrow	or c	ustodial account	liability?		s 🗆 No
b	If "Ye	es," explain the arrange	ment in Part XIII	Check here	e if the exp	olanatı	on has	bee	n provided in Par	t XIII		
Pa	art V	Endowment Fund	ds. Complete ıf	the organ	ızatıon ar	nswer	ed "Ye	es" c	n Form 990, P	art IV, lın	ie 10.	
				(a)Currer		(b) Pi	rıor yea	$\overline{}$	(c)Two years bac		years back	(e)Four years back
1a	Beginn	ing of year balance .			,408,981		40,957		37,550,9	_	26,682,779	21,914,720
b	Contrib	outions			,241,341		5,002		3,206,4		8,067,709	3,458,654
С	Net inv	estment earnings, gair	ns, and losses		,406,256		143	,603	1,669,9	01	4,129,747	2,262,432
d	Grants	or scholarships	•	1	,353,253		1,389	,468	1,168,9	05	1,091,042	740,949
е		expenditures for facilitions ograms	es									
f	Admını	strative expenses .			318,857		304	,524	301,2	83	238,288	212,078
g	End of	year balance		47	,384,468		44,408	,981	40,957,0	55	37,550,905	26,682,779
2	Provi	de the estimated perce	ntage of the curre	nt year end	d balance (line 1g	g, colui	mn (a	a)) held as			
а	Board	d designated or quasi-e	ndowment 🟲	2 450 %								
b	Perm	anent endowment 🟲										
С	Temp	orarily restricted endov	wment ► 97.5	550 %								
	The p	ercentages on lines 2a	, 2b, and 2c shou	ld equal 100	0%							
3а		here endowment funds	not in the posses	sion of the	organizatio	n that	t are h	eld a	nd administered	for the		[V
	_	nization by nrelated organizations									3:	Yes No
		elated organizations .		• •			•		• •			a(ii) No
b		es" on $3a(\pi)$, are the rel		s listed as i	required or	Sche	dule R	, .				3b No
4	Desci	ribe in Part XIII the inte	ended uses of the	organizatio	n's endowr	ment f	unds					
Pa	rt VI	Land, Buildings,	and Equipmer	nt.								
		Complete if the or						_				
	Descri	ption of property	(a) Cost or oth (Investme		(b) Cost or	other	basıs (c	ther)	(c)Accumulated	d depreciatio	n e	(d)Book value
1a	Land											
b	Buildin	gs										
c	Leaseh	old improvements		13,398						3,9	96	9,402
d	Equipn	nent		98,310						84,7	78	13,532
		lines 1a through 1e (Co	olumn (d) must ei	aual Form 9	190 Part Y	colur	nn (B)	line	10(c))	•	+	22 024

Part VII	Investments—Other Securities. Complete if the org	anızatıon ar	swered 'Yes' on F	Form 990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Bo		(c)Method of valuation or end-of-year market value
(1)Financial	derivatives			
	neld equity interests	<u> </u>		
A)				
В)				
C)				
D)				
E)				
F)				
G)				
H)				
	n (b) must equal Form 990, Part X, col (B) line 12)	▶		5 000 B 17/1
Part VIII	Investments—Program Related. Complete if the or See Form 990, Part X, line 13.			
_	(a) Description of investment	(b) Book val	ue Cost	(c) Method of valuation or end-of-year market value
1)				
2)				
3)				
(4)				
5)				
6)				
7)				
(8)				
9)				
otal. (Columi Part IX	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered 'Yes' of	on Form 990	Part IV line 11d S	ee Form 990 Part X line 15
	(a) Description			(b) Book value
1)				
2)				
3)				
4)				
5) 6)				
7)				
8)				
9)				
	mn (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. Complete if the organization answer			
	See Form 990, Part X, line 25. (a) Description of liability	(b)	Book value	
1) Federal II	ncome taxes			
unds held a	as agency endowments		9,267,047	
2)	a agency chaominents		3,207,017	
3)				
4)				
5)				
6)				
7)				
8)				
9)				
,		1		
	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	9,267,047	

Part XI

2

а

b

c

d

е

3

4

b

c 5

1

2

а b

d

е 3

а

b

c

Part XIII

5

4

Part XII

Schedule D (Form 990) 2016

Page 4

1,424,768

10,110,857

10,110,857

7,657,614

3,693

7.653.921

7,653,921

Schedule D (Form 990) 2015

Other (Describe in Part XIII) . . Add lines 2a through 2d Subtract line 2e from line 1 .

Other (Describe in Part XIII)

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII)

Add lines 4a and 4b . . .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments . . . Donated services and use of facilities . Recoveries of prior year grants . . .

2d Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

> 4a 4b

> > 2a

2b

2c

2d

4b

Explanation

2a

2b

2c

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

4c Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2e

3

1.399.950

24,818

3.693 2e 3 4c 5

Supplemental Information

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a 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 provide any additional information

Page 5	Schedule D (Form 990) 2015
tinued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software ID: 16000303 **Software Version:** 2016v3.0

EIN: 75-2309138

Name: EAST TEXAS COMMUNITIES FOUNDATION

included on form 990

Supplemental Information					
Return Reference	Explanation				
Part XI, Line 2d Other revenue	Mineral Interest \$24728 Interest \$90				

Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d Other expenses and losses per audited F/S	\$0 INVESTMENT MANAGEMENT FEES \$3578 AD VALOREM TAXES \$115

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319003467 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer Identification number** EAST TEXAS COMMUNITIES FOUNDATION 75-2309138 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eliqibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III 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 recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance See Additional Data Table (1)(2)(3)(4)

(6)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 147

Explanation Return Reference

East Texas Communities Foundation retains records for the amounts awarded Eligibility is determined using Guidestar or IRS publication 78 East Texas Communities Grantmaker's Description of How Grants are Used Foundation keeps all grant applications and charitable grant recommendation forms on file Selection criteria (for competitive grants) uses an evaluator score and

comments which are kept on file

Schedule I (Form 990) 2016

Additional Data

All Saints Episcopal School

Alliance Defending Freedom

2695 SSW Loop 323

15100 N 90th Street

Scottsdale, AZ 85260

Tyler, TX 75701

75-1520564

54-1660459

Software ID: 16000303 **Software Version:** 2016v3.0

EIN: 75-2309138

Name: EAST TEXAS COMMUNITIES FOUNDATION

General support

SCHOLARSHIPS

General support

DEVELOPMENT

PROGRAM

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.	

501(C)(3)

501(C)(3)

(a) Nume and address of	(0)	(C) INC SCCION	(a) / linearit or cash	(C) minounce of hon	(1) Hechioa of Valuation	
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	n
or government				assistance	other)	
						l

(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuati
ıf applıcable	grant	cash	(book, FMV, appraisa
	_	assistance	other)

41,633

12,000

(a) Name and address of (b) FIN ation I (g) Description of non-cash assistance or assistance

(h) Purpose of grant

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Alzheimers Alliance of Smith 75-2486061 501(C)(3) 11.388 General support 211 Winchester Dr

Tyler, TX 75701

AMERICAN HEART 13-5613797 501(C)(3) 5,500 0 general operating, disaster relief

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

DALLAS, TX 75231

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

DEVELOPMENT

Azleway Inc 15892 CR 26 Tyler, TX 75707	75-1903742	501(C)(3)	6,119	0		General support ANNUAL CAMPAIG

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

Dallas, TX 75246

UAL CAMPAIGNS Baylor Healthcare System 75-1606705 501(C)(3) 14,550 ANNUAL CAMPAIGN 3600 Gaston Ave Ste 100 PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Believe and See Africa 46-0643564 501(C)(3) 8.000 IGENERAL SUPPORT PO Box 8286

GENERAL SUPPORT

12,500

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

501(C)(3)

Tyler, TX 75711

Bethel Bible Church of Tyler

17121 Highway 69 South Tyler, TX 75703

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Bethesda Health Clinic 26-0036674 501(C)(3) 55.318 general support annual

409 W Ferguson campaign Tyler, TX 75702 Bishop Gorman Regional 26-0036674 501(C)(3) 500,000

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

Tyler, TX 75702

CAPITAL CAMPAIGN Cathol 409 W Ferguson

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

PROGRAM

DEVELOPMENT

Board of Regents of UT Austin 210 W Sixth St Austin, TX 78701	74-6000203	501(C)(3)	29,198	0		General support
Boy Scouts of America	75-0808767	501(C)(3)	20,954	0		general support

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

1331 E Fifth St

Tyler, TX 75701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Bovs & Girls Club of Rusk Co 75-2730664 501(C)(3) 6.000 general support

GENERAL SUPPORT

25,024

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

501(C)(3)

75-2514503

710 Robertson Blvd Henderson, TX 75652 Brook Hill School Inc

1051 N Houston St Bullard, TX 75757

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Buckner Children & Family Svc 75-2571395 501(C)(3) 15.403 ANNUAL CAMPAIGN

110 E Cotton St Longview, TX 75601

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

Bullard, TX 75757

Bullard Community Library 75-1522478 501(C)(3) 7,500 GENERAL SUPPORT PO Box 368

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1907257 501(C)(3) 10.000 EOUIPMENT

GENERAL SUPPORT

Cain Center Inc. 915 S Palestine Athens, TX 75751

Cambodia Christian Ministries 46-1169428 501(C)(3) 7,500

10550 Marsh I n Dallas, TX 75229

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance eral support

GENERAL SUPPORT

Campus Crusade for Christ 100 Lake Hart Dr Ste 2400	95-6006173	501(C)(3)	59,000	0		Gener

108,808

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

501(C)(3)

Orlando, FL 32832

75-2957440

Cancer Foundation for Life

PO Box 8257 Tyler, TX 75711

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance JAL CAMPAIGN

Catholic Campus Ministries 2603 Old Omen Rd	27-3504744	501(C)(3)	7,000	0		ANNUA
Tyler, TX 75701						

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

Tyler, TX 75703

Children are a Gift Foundatio 04-3665297 501(C)(3) 11,600 General support 5380 Old Bullard Rd Ste 600

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Childrens Advocacy Center of 75-2748697 501(c)(3) 21.783 IGENERAL SUPPORT 2210 Frankston Highway

General support

ANNUAL CAMPAIGN

12,568

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

501(C)(3)

Tyler, TX 75701

Tyler, TX 75711

PO Box 6564

Childrens Village and Family

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance general PROGRAM CAPITAL SUPPORT

ANNUAL CAMPAIGN

Christ Episcopal Church 118 S Bois DArc Tyler, TX 75702	75-0926758	501(C)(3)	58,956	0	
Christian Womens Job Corps	75-2949812	501(C)(3)	6,338	0	

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

408 W Locust Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Citizens for Research in Epil 36-4253176 501(C)(3) 10.000 GENERI A SUPPORT 430 W Erie St Suite 210

CAPITAL CAMPAIGN

26,000

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

CITY OF LONGVIEW

75-6000588

CITY OF LONGVIEW

PO BOX 1952 LONGVIEW, TX 75606

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

BUILDING RENOVATION

LEOUIPMENT

CITY OF MINEOLA	75-6000612	CITY OF MINEOLA	10,000	0		GENERAL SUPPORT
PO BOX 179						PROGRAM
MINEOLA, TX 75773						DEVELOPMENT

68.594

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

City of Tyler

75-6000697

City of Tyler

212 N Bonner Ave

Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

City of Tyler Parks 75-6000697 City of Tyler 5.881 IBUILDING RENOVATION 2000 W Front St

Tyler, TX 75702 Congregation Beth El 75-1152677 501(C)(3) 19,171 General support

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

1010 charleston Dr Tyler, TX 75703

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Cystic Fibrosis Foundation 13-1930701 501(C)(3) 6.200 general support ANNUAL

IGENERAL SUPPORT

ANNUAL CAMPAIGN

1021 ESE LOOP 323 SUITE
300C
Tyler, TX 75701

84.125

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

501(C)(3)

Tyler, TX 75701

Discovery Science Place 308 N Broadway Ave

Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1641173 501(C)(3) 48.010 General support

43.034

IANNUAL CAMPAIGN

genreal support

DEVELOPMENT

PROGRAM

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

501(C)(3)

East Texas Crisis Center
PO Box 7060
Tyler, TX 75711
East Texas Food Bank

3201 Robertson Rd

Tyler, TX 75701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-6013387 501(C)(3) 84,241 East Texas Symphony General support MENT

Orchestra						EQUIPMENT
PO Box 6323						_
Tyler, TX 75711						
East TX Cornerstone Assistanc	90-0891521	501(C)(3)	5,600	0		GENERAL SUPPORT

Fast TX Cornerstone Assistance 200 N Beckham Ave

Tyler, TX 75702

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance East TX Medical Foundation 75-2695524 501(C)(3) 6.806 IGENERAL SUPPORT

GENERAL SUPPORT

11,727

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

501(C)(3)

PO Box 6400
Tyler, TX 75711

PO Box 765 Edgewood, TX 75117

Edgewood Historical Society

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Educational Radio Foundation 75-1746274 501(C)(3) 9.623 General support PO Box 8525

GENERAL SUPPORT

40,000

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

501(C)(3)

Tyler, TX 75711

PO Box 1384 Chandler, TX 75758

Faith Baptist Church-Chandler

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 83-0403013 501(C)(3) 5.123 Faith In Action Outreach IGENERAL SUPPORT PO Box 862

PO Box 862
Malakoff, TX 75148

Family Matters Inc 15475 N Greenway Hayden Loop

Before Solic (C)(3) 15,000 0 General Support

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

Scottsdale, AZ 85260

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance First Baptist Church of Athen 75-0917405 501(C)(3) 36,000 general support 105 S Carroll St PROGRAM Athens, TX 75751 DEVELOPMENT

general support

21,200

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

501(C)(3)

First Baptist Church of Longy

209 E South St Longview, TX 75601

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance First Christian Church of Hen 75-1928926 501(C)(3) 6.000 IGENERAL SUPPORT PO Box 2237

GENERAL SUPPORT

20,000

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

501(C)(3)

Henderson, TX 75653

First Presbyterian Church of

230 W Rusk St Tyler, TX 75701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 74-3193209 501(C)(3) 5.069 General Support

Building Renovation

150,000

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

501(C)(3)

For the Silent PO Box 998 Tyler, TX 75710

Fransalian Missionaries Inc.

Whitehouse, TX 75791

PO Box 440

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Friends of Naples Public Libr PO Box 705 Naples, TX 75568	75-2804769	501(C)(3)	5,136	0		Equipment, Gen Support
Goodwill Industries-Dallas	75-1245705	501(C)(3)	10,000	0		Annual Campaign

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

3020 N Westmoreland Dallas, TX 75212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1245705 501(C)(3) 50.100 IGENERAL SUPPORT

Grace Community Church 1828 ESE Loop 323 Ste 300

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

3001 Universiv Boulevard Tyler, TX 75701

CAPITAL CAMPAIGN Tyler, TX 75701 Grace Community School 75-1245705 501(C)(3) 22,596 Scholarship Funds

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

PROGRAM

DEVELOPMENT

Great Foundations Inc PO Box 133228 Tyler, TX 75713	45-2096099	501(C)(3)	5,145	0		Annual Campaign
Green Acres Baptist Church	75-1092783	501(C)(3)	54,500	0		General support

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

1607 Troup Highway

Tyler, TX 75701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Habitat for Humanity of Smith 75-2285678 501(C)(3) 16.801 General support 822 W Front Street PROGRAM

8,000

DEVELOPMENT

General support

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

501(C)(3)

Tyler, TX 75702

Henderson Co Community 75-2899718
Partne 420 Athens Brick Rd

Athens, TX 75751

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-2362799 501(C)(3) 8.151 Henderson Co HELP Center IGENERAL SUPPORT 309 Rovall Dr

General support

7,000

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

501(C)(3)

Athens, TX 75751

PO Box 6062 Athens, TX 75751

Henderson County Food Pantry

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance General Support

General Support

9,187

Highland Park UMC 75-0808794 501(C)(3) 20,000 0 Ge 3300 Mockingbird Lane Dallas, TX 75205

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

501(C)(3)

Hiway 80 Rescue Mission

601 E Valentine Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-2378914 501(C)(3) 11.072 HOPE-Helping Others Pursue IGENERAL SUPPORT

MEMORIALS PROGRAMS

595 South Ragsdale Jacksonville, TX 75766

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

4111 University Blvd

Tyler, TX 75701

Hospice of East Tex Foundatio 20-5194874 501(C)(3) 19.494 General support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Mistletoe and Magic,

Ideneral suppor

Hospice of East Texas 4111 University Blvd	75-1851420	501(C)(3)	13,379	0		BUILDING RENOVATION
	73-1631420	301(0)(3)	13,3/9	Ŭ		BOILDING KENOV

7,146

Tyler, IX /5/01

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

501(C)(3)

Junior Leage of Tyler Inc

1919 S Donnybrook

Tyler, TX 75701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance eral Support

Annual Campaign

Keep Athens Beautiful 201 W Corsicana St Ste 4 Athens, TX 75751	75-2234375	501(C)(3)	5,148	0		Genei
Kidney Texas Inc	75-2847008	501(C)(3)	6,860	0		Annua

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

6138 Berkshire Lane Suite 10

Dallas, TX 75225

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ISCHOLARSHIP FUNDS

75-1081109 501(C)(3) 15.250 LeTourneau University PO Box 7333 Longview, TX 75607

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

Athens, TX 75751

CAPITAL CAMPAIGN Lila Lane Outreach 27-0241722 501(C)(3) 5,088 Purchase of passenger 101 Lila Lane van

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Lindale Library 75-2541500 501(C)(3) 6.020 General Support PO Box 1570 LIndale, TX 75771

General Support

5,600

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

501(C)(3)

75-2541500

Lindale UMC

402 W Hubbard Lindale, TX 75771

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-2359704 501(C)(3) 11.395 Literacy Council of Tyler General support PO Box 6662 PROGRAM

PO Box 6662
Tyler, TX 75711

Longview Arboretum & Nature C

C

PROGRAM
DEVELOPMENT

5,316
0
General Support

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

PO Box 9906 Longview, TX 75608

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

IMEMORIALS

EQUIPMENT

Lufkın Hıgh School Alumnı PO Box 150837 Lufkın, TX 75915	75-2066143	501(C)(3)	8,342	0		General support
Marvin United Methodist Churc	75-2578237	501(C)(3)	125,419	0		GENERAL SUPPORT

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

300 W Frwin

Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Meals on Wheels 23-7313019 501(C)(3) 42.083 IGENERAL SUPPORT MEMORIALS

 PO Box 5475
 MEMORIALS

 Tyler, TX 75712
 Methodist Health System
 75-1548343
 501(C)(3)
 10,000
 0
 General Support

 Found
 Found
 Total Control of the control

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

1441 N Beckley Ave Dallas, TX 75203

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General support

Munger Place Church	75-2719461	501(C)(3)	10,000	0		Program Development
5200 Bryan St						
Dallas, TX 75206						

5,005

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

501(C)(3)

National Jewish Medical Resea

1400 Jackson St Denver, CO 80206

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Support

BUILDING RENOVATI

Newgate UM Mission Longview	75-2663844	501(C)(3)	8,918	0		General St
207 S Mobberly			·			
Longview, TX 75602						

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

PO Box 1307

Mount Pleasant, TX 75456

Northeast Texas Comm College 75-2008835 501(C)(3) 386,000 SCHOLARSHIP FUNDS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance GRAM

Northeast Texas Public Health 315 N Broadway Ave Ste 404	75-1470587	501(C)(3)	12,700	0		PROGR DEVEL
Tyler, TX 75702						DEVEL

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

PO Box 131166

Tyler, TX 75713

ELOPMENT Parental Care Ministries 26-2628617 501(C)(3) 11,920 Medicine, solar panels,

mission wor

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Pat Green Foundation 46-0820367 501(C)(3) 11.250 General Support

general support

MEMORIAL BUILDING

Pat Green Foundation 46-0820367 501(C)(3) 11,250 0 General Gen

116,482

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

501(C)(3)

75-2033113

PATH

402 W Front St

Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Pi Beta Phi Philanthropies 75-1254353 501(C)(3) 9.000 Annual Campaign

scholarship FUNDS

GENERAL SUPPORT

16,500

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

501(C)(3)

3949 Centenary Ave Dallas, TX 75225 Pine Cove Inc

PO Box 9055

Tyler, TX 75711

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Pittsburg-Camp County Library 75-1379945 501(C)(3) 6.000 General Support

GENERAL SUPPORT

10,000

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

501(C)(3)

75-6185133

613 Quitman St Pittsburg, TX 75686 Pleasant Hill Missionary Bapt

502 N Horace Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Prep Home 46-4546367 501(C)(3) 37.043 IGENERAL SUPPORT 1910 ESE Loop 323 202 Tyler, TX 75701

General Support

16,204

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

501(C)(3)

35-2519571

Promise Academy

PO Box 7353 Tyler, TX 75711

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance e bloomers program

Public Library Fund Inc 121 S Prairieville St Athens, TX 75751	23-7158045	501(C)(3)	6,500	0		Late bloomers prog
Rodeo for a Reason	45-4393501	501(C)(3)	15,000	0		General Support

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

624 West University Dr Denton, TX 76201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Roman Catholic Diocese of Tvl 53-0196617 501(C)(3) 7.500 ANNUAL CAMPAIGNS 1015 ESE Loop 323

GENERAL SUPPORT

20,098

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

501(C)(3)

75-2631330

Tyler, TX 75703

Mount Pleasant, TX 75456

PO Box 2337

SAFE-T

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Salvation Army 13-2923701 501(C)(3) 92.867 General support 633 N Broadway

Emeraency Funds

12,300

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

501(C)(3)

58-0660607

Tyler, TX 75702

Salvation Army-DFW

PO Box 36006 Dallas, TX 75235

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ral support

100 E Ferguson Ste 608 Tyler, TX 75702 ANN
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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Boone, NC 28607

JAL CAMPAIGNS Samaritans Purse 58-1437002 501(C)(3) 75,500 General Support PO Box 3000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ort

Equipment

Scottish Rite Hospital 2222 Welborn st	75-0818178	501(C)(3)	10,000	0		General support
Dallas, TX 75219						

8,865

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

501(C)(3)

75-1494062

SFASU

PO Box 13052 SFA Station Nacogdoches, TX 75962

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance eral support

Shriners Hospital for Childr 6977 Main St Houston, TX 77030	36-2193608	501(C)(3)	10,000	0		General support
Shriners Hospitals for Childr	36-2193608	501(C)(3)	10,000	0		General support

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

815 Market St Galveston, TX 77550

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Smith County Champions for 75-2669405 501(C)(3) 11.325 General Support

Tyler, TX 75703 Smith County TX	75-6001155	Smith County TX	52,423	0		Equipment
Ch 4883 Hightech Dr		(-)(-)	,	_		

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

100 N Broadway Ave Tyler, TX 75702

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

General Support

						1
Southern Methodist Universtiy	75-0800689	501(C)(3)	255,000	0		GENERAL SUPPORT
PO Box 750181						CAPITAL PROGRAM DEV
Dallas, TX 75275						1

17,000

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

501(C)(3)

St Judes Children Research H

501 St Jude Place Memphis, TN 38105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 74-1616577 501(C)(3) 450.000 Capital Campaign St Marvs Catholic Center

GENERAL SUPPORT

9,000

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

501(C)(3)

603 Church Ave

2500 McCann Rd Longview, TX 75605

College Station, TX 77840
St Andrew Presbyterian Churc

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

GENERAL SUPPORT

St Paul Childrens Foundatio	75-2687636	501(C)(3)	29,368	0		general support
1358 E Richards						
Tyler, TX 75702						

305,647

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

501(C)(3)

St Paul Lutheran Church

4715 Frederick Ave St Joseph, MO 64506

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ral Support

Endowment

Student Mobilization PO Box 567 Conway, AR 72033	71-0629392	501(C)(3)	7,200	0		General Support
Texas Annual Conference of th	74-1491628	501(C)(3)	10,000	0		Emerging Leaders

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

5215 Main St Houston, TX 77002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Texas College 75-0917417 501(C)(3) 25,500 Scholarships 2404 N Grand Ave

General Support

20,000

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

501(C)(3)

Tyler, TX 75702

PO Box 200038 Arlington, TX 76006

Texas Health Research Foundat

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ral Support

PROGRAM

DEVELOPMENT

Texas Tech Alumnı PO box 45001	75-6036607	501(C)(3)	6,250	0		Genera
Lubbock, TX 79409						

Texas Weslevan University 75-0800691 501(C)(3) 267,590 1201 Weslevan Street

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

Fort Worth, TX 76105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance The ARC of Smith County 75-1156215 501(C)(3) 14.914 General Support

General Support

6,000

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

501(C)(3)

5520 Old Bullard Rd Tyler, TX 75703 The Cooper Institute

12330 Preston Rd Dallas, TX 75230

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance IERAL SUPPORT

PROGRAM

DEVELOPMENT

The Gathering 6125 Paluxy Tyler, TX 75703	75-2726170	501(C)(3)	25,000	0		GENERAL SUPPORT
The Mentoring Alliance	75-2541408	501(C)(3)	131,391	0		GENERAL SUPPORT

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

PO Box 130153

Tyler, TX 75713

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance al support

Endowment Funds

The Navigators	84-6007896	501(C)(3)	8,500	0		General
PO Box 6000						
Colorado Spring, CO 80934						
4						

75,000

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

501(C)(3)

The Prince of Wales Foundatio

888 17th St NW Suite 201 Washington, DC 20006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

DEVELOPMENT

COMPUTERS

TISD Foundation 1319 Earl Campbell Parkway Tyler, TX 75701	75-2366991	501(C)(3)	29,266	0		general support SCHOLARSHIP FUNDS
1710171717701						

Titus County Cares 35-2309053 501(C)(3) 30,100 ISTAFF PROGRAM

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

PO Box 1476

Mount Pleasant, TX 75455

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

BUILDING RENOVATION

TJC Foundation PO Box 9020	75-6046816	501(C)(3)	36,021	0		GENERAL SUPPORT SCHOLARSHIPS MEMOR
Tyler, TX 75711						

240,150

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

501(C)(3)

Tributary Retreat and Trainin

PO Box 131373 Tyler, TX 75713

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Trinity School of Texas 75-6004795 501(c)(3) 28.684 General Support 215 Teague St

Equipment

5,500

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

501(C)(3)

Longview, TX 75601
Twelve Way Foundation

PO Box 607 Marshall, TX 75671

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

DEVELOPMENT

Tyler Day Nursery 75-0827467 501(C)(3) 11.439 2901 West Gentry Pkwy Tyler, TX 75702

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

Tyler, TX 75701

IGENERAL SUPPORT MEMORIALS STAFF DEV Tyler Museum of Art 75-6066618 501(C)(3) 41.251 General support 1300 S Mahon Ave PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Tyler Public Library 75-6000697 501(C)(3) 8.659 Program Development

General Support

13,446

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

501(C)(3)

75-2573215

201 S College
Tyler, TX 75713

Tyler Rotary Foundation

PO Box 131444 Tyler, TX 75713

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Tyler Sunrise Rotary Fdn 75-2620662 501(C)(3) 27.500 Capital Campaign

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

PO Box 775

Henderson, TX 75653

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

IGENERAL SUPPORT STAFF PROGRAM DEVEL

						1
United Way of Tyler	75-0957331	501(C)(3)	40,107	0		GENERAL SUPPOR
4000 Southpark Dr Ste 1200						CAPITAL CAMPAIG
Tyler TV 75703			l			1

52,512

Tyler, IA /5/03

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

501(C)(3)

UT Health Northeast

11937 US Hwv 271 Tyler, TX 75708

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1396988 IGENERAL SUPPORT

UT Tyler Cowan Center 501(C)(3) 55.000 3900 University Blvd PRODUCTION COSTS Tyler, TX 75799

UT Tyler Foundation 75-1393366 501(C)(3) 98,480 Program Dev. Scholarship Funds 2001 ESE Loop 323

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

Tyler, TX 75701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1396988 501(C)(3) 110.262 General support SCHOLARSHIPS

UT Tyler Office of Advancemen 3900 University Blvd Tyler, TX 75799

Womenary 26-2923812 501(C)(3) 9,000

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

Tyler, TX 75711

ENDOWM General support PO Box 6296

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Womens Fund of Smith County | 75-2666792 501(C)(3) 25.002 General Support 4908 Hightech Drive

GENERAL SUPPORT

28,000

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

501(C)(3)

95-3494561

Tyler, TX 75703

Wycliffe bible Translators

PO box 628200 Orlando, FL 32862

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Young Audiences of NE Tex 75-2747921 501(C)(3) 5.098 General SUPPORT 200 E Amherst Tyler, TX 75701

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

Tyler, TX 75711

PROGRAM DEVELOPMENT GENERAL SUPPORT

Young Life 84-0385934 501(C)(3) 12,000 PO Box 7763 SCHOLARSHIP FUNDS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-2047807 501(C)(3) 8.000 Youth & Family Enrichment GENERAL SUPPORT Cen PO Box 7218

Tyler, TX 75711

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319003467 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶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 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** EAST TEXAS COMMUNITIES FOUNDATION 75-2309138 Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining items contributed applicable amounts reported on noncash contribution amounts Form 990, Part VIII, line Art—Works of art . . 2 Art—Historical treasures 3 Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . 8 Intellectual property Securities—Publicly traded . Χ 1,674,096 Avg Hi/Lo 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution-Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles . . Food inventory . . . 19 20 Drugs and medical supplies . 21 Taxidermy . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . Other ▶ (______ **26** Other ▶ (___ Other ► (_____ 27 28 Other ▶ (___ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Nο b If "Yes," describe the arrangement in Part II 31 Nο Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2016) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2016)	Page 2
Part II Supplemental Info	
	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part imber of contributions, the number of items received, or a combination of both. Also complete itional information.
Return Reference	Explanation
	Schedule M (Form 990) (2016)

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLI	N: 93493319003467
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to specific ques Form 990 or 990-EZ or to provide any additional informati Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instr	tions on on.	OMB No 1545-0047 2016 Open to Public Inspection
	anization NUNITIES FOUNDATION E O, Supplemental Information	75-2309138	ntification number
Return Reference	Explanation		
Form 990, Part VI, Line 11b Form 990 Review Process	A draft copy of the Form 990 is reviewed by the Board. The Board discusses any question rissues at a regularly scheduled board meeting or via conference call	ons o	

Return
Reference

Explanation

Form 900
The directors must disclose any conflict of interest on an annual basis

990 Schedule O, Supplemental Information

Form 990,	I he directors must disclose any conflict of interest on an annual basis
Part VI, Line	
12c	
Explanation	
of Monitoring	
and	
Enforcement	
of Conflicts	

Return Reference Explanation

C---- 000

Management

ı	Form 990,	The Board conducts an annual review of compensation paid and comparable salaries
	Part VI, Line	
	15a	
	Compensation	
	Review &	
	Approval	
	Process -	
	CEO, Top	

990 Schedule O, Supplemental Information

D -4....

Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly	Financial statements are made available on the Foundation's website. The Foundation's gove rning documents, conflict of interest policy, and financial statements are made available at the Foundation's office by request

Funlanation

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319003467 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** EAST TEXAS COMMUNITIES FOUNDATION 75-2309138 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling **(b)** Primary activity (c) Legal domicile (state (d) (e) End-of-year assets (a)
Name, address, and EIN (if applicable) of disregarded entity Total income or foreign country) entity

Part II Identification of Related Tax-Exempt Organizarelated tax-exempt organizations during the tax y		te ıf the or	ganization ans	wered	l "Yes" on For	m 990), Part IV	, line 34 b	ecause it	had one or	more	
(a) Name, address, and EIN of related organization		(b) y activity	(c) Legal domicile (or foreign cour		(d) Exempt Code se	ection	Public cha (if section	e) rity status 501(c)(3))	Direc	(f) at controlling entity		512(b) ntrolled ity?
(1)ETCF Support Foundation 315 N Broadway Ave Ste 210	Holds asset inherent lia		TX		501(c)(3)		11A, TYPE 1	L	East Texas Foundation	Communities	Yes	No
Tyler, TX 75702 27-0679342												
For Paperwork Reduction Act Notice, see the Instructions for F	orm 990.		Cat N	o 5013	35Y		1		Sched	dule R (Form	990) 20	16

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(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-	Share of total income		(H Disprop alloca	rtionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	i) ral or aging ner?	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
											\vdash		
		1	1		1		1		1				
Identification of Related Organizat because it had one or more related org						zation ansv	vered "Yes	" on Fo	orm 99	90, Part IV	, line	34	
		a corporation	(c) egal micile or foreign	st during th	(d) controlling entity Typ	(e)	vered "Yes (f) Share of total income	Share	(g) of end- year assets	(1	1) ntage	Se (1	(I) ection 512 3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	on or trus (c) egal micile	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	control
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?
because it had one or more related org (a) Name, address, and EIN of	ganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling Typentity (C co	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	1) ntage	Se (1	3) control entity?

Schedule R (Form 990) 2016					Pa	ge 3
Part V Transactions With Related Organizations Complete if the organization answered "Ye	es" on Form 990, Par	t IV, line 34, 35b	, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more relate	d organizations listed in	n Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)				1b		No
f c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d	Yes	
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1 i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1р		No
q Reimbursement paid by related organization(s) for expenses				1q		No
r Other transfer of cash or property to related organization(s)				1r		No
f s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this	line, including covered r	relationships and tra	nsaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	ımount ın	ıvolved	
(1)ETCF Support Foundation	d	940				
		1	 			

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

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

1																					
(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		section		section		section		section total		total end-of-year	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership	
			514)	Yes	No	!		Yes	No		Yes	No									
										Schedul	le R (Form	1 99	0) 2016								

