DLN: 93493339001117 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public Department of the Treasur ▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u> Internal Revenue Service Inspection For the 2016 calendar year, or tax year beginning 04-01-2016 , and ending 03-31-2017 C Name of organization WACO FOUNDATION D Employer identification number B Check if applicable ☐ Address change 74-6054628 ☐ Name change Doing business as ☐ Initial return Final Deturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1227 N VALLEY MILLS DR STE 235 ☐ Amended return (254) 754-3404 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code WACO, TX $\,$ 76710 $\,$ G Gross receipts \$ 25,369,609 Name and address of principal officer H(a) Is this a group return for ASHLEY ALLISON DULSKI ☐Yes **☑**No subordinates? 1227 N VALLEY MILLS DR STE 235 H(b) Are all subordinates WACO, TX 76710 ☐ Yes ☐No ıncluded? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) Website: ► WWW WACOFOUNDATION ORG **H(c)** Group exemption number ▶ L Year of formation 1958 M State of legal domicile K Form of organization ☐ Corporation ☑ Trust ☐ Association ☐ Other ▶ Part I Summary 1 Briefly describe the organization's mission or most significant activities AS THE COMMUNITY FOUNDATION SERVING MCLENNAN COUNTY, TEXAS, WACO FOUNDATION IS AN INDEPENDENT PUBLIC CHARITY THAT STEWARDS PHILANTHROPIC RESOURCES FROM INSTITUTIONAL AND INDIVIDUAL DONORS AND DIRECTS THEIR USE FOR THE BENEFIT OF COMMUNITY-BASED CHARITIES THE GOAL OF WACO FOUNDATION IS TO ENABLE AND ENCOURAGE PEOPLE TO CREATE CHARITABLE FUNDS THAT COLLECTIVELY SERVE THE ENTIRE COMMUNITY AND ENHANCE PUBLIC GOOD AND OVERALL QUALITY OF LIFE, Activities & Governance AND A VOLUNTARY, ROTATING BOARD OF TRUSTEES COMPRISED OF PEOPLE FROM THE COMMUNITY USES ITS VARIANCE POWER TO ENSURE THAT THE INTERESTS OF THE ENTIRE COMMUNITY ARE THE FOCUS OF THE WORK Check this box $\blacktriangleright \Box$ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) $\,$. 3 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 10 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 24 Total number of volunteers (estimate if necessary) . . . 6 10 7a 3,635 Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 2,635 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 2,817,380 5.535.508 Ravenue 4,356 9 Program service revenue (Part VIII, line 2g) . 662 2,565,130 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 4,111,643 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 410 813 5,387,276 9,648,626 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 3,308,950 3,292,164 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 856,087 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 817,636 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶88,622 792,656 780,966 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 4,929,217 4,919,242 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 468,034 4,719,409 Assets or d Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 70.946.578 80,143,111 588,498 590,268 21 Total liabilities (Part X, line 26) 70,358,080 Net assets or fund balances Subtract line 21 from line 20 . 79,552,843 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2017-12-04 Signature of officer Sign Here ASHLEY DULSKI EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check 🔲 ıf Paid self-employed Firm's name • Firm's EIN ▶ Preparer Firm's address Phone no Use Only ☐ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2016) Cat No 11282Y

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Par	t IIII Statement	of Program Sei	vice Accomplis	hments		
	Check If Sche	dule O contains a re	esponse or note to a	any line in this Part III		🗆
1	Briefly describe the o	organization's missi	on			
					LENGES, STRENGTHEN LOCAL NO	ONPROFITS, ENGAGE
PHIL	ANTHROPISTS AND MA	NAGE CHARITABLE	ASSETS IN ORDER	. TO IMPROVE QUALITY C	OF LIFE IN MCLENNAN COUNTY	
2	Did the organization	undertake any sign	ıfıcant program serv	rices during the year whi	ch were not listed on	
	the prior Form 990 o	r 990-EZ?				☐ Yes ☑ No
	If "Yes," describe the	se new services on	Schedule O			
3	Did the organization					
	services?	🗌 Yes 🗹 No				
	If "Yes," describe the	ese changes on Sch	edule O			
4		d 501(c)(4) organiz	ations are required	to report the amount of	rgest program services, as meas grants and allocations to others,	
4a	(Code) (Expenses \$	377,476	ıncludıng grants of \$	299,297) (Revenue \$	0)
	See Additional Data					
4b	(Code) (Expenses \$	712,998	ıncludıng grants of \$	505,607) (Revenue \$	0)
	See Additional Data					
4c	(Code) (Expenses \$	258,566	ıncludıng grants of \$	0) (Revenue \$	662)
	See Additional Data					
	See Additional Data	Table				
4d	Other program servi	•	,			
	(Expenses \$	2,750,796	including grants of	\$ 2,487,26	0) (Revenue \$	0)

or X as applicable

Section 501(c)(3) organizations.

Checklist of Required Schedules 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 👺 . . .

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

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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—other securities in Part X, line 12 that is 5% or more of its total

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'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 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,"

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

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,

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,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II

Did the organization receive or hold a conservation easement, including easements to preserve open space.

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

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

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

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

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)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

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

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?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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14a

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Yes

Yes

Yes

Yes

Yes

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No

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Yes

29

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Part IV	Checklist of Required Schedules (continued)

	encontrol of Required Contained (Continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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

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 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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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 .

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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?

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 . . .

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

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,

Yes 21 22 Yes 23

24a

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24c

24d

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25b

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28a

28b

28c

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35a

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Yes

Yes

Yes

Yes

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Νo

No

Nο

Νo

Nο

column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 17			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 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	
U	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	Yes	
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	Yes	
	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)			
5a	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
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
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
b	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?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	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		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			NI-
0-	Did the energy organization make any tayable distributions under section 40662	9a		No
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		No No
	Section 501(c)(7) organizations. Enter	90		INO
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
U	against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
L3	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		
L	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			
U				I
	Enter the amount of reserves on hand			
c	Enter the amount of reserves on hand	14a		No

orm '	990 (2016)			Page 6
Part	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to l	
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Sec	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 10		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	•		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	1
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	1
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website 🗹 Another's website 🗹 Upon request 🗹 Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶LESLIE MITCHELL CPA 1227 N VALLEY MILLS DR STE 235 WACO, TX 76710 (254) 754-3404			

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization no (A) Name and Title	(B) Average hours per week (list any hours	Position than o	on (do one bo	(C o no ox, u n of) t chi unle: ficer	eck mess pers	ore son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) SAM ALLISON TRUSTEE	2 5	х						0	0	0
(2) SHERMAN AYRES TRUSTEE	2 5	х						0	0	0
(3) BETTY BAUER TRUSTEE	0 1	×						0	0	0
(4) STEVE CATES TRUSTEE	2 5	×						0	0	0
(5) KYLE DEAVER TRUSTEE	2 5	х						0	0	0
(6) MALCOLM DUNCAN JR TRUSTEE	2 5	х						0	0	0
(7) JIM HALLER TRUSTEE	0 1	х						0	0	0
(8) LISA JAYNES TRUSTEE	2 5	х						0	0	0
(9) KRIS KAISER OLSON SECRETARY/TREASURER	2 5	х		x				0	0	0
(10) CARA CHASE VICE CHAIR	2 5 0 1			х				0	0	0
(11) DAVID DICKSON CHAIRMAN	4 5 0 1	х		х				0	0	0
(12) ASHLEY DULSKI EXECUTIVE DIRECTOR	39 9			х	×	x		162,477	0	21,684
(13) LESLIE MITCHELL DIRECTOR OF FINANCE	29 75 0 25			х				66,008	0	12,070

Part VII

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

(C) Compensation

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	(A) Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, t in of	t cho unles ficer	eck moss pers and a ee)	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (V	w-	(F) Estima amount o compens from t	ited f other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC) 6	organizati relati organiza	ed
											\perp		
c	Sub-Total	art VII, Sectio	nΑ.	· ·	•		>		228,485		0		33,754
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rec	eived more than \$1	00,000			
												Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .			ee, k		mpl	oyee, o	or hi	ghest compensated	employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual									the	4	Yes	
5	Did any person listed on line 1a recei services rendered to the organization								-		5		No
	ection B. Independent Contract												
1	Complete this table for your five high from the organization Report compe										npens	ation	

(A) Name and business address

compensation from the organization ▶

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

(B) Description of services

Part		II Statement of	Revenue								rage 3
				a respo	onse or note to any	line in tl	hıs Part VIII	٠			🗆
				·		(A) revenue	Rel e: fu	(B) ated or kempt nction	(C) Unrelated business	(D) Revenue excluded from tax under sections
	1:	a Federated campaig	ns	1a				re	venue		512-514
ats uts	1	b Membership dues		1b	<u> </u>						
rar		c Fundraising events			<u> </u>						
Am A		-		1c							
iffs		d Related organizatio		1d	148,500						
3,E		e Government grants (co	·	1e	0						
ig is		f All other contributions, and similar amounts n		1f	5,387,008						
Contributions, Giffs, Grants and Other Similar Amounts		above 9 Noncash contribution in lines 1a-1f \$			92,143						
Cont and	١,	n Total. Add lines 1a-1	.f		•	5	,535,508				
	┌				Business		,555,500				<u> </u>
Service Revenue	2 a	NONPROFIT STAFF AND	BOARD TRAINI	NG		900099		662	ı	562	0 0
ž Š	 										
2	֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓										
۴				_							
S L	e	•		_							
Program	f	All other program se	rvice revenue					0		0	0 0
ď	g	Total.Add lines 2a-2f	f		>	662					
	3	Investment income (ii	ncluding divid	ends, i	interest, and other	1					
	!	sımılar amounts) .			•	<u> </u>	697,368		0	3,635	693,733
	l	Income from investme		•	•		С		0	0	0
	5	Royalties			ı	<u> </u>		1	U	0	
	6=	Gross rents	(ı) Real		(II) Personal	-					
	"	Cross rents									
	ŀ	Less rental expenses									
	١,	Rental income or		0	C	1					
	`	(loss)		Ŭ							
	4	Net rental income o	r (loss)			1					
			(ı) Securit	ies	(II) Other						
	7 a	Gross amount from sales of	19,1	35,258		,					
		assets other than inventory									
	١,) Less cost or				-					
	'	other basis and sales expenses	15,7	20,983	C						
	١,	Gain or (loss)	3,4	14,275	C	7					
	١,	d Net gaın or (loss) .			>	1	3,414,275	5	0	0	3,414,275
	8a	Gross income from f	-								
Other Revenue		(not including \$ contributions reporte	od on line 1c)	от							
<u>₹</u>		See Part IV, line 18		а							
Re		Less direct expense		Ь							
ıer		Net income or (loss)			rents •						
Off	98	Gross income from g See Part IV, line 19		es							
		·		а	(
	ŀ	Less direct expense	s	b							
		Net income or (loss)		activit	ies >						
	10	aGross sales of invent returns and allowand	ory, less								
				a	1						
	ŀ	Less cost of goods s	sold	b		1					
	,	Net income or (loss)	from sales of	ınvent	tory ►	•					
		Miscellaneous			Business Code						
	11	La ADMINISTRATION F	EES		900099		813	3	813	0	0
						L		<u>L</u>			
	ŀ	D									
	١,	=									
		All other revenue .					C		0	0	0
	•	Total. Add lines 11a	-11d				813				
	12	2 Total revenue. See	Instructions								
						[9,648,626	<u> </u>	1,475	3,635	4,108,008 Form 990 (2016)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all co	_	·	• •	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> L</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,745,057	2,745,057		
2 Grants and other assistance to domestic individuals See Part IV, line 22	547,107	547,107		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	264,475	37,236	208,621	18,618
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	473,142	325,798	93,868	53,476
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	28,977	23,329	3,202	2,446
9 Other employee benefits	38,887	21,748	14,214	2,925
10 Payroll taxes	50,606	26,812	18,879	4,915
11 Fees for services (non-employees)				
a Management	0	0	0	0
b Legal	10,075	0	10,075	0
c Accounting	16,776	1,124	15,405	247
d Lobbying	0	0	0	0
e Professional fundraising services See Part IV, line 17	0			0
f Investment management fees	311,228	104,272	206,956	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	59,738	54,388	5,350	0
12 Advertising and promotion	21,940	24	21,916	0
13 Office expenses	35,357	17,570	11,792	5,995
14 Information technology	54,956	34,779	20,177	0
15 Royalties	0	0	0	0
16 Occupancy	77,029	30,812	46,217	0
17 Travel	38.877	29.416	9.461	0

0

0

0

48,972

15,027

6,630

47,567

12,665

9,554

14,575

4,929,217

0

0

0

0

2,652

47,567

3,781

2,605

9,133

4,099,836

34,626

18 Payments of travel or entertainment expenses for any

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

Total functional expenses. Add lines 1 through 24e
 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation
 Check here ► ☐ if following SOP 98-2 (ASC 958-720)

federal, state, or local public officials .

22 Depreciation, depletion, and amortization .

19 Conferences, conventions, and meetings

21 Payments to affiliates

20 Interest

expenses on Schedule O)

b RECEPTIONS AND EVENTS

c DUES AND SUBSCRIPTIONS

a WORKSHOP EXPENSE

d OTHER EXPENSES

e All other expenses

23 Insurance . . .

0

0

0

0

0

0

0

0

0

0

88,622

Form 990 (2016)

0

0

0

0

8,884

6,949

5,442

740,759

14,346

15,027

3,978

	Lneck if Schedule O contains a response or note to any line in this Part IX .		•	<u> ⊔</u>
		(A) Beginning of year		(B) End of year
1 Ca	ash-non-interest-bearing	200	1	200
2 Sa	avings and temporary cash investments	1,896,346	2	8,512,376
3 PI	ledges and grants receivable, net		3	
4 A	ccounts receivable, net	0	4	725
tr	oans and other receivables from current and former officers, directors, rustees, key employees, and highest compensated employees Complete Part Lof Schedule L		5	
6 Lo	oans and other receivables from other disqualified persons (as defined under ection 4958(f)(1)), persons described in section 4958(c)(3)(B), and ontributing employers and sponsoring organizations of section 501(c)(9) oluntary employees' beneficiary organizations (see instructions) Complete art II of Schedule L		6	

Page **11**

149.954

59,010

531,258

590,268

40,991,890

17,483,603

21.077.350

79,552,843

80.143.111

Form **990** (2016)

80,143,111

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155.315

50.878

537.620

588,498

50.562.047

19.796.033

70,358,080

70.946.578

70.946.578

	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	(c)(3)(B), and f section 501(c)(9)		6		
ets	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
⋖	9	Prepaid expenses and deferred charges			9		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	190,104			
	b	Less accumulated depreciation	10b	171,515	30,191	10c	18,589
	11	Investments—publicly traded securities .		42,582,176	11	40,488,415	
	12	Investments—other securities See Part IV, line	11 .		26,282,350	12	30,972,852

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34

Liabilities 22

Fund Balances

Assets or

Net

Investments-program-related See Part IV, line 11

Other assets See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

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

Total liabilities. Add lines 17 through 25 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

Intangible assets

Accounts payable and accrued expenses

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

☐ Both consolidated and separate basis

2c

3a

3b

Yes

Nο

Form 990 (2016)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

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

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

c 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?

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

Consolidated basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

Additional Data

Software ID: 16000425

Software Version: v1.00

EIN: 74-6054628

Name: WACO FOUNDATION

Form 990 (2016)

IN THE COMMUNITY)

Form 990, Part III, Line 4a:

WACO FOUNDATION OPERATING FUND THIS FUND IS THE ORGANIZATION'S PRIMARY COMPETITIVE GRANTMAKING FUND, PROVIDING GRANTS TO NONPROFITS THAT SERVE MCLENNAN COUNTY RESIDENTS, ALONG WITH OTHER FUNDS (DISCRETIONARY AND SELECTED FIELD OF INTEREST FUNDS) THAT SUPPORT OUR COMPETITIVE GRANT PROGRAM THE FOUNDATION PROVIDES SUPPORT TO SEVERAL COMMUNITY-WIDE EFFORTS DESIGNED TO END SYSTEMIC POVERTY AND PROMOTE EDUCATION AND HEALTH THE GRANTS MADE FROM OUR DISCRETIONARY PROGRAM BENEFIT OVER 20 INSTITUTIONS AND ORGANIZATIONS, INCLUDING SMALL NONPROFITS WHICH ADDRESS BASIC HUMAN NEEDS TO LARGE INSTITUTIONS WORKING TO INTERVENE WITH SYSTEMIC ISSUES THAT LEAD TO POVERTY IN ADDITION, THE OPERATING FUND GAVE GRANTS TO THE FOUNDATION'S 3 PROGRAM FUNDS - MAC COLLEGE MONEY PROGRAM (SCHOLARSHIP GUARANTEE PROGRAM FOR ALL LOW INCOME GRADUATING SENIORS IN MCLENNAN COUNTY), CAPACITY BUILDING PROGRAM (PROGRAM TO EDUCATE AND TRAIN LOCAL CHARITIES IN BOARD FIDUCIARY RESPONSIBILITY AND SOUND NONPROFIT MANAGEMENT) AND THE SMARTBABIES EARLY CHILDHOOD INITIATIVE (IMPROVING QUALITY OF LIFE FOR CHILDREN AGES 0-3

MAC COLLEGE MONEY PROGRAM THIS FUND WAS ESTABLISHED TO PROVIDE 1ST AND 2ND YEAR SCHOLARSHIPS TO STUDENTS ATTENDING THE 2 MAJOR COLLEGES IN MCLENNAN COUNTY IN ADDITION, 3RD AND 4TH YEAR SCHOLARSHIPS ARE ALSO PROVIDED TO PREVIOUS SCHOLARSHIP RECIPIENTS WHO WANT TO CONTINUE THEIR EDUCATION AT ANY 4-YEAR COLLEGE IN OR OUTSIDE THE MCLENNAN COUNTY AREA DURING THE 2016 TAX YEAR, 544 MCLENNAN COUNTY SENIORS WERE ENROLLED IN

THE MAC COLLEGE MONEY PROGRAM AND MORE THAN \$2 6 MILLION IN FEDERAL STUDENT AID GRANTS WAS ACCESSED WITH THE ASSISTANCE OF THE MAC COLLEGE

MONEY PROGRAM THE DIRECTOR AND COORDINATOR OF THE PROGRAM PROVIDE ASSISTANCE TO STUDENTS IN COMPLETING THEIR ANNUAL FAESA

Form 990, Part III, Line 4b:

CAPACITY BUILDING PROGRAM THIS FUND IS USED TO PROVIDE GRANTS AND SERVICES THAT PROMOTE NONPROFIT EFFECTIVENESS AND EFFICIENCY, EXCELLENCE IN MANAGEMENT AND GOVERNANCE AND FINANCIAL SUSTAINABILITY PROGRAM ACTIVITIES INCLUDE, BUT ARE NOT LIMITED TO THE AWARD OF SMALL ASSISTANCE GRANTS THAT CAN BE USED TO ACCESS THE SERVICES AND EXPERTISE OF A PROFESSIONAL NONPROFIT CONSULTANT, FACILITATING EXECUTIVE LEADER PEER

Form 990, Part III, Line 4c:

LEARNING AND ENGAGEMENT OPPORTUNITIES. THE DELIVERY OF A CIVIC/COMMUNITY DEVELOPMENT ORIENTED LEADERSHIP SKILLS DEVELOPMENT PROGRAM. THE DELIVERY OF NONPROFIT MANAGEMENT TRAININGS WHICH FOCUS ON TOPICS SUCH AS BOARD GOVERNANCE, PROGRAM EVALUATION AND ASSESSMENT.

GRANTWRITING AND FUNDRAISING THE PROGRAM ALSO SUPPORTS THE IDENTIFICATION, COORDINATION AND USE OF COMMUNITY RESOURCES BY AREA

ORGANIZATIONS AND NONPROFITS, THE CREATION, MAINTENANCE AND DISTRIBUTION OF RESOURCES AND INFORMATION (VIA WEBSITES AND NEWSLETTERS) THAT PROVIDE AREA RESIDENTS AND NONPROFITS WITH INFORMATION ON VOLUNTEERISM, LEADERSHIP DEVELOPMENT AND BEST PRACTICES IN NONPROFIT MANAGEMENT

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code) (Expenses \$ 150,863 including grants of \$ 0) (Revenue \$ 0) SMARTBABIES EARLY CHILDHOOD INITIATIVE THE SMARTBABIES EARLY CHILDHOOD INITIATIVE WAS ESTABLISHED IN 2011 TO PROVIDE COORDINATION IN AN EFFORT TO INCREASE THE OUALITY OF LIFE FOR VERY YOUNG CHILDREN IN WACO, WITH A SPECIFIC FOCUS ON WACO

AREA ZIP CODES WITH HIGHEST POVERTY

(Code) (Expenses \$ 2,599,933 including grants of \$ 2,487,260) (Revenue \$ 0)

THIS INCLUDES ALL OTHER FUNDS OWNED AND MANAGED BY WACO FOUNDATION - 191 DESIGNATED, DONOR ADVISED, SCHOLARSHIP, FIELD OF INTEREST AND DISCRETIONARY FUNDS

efile	e GRA	APHIC prii	nt - DO NOT PROCESS	As Filed Data -		DLN: 9	DLN: 93493339001117		
SCI	HED	ULE A	Public	Charity Statu	s and Pul	olic Supp	ort	OMB No 1545-0047	
(For	m 990			rganization is a sect	ion 501(c)(3) d	organization o		2016	
990E	ZZ)			4947(a)(1) nonexe ▶ Attach to Form 9				2010	
		the Treasury	► Information abo	ut Schedule A (Form			ıctions is at	Open to Public Inspection	
Name	e of th	nie Service ne organiza	tion	www.ns.go			Employer identific		
WACO	FOUNL	DATION					74-6054628		
Pa			for Public Charity Stat				See instructions.		
ne o 1	rganız		a private foundation becaus	`	•	•	(A)(:)		
		•	onvention of churches, or a			. ,, ,	(A)(I).		
2			scribed in section 170(b)		·				
3	Ш		or a cooperative hospital sei	-					
4		name, city,	esearch organization operation and state					·	
5			ation operated for the benef (iv). (Complete Part II)	it of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170	
6		A federal, s	tate, or local government o	r governmental unıt de	scribed in sectio	on 170(b)(1)(۸)(v).		
7			ation that normally receives (O(b)(1)(A)(vi). (Complet		s support from a	governmental (unit or from the gener	al public described in	
8	✓	A communi	ty trust described in sectio	n 170(b)(1)(A)(vi)	(Complete Part I	I)			
9			ural research organization d rant college of agriculture S					ege or university or a	
LO		from activit	ation that normally receives ties related to its exempt fu income and unrelated busing ties section 509(a)(2). (C	nctions—subject to cert ness taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross	
11			ation organized and operate		r public safety S	ee section 509	(a)(4).		
12		more public	ation organized and operate ly supported organizations through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a		
а		Type I. A so	supporting organization ope n(s) the power to regularly Part IV, Sections A and B	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organı	zation(s), typically by		
b		Type II. A manageme	supporting organization su nt of the supporting organiz plete Part IV, Sections A	pervised or controlled in ation vested in the san					
С		Type III f	unctionally integrated. A programme on the companies of t	supporting organization				ited with, its	
d		Type III n functionally	on-functionally integrated integrated The organization You must complete Pa	ed. A supporting organi on generally must satis	zation operated fy a distribution i	ın connection w	th its supported organ		
e		Check this	box if the organization rece or Type III non-functionally	ived a written determin	ation from the II	RS that it is a Ty	/pe I, Type II, Type II	I functionally	
f	Enter		of supported organizations		organization				
g	Provid	de the follow	ing information about the s	upported organization(s)				
(i)N	ame of	f supported o	organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governir	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
Total			tion Act Notice, see the I	<u> </u>	Cat No 11285			 90 or 990-EZ) 2016	

	(Complete only if you ch III. If the organization fo						тапту	under Part
S	ection A. Public Support	12 quam, un				- ·/		
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016		(f)Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	3,805,326	5,857,760	4,331,149	2,817,380	5,535,5	i08	22,347,123
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0	0
3	The value of services or facilities furnished by a governmental unit to	0	0	0	0		0	0
4	Total. Add lines 1 through 3	3,805,326	5,857,760	4,331,149	2,817,380	5,535,5	08	22,347,123
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the	, ,	, ,	, ,	, ,	, ,		5,675,407
5	amount shown on line 11, column (f) Public support. Subtract line 5						+	16,671,716
-	from line 4 ection B. Total Support							
	Calendar year	(-)2012	(h)2012	(-)2014	(4)2015	(-)2016	\neg	(f)Total
	(or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	\bot	
7		3,805,326	5,857,760	4,331,149	2,817,380	5,535,5	08	22,347,123
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	947,436	1,131,180	694,236	674,462	693,7	'33	4,141,047
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	12,101	3,€	35	15,736
10		0	0	0	0		0	0
	Total support. Add lines 7 through 10							26,503,906
	Gross receipts from related activities,					12		31,562
13	First five years. If the Form 990 is for	_			•		_	iization,
	check this box and $\boldsymbol{stop\ here}\ \ldots\ \boldsymbol{.}$						<u>• 🗌</u>	
	ection C. Computation of Public	• •						
	Public support percentage for 2016 (lii			olumn (f))		14		62 903 %
	Public support percentage for 2015 Sc					15		57 913 %
16 a	33 1/3% support test—2016. If the	organızatıon dıd r	not check the box o	on line 13, and line	14 is 33 1/3% or	more, check t	his bo	
b	and stop here. The organization qual 33 1/3% support test—2015. If th				nd line 15 is 33 1/.	3% or more, c	heck	▶ ☑ this
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization meets	t— 2016. If the ord n meets the "facts	ganization did not d -and-circumstance	theck a box on line s" test, check this	box and stop her	e. Explain		▶□
b	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organization Explain in Part VI how the organization	zation meets the "f	facts-and-circumsta	ances" test, check	this box and stop	here.	!	▶ □
	supported organization			,	•	. ,		ightharpoons
	Private foundation If the organizati	on did not check a	hox on line 13 16	a 16h 17a or 17	h check this box	and see		_

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						▶ □
	33 1/3% support tests—2015. If the						. —

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

ightharpoons

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	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
С	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?		
Ĭ	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 fewers commented	\Box	

		30	l		
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с			
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b ın 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 cold of the cold 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 trustoss 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				
			1			
	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	<u> </u>	1			
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b				
	30					

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

1

Section C - Distributable Amount

instructions)

Adjusted net income for prior year (from Section A, line 8, Column A)

Current Year

Schedule A (Form 990 or 990-FZ) 2016

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

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .



SCHEDULE D (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: 93493339001117 OMB No 1545-0047

Open to Public

•	tment of the Treasury at Revenue Service Information about Schedule D	► Attach to Form 990. (Form 990) and its instructions is a	at <u>www.<i>i</i></u>	irs.gov/form990	Open to I	
Na	me of the organization	·			ntification num	
WAG	CO FOUNDATION			74-6054628		
Pa	rt I Organizations Maintaining Donor Complete if the organization answere			or Accounts.		
		(a) Donor advised funds		(b)Funds and	other accounts	
1	Total number at end of year		55			140
2	Aggregate value of contributions to (during year)	2,547	7,718		2,9	87,789
3	Aggregate value of grants from (during year)	1,55:	1,929		1,7	40,235
4	Aggregate value at end of year	7,140	0,008		72,4	12,836
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t			dvised	✓ Yes	□ No
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?				☑ Yes	□ No
Pai	t II Conservation Easements. Complete	e if the organization answered "Yes	" on For	m 990, Part IV,	line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply)				
	\square Preservation of land for public use (e g , reci	reation or education) 🔲 Preserva	ation of ar	n historically impo	rtant land area	
	Protection of natural habitat	Preserva	ation of a	certified historic s	tructure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization heasement on the last day of the tax year	eld a qualified conservation contribution	n in the fo		ion the End of the	Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easement	s		2b		
С	Number of conservation easements on a certified by	nistoric structure included in (a)		2c		
d	Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/17/06, and not on a hi	istoric	2d		
3	Number of conservation easements modified, tran	sferred, released, extinguished, or term	inated by	the organization	during the	
4	Number of states where property subject to conse	rvation easement is located >				
5	Does the organization have a written policy regard and enforcement of the conservation easements it		handling	of violations,	□ Yes □	No
6	Staff and volunteer hours devoted to monitoring,	nspecting, handling of violations, and e	nforcing c	onservation easer		
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, and enforci	ıng conser	vation easements	during the year	
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of	f section 1	.70(h)(4)(B)(ı)	☐ Yes ☐	No
9	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text	of the footnote to the organization's fina	and expe	ense statement, ar ements that descr	nd	
Par	the organization's accounting for conservation ease TIII Organizations Maintaining Collect		s or Oth	ner Similar Ass	sets	
	Complete if the organization answere			ici olillilai Ass	Jet31	
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to its	ld for public exhibition, education, or re-	search in			of
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items	AS 116 (ASC 958), to report in its rever	nue staten			
(i) Revenue included on Form 990, Part VIII, line 1			▶ \$		
(i	i)Assets included in Form 990, Part X			▶ \$		
2	If the organization received or held works of art, he following amounts required to be reported under states.				e the	
а	Revenue included on Form 990, Part VIII, line 1		**=	▶ \$		
b	Assets included in Form 990, Part X			▶ \$		
For F	Paperwork Reduction Act Notice, see the Instr	uctions for Form 990.	Cat No	► \$ 52283D Sche	dule D (Form 9	90) 2016

Sche	dule D (Form 990) 2016									Page 2
Par	Organizations Ma	aintaining Collections o	of Art, Histo	rical Tr	easur	es, or Other !	Similar As	sets (conti	nued)	
3	Using the organization's acquitems (check all that apply)	uisition, accession, and other		k any of t	he follo	owing that are a	sıgnıfıcant u	ise of its coll	ection	
а	Public exhibition		d		Loan o	or exchange prog	rams			
b	Scholarly research		е		Other					
С	Preservation for future	generations								
4	Provide a description of the c Part XIII	organization's collections and	explain how th	hey furth	er the o	organization's ex	empt purpo	se in		
5	During the year, did the orga assets to be sold to raise fun						ılar	☐ Yes	□ N	0
Pai		odial Arrangements. ganization answered "Yes	" on Form 99	0, Part 1	IV, line	e 9, or reporte	d an amou	ınt on Form	າ 990,	Part
1a	Is the organization an agent, included on Form 990, Part X		intermediary fo	or contrib	utions	or other assets r	not	Yes	□ N	o
ь	If "Yes," explain the arrange	ment in Part XIII and comple	ete the followin	a table			Δ	mount		_
C	Beginning balance	mone in Fare Attrana comple	te the followin	y table		1c				_
d	Additions during the year					1d				_
e	Distributions during the year					1e				_
f	Ending balance					1f				_
2a	Did the organization include	an amount on Form 990 Pai	t X line 21 fo	r escrow	or cust	todial account lia	bility?	П.,		_
b	If "Yes," explain the arranger	·					·	☐ Yes	□ N	0
Pa	rt V Endowment Fund	is. Complete if the organ		ered "Ye	s" on	Form 990, Par				
	Danisa of war balance	(a)Currer		Prior year		c)Two years back	(d)Three yea		our year	
	Beginning of year balance .		,497,231	64,934,	_	64,196,386 626,767	<u> </u>	101,908		947,849
	Contributions		,628,606 ,342,035	1,972, -2,752,		1,718,216		949,082		242,047 531,366
	Net investment earnings, gain	3, 4114 103363	,165,575	2,054,		1,006,747	· · · · · · · · · · · · · · · · · · ·	156,126		105,802
	Grants or scholarships		,103,373	2,034,	4/3	1,000,747	Ι,	130,120		103,802
е	Other expenditures for facilities and programs	:5	0		0	0		0		0
f	Administrative expenses .		679,201	603,	127	599,649		586,885		513,552
g	End of year balance	68	,623,096	61,497,	231	64,934,973	64,	196,386	58,	101,908
2	Provide the estimated percer	 ntage of the current vear end	l balance (line	1a. colum	nn (a))	held as				
а	Board designated or quasi-er	-	`	3,	(),					
ь	Permanent endowment >	30 71 %								
С	Temporarily restricted endow	vment ▶ 25 48 %								
	The percentages on lines 2a,	2b, and 2c should equal 100	0%							
3а	Are there endowment funds	not in the possession of the	organization th	at are he	ld and	administered for	the			
	organization by							2-(:)	Yes	No
	(i) unrelated organizations				•			3a(i) 3a(ii)	\vdash	No No
h	(ii) related organizations . If "Yes" on 3a(ii), are the relations.		equired on Sch	· · ·	• •			3b		110
4	Describe in Part XIII the inte	=				· · · ·			1	
Pai	rt VI Land, Buildings, a	and Equipment.								
		ganization answered 'Yes'		,						
	Description of property	(a) Cost or other basis (investment)	(b) Cost or othe	er basıs (ot	her)	(c)Accumulated de	epreciation	(d) Bo	ook value	e
1a	Land	0			0					0
b	Buildings	0			0		0			0
С	Leasehold improvements	0			0		0			0
d	Equipment	0		190),104		171,515			18,589

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

18,589

Part VII	Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	ganization answ	ered 'Yes' on For	m 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b) Book value		Method of valuation end-of-year market value
(1)Financial (2)Closely-h		30,972,852		F
(3)Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12)	▶ 30,972,852		
Part VIII	Investments—Program Related. Complete if the o See Form 990, Part X, line 13.		wered 'Yes' on Fo	orm 990, Part IV, line 11c.
	(a) Description of investment	(b) Book value		Method of valuation end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. Complete if the organization answered 'Yes' (a) Description	on Form 990, Par	t IV, line 11d See	Form 990, Part X, line 15 (b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answe	red 'Ves' on Fo	rm 990 Part IV I	>
	See Form 990, Part X, line 25.			mie 11e or 11r.
(1) Federal II	(a) Description of liability	(6) 80	ook value	
			0	
(2)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col (B) line 25)	•	0	
·	or uncertain tax positions In Part XIII, provide the text of the f s liability for uncertain tax positions under FIN 48 (ASC 740)(_	

1

2

b

c

d

е

3

4

5

1

2

b

d

3

4

а

b

C 5

Part XIII

Part XII

Other losses .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Schedule D (Form 990) 2016

Page 4

Investmen Other (Des Add lines 4

Add lines 2a through 2d . . .

Subtract line 2e from line 1 .

Donated services and use of facilities .

Recoveries of prior year grants . . . Other (Describe in Part XIII) . .

Complete if the organization ansi	we					
Reconciliation of Expenses per Audited	Fi					
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I,	, Iu					
Add lines $4a$ and $4b$						
Other (Describe in Part XIII)						
Investment expenses not included on Form 990, Part VIII, line 7b .						
Amounts included on Form 990, Part VIII, line 12, but not on line 1						
Amounts included on Form 990, Part VIII, line 12, but not on line 1						

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)

Supplemental Information

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

Net unrealized gains (losses) on investments . . .

	•	•	•	•	•			
	4a							
	4b							
ine 12)								
inanci	inancial Statements With Expe							

2a

2b

2c

2d

4b

Explanation

2a

2b

2c

2d

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

4c	
5	
i ses p e 12a) (
1	

4c

2e

3

es per Return. 12a.					
1					
2e					
3					

				_
_	_	_	_	_
				_

Schedule D (Form 990) 2015



Complete if the organization answered 'Yes' on Form 990, Part IV, li Total expenses and losses per audited financial statements . Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . Prior year adjustments Other (Describe in Part XIII) . Subtract line 2e from line 1 .

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,

Total revenue, gains, and other support per audited financial statements

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: 16000425
Software Version: v1.00

Name: WACO FOUNDATION

EIN: 74-6054628

Supplemental Information

Return Reference

Explanation
THE ENDOWMENTS OF WACO FOUNDATION ARE INTENDED TO PROVIDE INCOME TO VARIOU

Schedule D, Part V, Line 4

THE ENDOWMENTS OF WACO FOUNDATION ARE INTENDED TO PROVIDE INCOME TO VARIOUS CHARITABLE ORG

ANIZATIONS AND ACTIVITIES IN MCLENNAN COUNTY, TEXAS AS WELL AS MAINTAIN THEIR REAL VALUE O VER TIME SOME ENDOWED FUNDS ARE ESTABLISHED TO PROVIDE SUPPORT FOR SPECIFIC, DESIGNATED C HARITIES OTHER FUNDS, ESTABLISHED FOR GENERAL CHARITABLE COMMUNITY BETTERMENT OR A SPECIF IC CHARITABLE FIELD OF INTEREST, WILL PROVIDE GRANTS OF INCOME TO DIFFERENT CHARITIES EVER Y YEAR ACCORDING TO COMMUNITY NEEDS AND THE FINDINGS OF THE DELIBERATIONS OF THE ORGANIZAT ION'S BOARD OF TRUSTEES

Return Reference	Explanation			
Schedule D, Part X, Line 2	THE FOUNDATION HAS BEEN GRANTED EXEMPTIONS FROM FEDERAL INCOME TAXES UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE AS SUCH, NO PROVISION FOR INCOME TAXES IS REFLECTED IN TH E CONSOLIDATED FINANCIAL STATEMENTS THE FOUNDATION RECOGNIZES THE EFFECT OF INCOME TAX PO SITIONS (INCLUDING WHETHER EXEMPT INCOME MIGHT BE DETERMINED TO BE UNRELATED BUSINESS INCO ME AND WHETHER IT HAS PROPERLY MAINTAINED ITS EXEMPT STATUS) IF SUCH POSITIONS ARE PROBABL E OF BEING SUSTAINED (I E , PROBABLE THAT ADJUSTMENTS WOULD NOT BE DETECTED AND MADE BY TA XING AUTHORITIES) RECOGNIZED INCOME TAX PROVISIONS ARE MEASURED AT THE LARGEST AMOUNT THA T IS GREATER THAN 50% OF BEING REALIZED CHANGES IN THE RECOGNITION OR MEASUREMENT ARE REF			

Supplemental Information

T IS GREATER THAN 50% OF BEING REALIZED CHANGES IN THE RECOGNITION OR MEASUREMENT ARE REF

LECTED IN THE PERIOD IN WHICH THE CHANGE IN JUDGMENT OCCURS THE FOUNDATION RECORDS INTERE

ST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN MANAGEMENT AND GENERAL EXPENSES

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493339001117 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** WACO FOUNDATION 74-6054628 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e q, program service, describe for and investments fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region region to recipients located in the region) (1) Central America and the 0 0 linvestments 14,714,040 Carıbbean (2) (3) (4) (5) 3a Sub-total b Total from continuation sheets to Part I 0 14.714.040 c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2016

(3) (4)

(5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2016

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (c) Number of (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other) (1) (2)

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 5520 and 5520 My	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (See Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713)	Yes	✓ No

Additional Data

Software ID: 16000425 Software Version: v1.00

EIN: 74-6054628

Name: WACO FOUNDATION

Page 5

Schedule F (Form 990) 2016 Part V Supplemental Information

any additional information (see instructions).

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;

amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493339001117 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** WACO FOUNDATION 74-6054628 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 47

(2) (3)

(4) (5) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

(6)(7) Return Reference **Explanation** Schedule I, Part I, Line 2

Schedule I (Form 990) 2016

EACH GRANT RECIPIENT IS EMAILED AN AWARD LETTER AND CONTRACT OUTLINING THE TERMS OF THE GRANT AWARD AND INSTRUCTIONS ON HOW TO REQUEST DISBURSEMENTS IF NECESSARY, THE SENIOR DIRECTOR OF COMMUNITY INVESTMENT AND OPERATIONS SCHEDULES A MEETING WITH THE RECIPIENT IF FURTHER EXPLANATION IS REQUIRED. THE SIGNED CONTRACT MUST BE RETURNED TO WACO FOUNDATION BEFORE THE FIRST DRAW CAN BE MADE. TO ACCESS THE FUNDS, THE ORGANIZATION MUST SUBMIT A CHECK REOUEST AND EXPENSE DOCUMENTATION OF WHEN. WHERE AND HOW THE MONEY WAS SPENT THE SENIOR DIRECTOR OF COMMUNITY INVESTMENT AND OPERATIONS REVIEWS AND APPROVES THE CHECK REQUESTS AND DOCUMENTATION, ANY DISCREPANCIES BETWEEN

HOW THE MONEY WAS SPENT AND WHAT FUNDS WERE ALLOTTED FOR ARE IMMEDIATELY ADDRESSED. THE SENIOR DIRECTOR OF COMMUNITY INVESTMENT AND OPERATIONS MAINTAINS THE GRANT FILES THE TRUSTEES PERIODICALLY RECEIVE GRANT REPORTS. WHICH LISTS WHICH ORGANIZATIONS HAVE OR HAVE NOT MADE DRAWS. AND WHICH HAVE EXPENDED THEIR GRANTS IN ADDITION. THEY REVIEW A LIST OF GRANT CHECKS WRITTEN AND ARE APPRISED OF ANY REQUESTS

FOR REALLOCATION OR RESCISSION OF FUNDS ORGANIZATIONS ARE REQUIRED TO COMPLETE AN INTERIM EVALUATION REPORT SIX MONTHS AFTER THE GRANT HAS BEEN AWARDED AND A CLOSE-OUT REPORT UPON FINAL DRAW

Page **2**

Additional Data

San Angelo, TX 769091048

Animal Birth Control Clinic Inc

3238 Clay Ave

Waco, TX 767111210

Software ID: 16000425
Software Version: v1.00
EIN: 74-6054628
Name: WACO FOUNDATION

Form 990 Schedule T. Part TJ. Grants and Other Assistance to Domestic Organizations and Domestic Governments

501(c)(3)

23-7110730

orm 550,5 chedule 1, Fart 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Angelo State University Scholarship Programs Office ASU Station 11048	75-6002403	501(c)(3)	10,000	0			Grant and Donell Teaff Endowed Scholarship Fund		

Spay, Neuter and

Microchip Expansion, General Support

114,350

(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

Antioch Community Church 74-2918395 501(c)(3) 270,000 Building Project 505 N 20th St

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

505 N 20th St Waco, TX 76707

Waco, TX 76707 Antioch Ministries International 74-2671872 501(c)(3) 5,500 Team mission trips

(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 if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Avance Inc (Waco) 90-0143587 501(c)(3) 31,750 General Support

Baylor University Libraries

3005 Edna Ave Waco, TX 76708						
Baylor University 1 Bear Pl Unit 97048 Waco, TX 767987048	74-1159753	501(c)(3)	181,750	o		Entrepreneurial Program, Grant and Donell Teaff Athletic Archive Fund in the

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 letion of Raptor

Cameron Park Zoological and	74-1290001	501(c)(3)	6,000	0		Complet
Botanical Society						Mews Pr
1701 N 4th St						care, Ge
Waco, TX 76707						

PO Box 303040 Austin, TX 78703

Project, Red Apes' General Support Camp Fire Central Texas 74-1552713 501(c)(3) 37.454 General Support

(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 (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Care Net Pregnancy Center of 74-2345781 501(c)(3) 100.000 Human Race ısıng Event,

Waco, 1X 70701		ļ		Į.
Central Texas Inc 800 W Waco Dr Waco, TX 76701				Fundraisi General S

300 S 15th St Waco, TX 76701

l Support General Support Caritas of Waco 74-1711575 501(c)(3) 30.6851

(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 (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance City of Waco 74-6002468 114 803 Animal Shelter

city of water	7 1 0002 100		1 1,000		I	/ IIIIII Official
PO Box 2570						Renovation
Waco, TX 767022570						
Community Loan Center of the Heart of Texas Inc	47-5549155	501(c)(3)	35,000	0	I	Business Model Research

Heart of Texas Inc 1700 S New Road

Waco, TX 76711

(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 Compassion Ministries of Waco 74-2698244 501(c)(3) 94 699 Endowment Fund. port

Compaction innocines of fract	,	301(3)(3)	2 .,033		1	
Inc						General Supp
1421 Austin Ave						
Waco, TX 76701						

74-1200140 Congregation Agudath Jacob 501(c)(3) 20.117 General Support 4925 Hillcrest Dr

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

Waco, TX 76710

(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 (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ne Arc Program,

Cultural Arts of Waco 801 Washington Ave Ste 405 Waco, TX 767011260	05-0616886	501(c)(3)	76,680	0		Art at the Arc Program, Doris Miller Memorial, General Support
Dr Pepper Museum and Free	74-2497117	501(c)(3)	10,000	0		Stanley Strum Memorial

Enterprise Institute

300 S 5th St Waco, TX 76701

(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 (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance First Bantist Church of Waco 74-2734145 501(c)(3) 9.800 General Support

500 Webster Ave Waco, TX 76706	, , 12, 5, 12, 15	301(0)(0)	2,000	,		Control Support
First Baptist Church of Waco Foundation	74-2981028	501(c)(3)	19,900	О		General Support

500 Webster Ave

Waco, TX 76706

(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 if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 81-4815182 501(c)(3) 9.164 General Support Greater Waco Legal Services PO Box 689 Waco, TX 767030689 Heart of Texas Community 74-2867580 501(c)(3) 32,850 Community Health

Worker Initiative.

General Support

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

Health Center Inc dba Family

Health Center

1600 Providence Dr Waco, TX 76707

(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 Historic Waco Foundation Inc. 74-1563772 501(c)(3) 9.597 Fort House

41.041

Maintenance, General

General Support

Support

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

501(c)(3)

Historic Waco Foundation 810 S 4th St Waco, TX 76706

PO Box 8031 Waco, TX 76714

Jewish Federation of Waco

74-1563777

74-1167963

(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 if applicable grant cash non-cash assistance or assistance or government other) assistance KWBU - Brazos Valley Public 74-2674611 501(c)(3) 8.250 Classical Music Support, General Support Broadcasting Foundation 1 Bear Pl Unit 97296 McLennan Community College 74-2550278 501(c)(3) 218.723 Scholarship Funds. Foundation Police and Fire 1400 College Dr Academy, Nursing

Program, Veterinary

Support

Tech Program, General

Waco, TX 767987296

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

Waco, TX 76708

(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 75-0855633 501(c)(3) 100.000 Athletic Building Fund McMurry University 1 McMurry Station Box 278 Account

Abilene, TX 79697 Meals & Wheels - Central 74-1776447 501(c)(3) 7.346 General Support Texas Senior Ministry

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

PO Box 85 Waco, TX 76703

(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 if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Mission Waco Mission World 74-2605621 501(c)(3) 19.800 Jubilee Food Market.

Inc 1315 N 15th St Waco,TX 76707						General Support
National Football Foundation	22-1508812	501(c)(3)	25,000	0		Endowed Scholarsh

Scholarship 433 Las Colinas Blvd E Ste 1130 Irving, TX 75039

(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 Nations of Coaches Inc. 14-1927543 501(c)(3) 12.500 General Support

303-D Beltline PI SW 231
Decatur, AL 35603

Planned Parenthood of Greater Texas Inc
1121 Ross Ave

Cocktails for a Cause, Building Program,
General Support

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

Waco, TX 76706

(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 if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Polk Street United Methodist 75-0818170 501(c)(3) 15.000 General Support

Education, HB4 Pre-K Research, General

Support

Prosper Waco	46-5714986	501(c)(3)	153,160	0		Capac
Church 1401 S Polk St Amarillo, TX 79101						

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

Waco, TX 76701

acity Building and Collective Impact 1516 Austin Ave

(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 if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Providence Foundation Inc. 74-2683112 501(c)(3) 83.000 Pink Partners Breast

Foundation

2401 S 31st Street Temple, TX 76508

6901 Medical Pkwy Waco, TX 76712		(-)(-)				Health Center, Sorin S5 Heart Lung Perfusion System, General Support
Scott & White Healthcare	27-3513154	501(c)(3)	40,000	0		Nurse Family

Partnership 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 if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-2936942 501(c)(3) 12.000 St Andrew Orthodox Church -Installation of Chapel's Woodway Iconostasis, Building Fund, Permanent Church Sign, General

PO Box 23467 Waco, TX 76702

Waco, TX 76708

Support 501(c)(3) St Louis Catholic Church 30-0516888 8,000 General Support 2001 N 25th St

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 St Paul's Episcopal Church 74-1109762 501(c)(3) 6.500 General Support 601 Columbus Ave

601 Columbus Ave
Waco, TX 76701

St Peter Catholic Student 74-2693453 501(c)(3) 10,000 0

General Support

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

1415 S 9th St Waco, TX 76706

(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 if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance St Vladimir's Orthodox 13-1656625 501(c)(3) 500.000 Establishment of an Theological Seminary Endowment for St 575 Scarsdale Rd Vladımır's Seminary Yonkers, NY 10707 Press

General Support

23.450

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

501(c)(3)

75-2849153

Talitha Koum Institute (Crossties Ministries) PO Box 2202 Waco, TX 76703

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 74-6070818 501(c)(3) 6,500 General Support Unitarian Universalist

Fellowship of Waco 4209 N 27th St Waco, TX 76708						
Vanguard College Preparatory	74-1815978	501(c)(3)	10,500	0		Air Cor

Waco, TX 76710

Conditioning Project |for Gym, General SCHOOL 2517 Mt Carmel Dr Support

(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 if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Waco Chamber of Commerce 75-2420690 501(c)(3) 10.000 General Support Community Development

Clifton House #12,

General Support

Community Development
Foundation
PO Box 1220
Waco, TX 76703

25,850

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

501(c)(3)

75-2130884

Waco Habitat for Humanity

PO Box 2124

Waco, TX 76703

(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 if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Waco ISD Education 74-2728765 501(c)(3) 7.750 Scholarship Fund Foundation

Community Health

Worker Initiative

5.731

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

PO Box 2369
Waco, TX 76703

Waco-McLennan County Public
Health District

74-6002468

225 W Waco Dr Waco, TX 76710

(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

YMCA of Central Texas 74-2668685 501(c)(3) 6,500 0 2016 Annual PO Box 20515 Scholarship Campaign,

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

Waco, TX 76702

DLN: 93493339001117

OMB No 1545-0047

2015

Schedule J

(Form 990)

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization WACO FOUNDATION

Employer identification number

			74-6054628			
Pa	art I Questions Regarding Compensation					
					Yes	No
1a	Check the appropiate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III t					
	┌ First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	□ Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organism reimbursement or provision of all of the expenses des		1 , 3 31 ,	1b		
2	Did the organization require substantiation prior to rei directors, trustees, officers, including the CEO/Execu					
	directors, crustees, officers, filefulling the eloyexeeu	acive L	proceed, regarding the items effected in fine 1a	2		
3	Indicate which, if any, of the following the filing organizorganization's CEO/Executive Director Check all that used by a related organization to establish compensation	at appl	y Do not check any boxes for methods			
	Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	Ľ	Compensation survey or study			
	┌ Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, P or a related organization	art V	II, Section A, line 1a with respect to the filing organization	ו		
а	Receive a severance payment or change-of-control pa	aymei	nt?	4a		No
b	Participate in, or receive payment from, a supplement	tal nor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-bas	sed co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	vide tl	he applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ons m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the revenues of	line 1	a, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A, l compensation contingent on the net earnings of	line 1	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6 b		Νo
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported on Form 990, Part VII, pa		·			
	subject to the initial contract exception described in F in Part III	keguli	acions section 53 4956-4(a)(3)/ IT "Yes," describe	8		No
9	If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)?	rebut	table presumption procedure described in Regulations	9		

Page 2

Form 990

Schedule J (Form 990) 2015

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns		
	D	(ii)	(111)	other deferred	benefits	(B)(ı)-(D)	column(B) reported	
	Base	Bonus & incentive	Other reportable	compensation			as deferred on prior	

16,286

5.398

184.161

(I) compensation compensation compensation 1 ASHLEY DULSKI 145.477 17.000

Schedule J (Form 990) 2015

EXECUTIVE DIRECTOR

Return Reference	Explanation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Part IIII Supplemental Inform	nation
Schedule J (Form 990) 2015	Page 3

Schedule J (Form 990) 2015

DLN: 93493339001117 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** WACO FOUNDATION 74-6054628 Part I 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 Art-Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . 8 Intellectual property Securities—Publicly traded . Χ 2,092,143 AVG OF HI AND LOW VALUES 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 Other ► (___ 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 0 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 Yes 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 contributions? 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										
	Provide the information 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										
this part for any add	itional information.										
Return Reference	Explanation										
	Schedule M (Form 990) (2016)										

efile GRAPH	IIC print	- DO NOT PROCESS	As Filed Data -		DLI	N: 93493339001117				
SCHEDUL (Form 990 or EZ)	990-EZ ions on n. ictions is at	2016 Open to Public Inspection								
Name of the org WACO FOUNDATIO	NC	olemental Informatio	on		74-6054628	ntification number				
Return Reference		Explanation								
Form 990, Part VI, Section B, Line 11b	THE DIRECTOR OF FINANCE EMAILS TO THE BOARD OF TRUSTEES A COPY OF THE COMPLETED, UNFILED F ORM 990, WITH AN EXPLANATION OF THE MOST IMPORTANT ITEMS OF INTEREST ON THE FORM THE BOAR D IS GIVEN TWO WEEKS TO REVIEW THE FORM 990 AND ASK QUESTIONS ABOUT ITS CONTENTS									

990 Schedule O, Supplemental Information Return Reference Explanation

Form 990. CONFLICTS OF INTEREST ARE DETERMINED AND REVIEWED ON THE LEVELS OF EXECUTIVE DIRECTOR. COM Part VI. MITTEE MEMBERS AND BOARD MEMBERS IF THERE IS REASON TO BELIEVE THAT A MEMBER HAS FAILED T Section B. O DISCLOSE ANY ACTUAL OR POSSIBLE CONFLICT OR DUALITY OF INTEREST. THEY WILL BE GIVEN AN O Line 12c PPORTUNITY TO EXPLAIN UPON FURTHER INVESTIGATION. THE BOARD OR COMMITTEE MAY TAKE APPROPR IATE DISCIPLINARY AND CORRECTIVE ACTION. WHICH MAY RESULT IN THE REMOVAL OF THAT PERSON FR OM THEIR BOARD POSITION, OR TERMINATION OF EMPLOYMENT, IF AN EMPLOYEE IF A MEMBER DISCLOS ES A CONFLICT OR DUALITY OF INTEREST. THEY ARE ALLOWED TO REMAIN IN THE BOARD MEETING DURI NG DISCUSSIONS, BUT ARE REQUIRED TO ABSTAIN FROM VOTING ON THE SUBJECT

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	IN DETERMINING THE EXECUTIVE DIRECTOR'S SALARY, THE BOARD USES THE COUNCIL ON FOUNDATION'S SALARY SURVEY, WHICH HAS INFORMATION ON EXECUTIVES FROM OTHER FOUNDATIONS AND INCLUDES CO MPARISON DATA RELATED TO SIMILAR ASSET SIZE AND DIFFERENCES IN WAGE RATES BASED ON GEOGRAP HY WACO FOUNDATION CONSIDERS FOR COMPARISON COMMUNITY FOUNDATIONS IN THE 50 TO 100 MILLIO N ASSET RANGE AND THAT ARE LOCATED IN THE SOUTHWEST REGION OF THE UNITED STATES A COMPENS ATION PACKET, WHICH INCLUDES INFORMATION ON EXECUTIVE PERFORMANCE, IS REVIEWED BY THE EXEC UTIVE COMMITTEE PRIOR TO THE BOARD'S VOTE ON SALARIES, AND IS MAINTAINED AS A PART OF THE ORGANIZATIONAL RECORDS INPUT FROM THE FULL BOARD IS OBTAINED THROUGH FORMAL ONLINE SURVEY S OF OBJECTIVE CRITERIA OR THROUGH THE CHAIRMAN'S POLLING OF BOARD MEMBERS VIA TELEPHONE C ALLS AND MEETINGS THIS PROCESS IS PERFORMED ANNUALLY THE PROCESS FOR SETTING ALL OTHER E MPLOYEES' SALARIES IS BASED ON THE SAME SALARY SURVEY AND AN ANNUAL PERFORMANCE REVIEW ALL SALARIES ARE APPROVED BY THE BOARD

Return Explanation
Reference

990 Schedule O, Supplemental Information

Line 18

Form 990,
Part VI,
Section C,

THE FOUNDATION'S FORM 1023 IS AVAILABLE UPON REQUEST OUR MOST RECENTLY FILED FORM 990 IS
AVAILABLE ON GUIDESTAR AND UPON REQUEST, AND OUR MOST RECENTLY FILED FORM 990T IS AVAILABL
E UPON REQUEST

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section C,
Line 19

Return Explanation Pafaranca

Reference	
Form 990,	THIS AMOUNT REPRESENTS PARTNERSHIP DISTRIBUTIONS FROM PUBLICLY-TRADED LIMITED PARTNERSHIPS
Part XI, Line	THE K-1S FOR 2016 REFLECT BUSINESS LOSSES, WHICH CREATES A BOOK-TAX DIFFERENCE BETWEEN T

HE AMOUNT RECEIVED AND THE AMOUNT THAT IS CONSIDERED UNRELATED BUSINESS INCOME

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493339001117 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** WACO FOUNDATION 74-6054628 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity **(b)** Primary activity (c) Legal domicile (state (d) (e) End-of-year assets Total income or foreign country) entity

Part III Identification of Related Tax-Exempt Organizations during the tax year	t ions Comple	te if the orga	nızatıon an	swered	"Yes" on Fo	orm 990	, Part IV	, line 34 b	ecause it ha	ad one or	more	
(a) Name, address, and EIN of related organization		(b) Primary activity		(c) Legal domicile (state or foreign country)		e section	(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity		Section (13) cor ent	512(b) ntrolled
(1)WF ASSETS INC 1227 N VALLEY MILLS DR STE 235	TYPE 1 SUPPO		TX		501(C)(3)		LINE 11, TYPE 1		WACO FOUNDATION		Yes	No
WACO, TX 76710 74-2783048												<u> </u>
For Paperwork Reduction Act Notice, see the Instructions for For		Cat	No 5013	5Y				Schedul	e R (Form	990) 20	16	

(a) Name, address, and EIN related organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)		(g) Share of end-of-year assets	(h) Disproprtionate r allocations?		(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percenta ownersh
					,			Yes	No		Yes	No	
		+					1						
Identification of Related Orga because it had one or more relate						zation ansv	wered "Yes	" on F	orm 9!	90, Part IV,	line	34	
Identification of Related Orga because it had one or more relate (a) Name, address, and EIN of related organization		s a corporation		t during th	(d) controlling Typentity (C of	(e)	wered "Yes (f) Share of total income	Share	(g) e of end- year assets	(h) ntage	 Se (1	L3) cont entity
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	(i) ection 5 13) contr entity Yes
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	ection 5: 13) conti entity
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	ection 5 13) cont entity
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	ection 5 13) cont entity
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	ection 5 13) cont entity
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	ection 5 13) con entit

scne	lile k (Form 990) 2016		Pā	age 3
Pa	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part 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 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	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)	1 b		No
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	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)	1i		No
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
I	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
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p		No
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
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 relationships and transaction thresholds			
	(a) Name of related organization (b) Transaction Transaction Amount involved Method of determining an	mount i	nvolve	t

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

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

(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g	(k) Percentage ownership
İ			514)	Yes	No	ļ ,		Yes	No		Yes	No	
										Schedul	e R (Form	1 990	0) 2016

