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Return of Organization Exempt From Income Tax

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

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

2017

DLN: 93493199003388 OMB No 1545-0047

Open to Public

Department of the Treasur ▶ Information about Form 990 and its instructions is at www IRS gov/form990 Internal Revenue Service Inspection For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 C Name of organization SAN ANGELO AREA FOUNDATION D Employer identification number ☐ Address change 73-1634145 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O $\,$ box if mail is not delivered to street address) 221 S IRVING ST E Telephone number ☐ Amended return ☐ Application pending (325) 947-7071 City or town, state or province, country, and ZIP or foreign postal code SAN ANGELO, TX $\,$ 76903 $\,$ G Gross receipts \$ 45,239,217 F Name and address of principal officer H(a) Is this a group return for MATT LEWIS ☐Yes ☑No subordinates? 221 S IRVING ST H(b) Are all subordinates SAN ANGELO, TX 76903 ☐Yes ☐No included? Tax-exempt status **✓** 501(c)(3) 4947(a)(1) or 501(c)() **◄** (insert no) If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW SAAFOUND ORG L Year of formation 2001 M State of legal domicile TX Summary 1 Briefly describe the organization's mission or most significant activities MANAGING ENDOWED GIFTS IN ORDER TO MATCH DONOR INTERESTS WITH COMMUNITY NEEDS OF THE AREA Activities & Governance Check this box \blacktriangleright \square 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 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 8 Total number of volunteers (estimate if necessary) . . 6 0 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 7Ь 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 12,617,712 8 Contributions and grants (Part VIII, line 1h) . 10,737,345 **9** Program service revenue (Part VIII, line 2g) . . . 7,456,997 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,438,390 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 34,457 49,597 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 14,210,192 20,124,306 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 5,390,986 7,799,550 14 Benefits paid to or for members (Part IX, column (A), line 4) . 610,724 554,890 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶182,416 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 566,131 614,919 6,512,007 9,025,193 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 11,099,113 19 Revenue less expenses Subtract line 18 from line 12 . 7,698,185 Assets or d Balances **Beginning of Current Year End of Year** 149,823,227 20 Total assets (Part X, line 16) . 119,370,781 38,781,203 21 Total liabilities (Part X, line 26) . 31,276,461 88,094,320 111,042,024 22 Net assets or fund balances Subtract line 21 from line 20 . 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 2018-07-18

Date

2018-07-18

PTIN

P00277460

Check | If

self-employed

Firm's EIN ► 75-1056027

Preparer's signature GAYE DAVIS CPA

Signature of officer

MATT LEWIS CEO
Type or print name and title

Print/Type preparer's name GAYE DAVIS CPA

Firm's name CONDLEY AND COMPANY LLP

Sign Here

Paid

Preparer

Form	990 (2017)						Page 2
Pai	t IIII Statemer	nt of Program Servic	e Accomplis	hments			
	Check if Sch	hedule O contains a respo	nse or note to	any line in this Part III			. \square
1	Briefly describe the	e organization's mission					
		N ANGELO AREA FOUNDA DER TO MATCH DONOR IN			NTHROPY BY ATTRACTING AND PR THE AREA	UDENTLY MA	NAGING
2	Did the organizatio	on undertake any significa	nt program ser	vices during the year wh	nich were not listed on		
	the prior Form 990	or 990-EZ?				☐ Yes	✓ No
	If "Yes," describe t	hese new services on Sch	nedule O				
3	Did the organizatio	n cease conducting, or m	ake significant	changes in how it condu	cts, any program		
						☐ Yes	✓ No
4	Describe the organ Section 501(c)(3) a	ization's program service	accomplishmer	to report the amount of	argest program services, as measu f grants and allocations to others, t		ses
4a	(Code) (Expenses \$	7,955,845	including grants of \$	7,799,550) (Revenue \$)	
	See Additional Data						
4b	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)	
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)	
4d	Other program ser	vices (Describe in Schedi	ule O) uding grants of	\$) (Revenue \$)	
4e	Total program se	ervice expenses >	7,955,8	45		<u> </u>	

Checklist of Required Schedules

12b

13

14a

14b

15

16

17

18

19

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

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Page 3

No

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

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

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

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

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

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)

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

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

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

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

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

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

29

101111 330 (2	2017)		Page 4
Part IV	Checklist of Required Schedules (continued)		
		Yes	No

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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.

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

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?

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,

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

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

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

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

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 .

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

instructions for applicable filing thresholds, conditions, and exceptions)

Nο

20a

20b

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24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

35h

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Yes

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Yes

Yes

Yes

Yes

Νo

Nο

Νo

Nο

14 Either the number reported off. Box 1 of Form 1006 Either -0- if not applicable. 15 Either the number of Forms W2-0 included in line 1 a Either -0- if not applicable. 16 Either the number of Forms W2-0 included in line 1 a Either -0- if not applicable. 17 Either the number of Either was applicable of Forms W2-0 included in line 1 a Either -0- if not applicable payments to wenders and reportable gaming. 18 Either the number of emoloyees reported on Form W2-0. Transmitted of Waye and Tars Statements, filled for Forms Either of Innes 1 and 2 as greater than 250, you may be required to effect (see instructions). 19 If at least one in reported on line 2a, did the organization filled in the war of the extra war of 1000 and 2 and 2 as greater than 250, you may be required to effect (see instructions). 19 If If Yes, That is fled a Form 950-T for this year/17 Yes of the 2b, provide an exchanation in Schedule O. 20 If If Yes, That is fled a Form 950-T for this year/17 Yes of the 2b, provide an exchanation in Schedule O. 30 If Yes, That is fled a Form 950-T for this year/17 Yes of the 2b, provide an exchanation in Schedule O. 31 If Yes, The time that one of the foregrea country. 32 If Yes, Either In a more of the foregrea country. 33 If Yes, Either In a more of the foregrea country. 34 If Yes, The time that or yes of the preparation that it was one is a provided tax shelter transection? 35 If Yes, Either In a more of the foregreated in the investment of the preparation of the Comparation of the Yes of the Provided tax shelter transection? 35 If Yes, Either In a more of the foregranzation that it was one is a sent to a prohibited tax shelter transection? 36 If Yes, Either In a more of the programation that it was one is a party to a prohibited tax shelter transection? 36 If Yes, Either In a more of the programation that it was one is a sent to a sometime that such contributions of the grant and the contributions of the programation have a sent to the form of the contribution of the grant and the contribu	rm 9	990 (2017)			Page !
the Enter the number reported in Box 3 of Form 1096 Enter -0 - final applicable	Par	Statements Regarding Other IRS Filings and Tax Compliance			
14 Either the number reported off. Box 1 of Form 1006 Either -0- if not applicable. 15 Either the number of Forms W2-0 included in line 1 a Either -0- if not applicable. 16 Either the number of Forms W2-0 included in line 1 a Either -0- if not applicable. 17 Either the number of Either was applicable of Forms W2-0 included in line 1 a Either -0- if not applicable payments to wenders and reportable gaming. 18 Either the number of emoloyees reported on Form W2-0. Transmitted of Waye and Tars Statements, filled for Forms Either of Innes 1 and 2 as greater than 250, you may be required to effect (see instructions). 19 If at least one in reported on line 2a, did the organization filled in the war of the extra war of 1000 and 2 and 2 as greater than 250, you may be required to effect (see instructions). 19 If If Yes, That is fled a Form 950-T for this year/17 Yes of the 2b, provide an exchanation in Schedule O. 20 If If Yes, That is fled a Form 950-T for this year/17 Yes of the 2b, provide an exchanation in Schedule O. 30 If Yes, That is fled a Form 950-T for this year/17 Yes of the 2b, provide an exchanation in Schedule O. 31 If Yes, The time that one of the foregrea country. 32 If Yes, Either In a more of the foregrea country. 33 If Yes, Either In a more of the foregrea country. 34 If Yes, The time that or yes of the preparation that it was one is a provided tax shelter transection? 35 If Yes, Either In a more of the foregreated in the investment of the preparation of the Comparation of the Yes of the Provided tax shelter transection? 35 If Yes, Either In a more of the foregranzation that it was one is a sent to a prohibited tax shelter transection? 36 If Yes, Either In a more of the programation that it was one is a party to a prohibited tax shelter transection? 36 If Yes, Either In a more of the programation that it was one is a sent to a sometime that such contributions of the grant and the contributions of the programation have a sent to the form of the contribution of the grant and the contribu		Check if Schedule O contains a response or note to any line in this Part V			
be the response or Forms W-2G included in line 1a Sitzer-6- in first applicable Do the argumentation condy with abusing withholding ruse for reportable systems to vendors and reportable gamming (gashibug) within gash to rive within the post of t				Yes	No
Do the cryptocation cannot with backup withholding rules for reportable payments to vendors and reportable gaming (gamining) with masts to prax without some control of the		'' '' '' '' '' '' '' '' '' '' '' '' ''	1		
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b If a least one is reported on hine 22, did the original stort file all required federal employment bas returns? Note: if the use of lines 1 and 45 ag repear than 130, you may be required to e-file (see instructions) 3a Did the originatation have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the origination 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)? 4b At any time during the calendar year, did the origination 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 accounts)? 5c Was the originization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the originization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the originization of profits of the profi		Tax Statements, filed for the calendar year ending with or within the year covered by			
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b. If Fives,** has it field a form 990-T for the year/off**/%0" to fine 3b, provide an esplanation in Schedule 0. 3b A Rany time during the calendar year, and the organization have an interest in, or a significant or other authority over, a financial account; in a foreign country youth as a bank account, securities account, or other financial accounts (FBAR) b. If Fives,** enter the name of the foreign country ▶ 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c If Fives,** to line 5a or 5b, did the organization file form 8886-T? 6c Did any taxable party notify the organization file form 8886-T? 6d Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solice any contributions and receive not tax deductible as chartable contributions. b. If Fives,** did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible. c. Organizations that may receive deductible contributions under section 170(c). D. If the organization receive a symmetric mexices of 275 made party as a contribution and partly for goods and service. 7b Did the organization one of the value of the goods or services provided? 7c Did the organization one of the value of the goods or services provided? 7d If Pives,** indicate the number of Forms \$282 filed during the year. c. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization receive any funds, directly or indirectly, on a personal benefit contract? 7e Did the organization receive any funds, directly or indirectly, on a personal benefit contract? 7e Did the organization received a contribution of cars, beats, arribines, or other vehicles, did the organization file a Form 10 file partly year. 7e			20	163	
4.4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority view, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b IF Year, enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5.3 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5.4 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5.5 № 5.6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization for solicitation and party to a prohibited tax shelter transaction? 5.	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization as party to a prohibited tax shelter transaction? 5b No No If "Yes," to In E Sa or 5b, did the organization file Form 6886-17 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? 5c Organizations that may receive deductible contributions under section 170(c). 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization notify the done of the value of the goods or services provided? 9 Dif "Yes," did the organization notify the done of the value of the goods or services provided to the payor? 10 Did the organization notify the done of the value of the goods or services provided? 10 Did the organization of the organization of graph that the goods or services provided? 11 Did the organization of the property for which it was required to file Form 8282? 12 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 13 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1099-0. 14 Did the organizations maintaining donor advised funds. 15 Did a donor avvised fund maintaining donor advised funds. 16 Did the sponsoring organizations maintaining donor advised funds. 17 Did by the sponsoring organization make any taxeble distributions under section 4966? 15 Poss process receipts, included on Form 900 Part VIII, line 12. 16 Gross income from members or shareholders. 16 Did the sponsoring organizations. Enter 17 Section 501(c)(2) organizations. Enter 18 Section 501(c)(2) organizations. Enter 19 Gross income from other sources (10 not net amounts due or payor the			4a		No
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 3 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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 b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	,	against amounts due or received from them)			
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					
					No
Form 990 (20	D	if ites, has it filed a Form 720 to report these payments/If "No," provide an explanation in Schedule O		orm 00	0 (201

orm	990 (2017)			Page (
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions	ı "No" respoi	nse to li	_
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Se	ection A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year	15	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	15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any oth officer, director, trustee, or key employee?	ner 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervol of officers, directors or trustees, or key employees to a management company or other person? .	/ision 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 nembers of the governing body?	nore 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?	r 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea the following	r by		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code	٠ ١	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	-		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing form?	the 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	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	-		
	conflicts?	12b	Yes	
	Schedule O how this was done	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 independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	nt		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
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
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exert status with respect to such arrangements?			
		16b		
	ection 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 of available for public inspection. Indicate how you made these available. Check all that apply	nly)		
19	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 interes	t		
20	policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records			
	►MATT LEWIS 221 S IRVING ST SAN ANGELO, TX 76903 (325) 947-7071			- (221

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

- 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"

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

- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- 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 persons in the following order individual trus compensated employees, and former such persoi		rs, ınstı	itutioi	nal t	rust	ees, c	ffice	ers, key employees	, highest	
Check this box if neither the organization no		ganızat	ion c	omp	ens	ated a	ny c	current officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position than on	on (do one bo	(C) o no ox, u n of or/t	t chunles	eck mess pers	ore son	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JEFFERY BOZEMAN	2 00									
BOARD MEMBER		X						0	0	0
(2) BRADY JOHNSON	2 00							0	0	0
BOARD MEMBER		Х						l o	U	0
(3) JON BAILEY	2 00	X						0	0	0
BOARD MEMBER		^						0	0	
(4) CAMILLE YALE BOARD MEMBER	2 00	X						0	0	0
(5) CARMEN DUSEK	2 00	.,		,,						
VICE CHAIRMAN		X		×				0	0	0
(6) FRED HERNANDEZ	2 00	Х		x				0	0	0
SECRETARY/TREASURER		^		_				0	0	0
(7) JAMES HUFFMAN BOARD MEMBER	2 00	X						0	0	0
(8) JANE RICHARDSON BOARD MEMBER	2 00	X						0	0	0
(9) JASON COX BOARD MEMBER	2 00	Х						0	0	0
(10) JAY BOYD BOARD MEMBER	2 00	Х						0	0	0
(11) JEFFREY MCCORMICK PAST CHAIRMAN	2 00	Х		х				0	0	0
(12) JIM RAYMOND BOARD MEMBER	2 00	Х						0	0	0
(13) GAYLA THORNTON BOARD MEMBER	2 00	х						0	0	0
(14) PATRICK SHANNON BOARD MEMBER	2 00	х						0	0	0
(15) SUSAN BROOKS CHAIRMAN	2 00	Х		x				0	0	0
(16) MATT LEWIS PRESIDENT & CEO	40 00			×				175,000	0	37,845
THEOLOGIA GEO										

(A)

Name and Title

compensation from the organization ▶ 0

Part VII

(F) Estimated amount of other

(E)

Reportable

Page 8

		hours per week (list any hours for related			n off tor/t	ficer	and a	3	fror organiz	ensation in the ation (W- 9-MISC)	compensation from related organizations (2/1099-MISC	i (W-	amount o compens from t	sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	9-11130)	2/1099-1130	.,	organizati relate organiza	ed
												\perp		
												+		
												1		
												\perp		
												+		
												\top		
С	Sub-Total						*			175,000	•	0		37,845
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos	e list	ed al	bove	e) who	o rec	eived moi	re than \$1	00,000			
3	Did the organization list any former line 1a? If "Yes," complete Schedule	,		ee, k	ey eı	mple	oyee,	or hı	ghest cor	npensated	employee on	3	Yes	No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of rep	ortable (n the	4	Yes	No
5	Did any person listed on line 1a recei services rendered to the organization								_	tion or ind	vidual for	5		No
S	ection B. Independent Contract	tors												
1	Complete this table for your five high from the organization Report compe											mpens	ation	
	Name	(A) and business addre	ess							Desc	(B) ription of services		(C Compen	

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

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

(C)
Position (do not check more

(B)

Average

(D) Reportable

Part \		II Statement of	Revenue						rage 3
				a respo	onse or note to any	line in this Part VIII			🗆
				·		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	12	a Federated campaig	ns	1a			revenue		512-514
nts nts		b Membership dues		1b	<u> </u>				
irai 10 u		c Fundraising events		1c					
S. G		d Related organizatio		1d	<u> </u>				
ig je		e Government grants (co			<u> </u>				
ributions, Gifts, Grants Other Similar Amounts				1e	Ì				
ie S	1	f All other contributions, and similar amounts n		1f	12,617,712				
but the	١.	above g Noncash contribution	ane included						
ËĢ	'	in lines 1a-1f \$		1,08	30,361				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1	lf		•	12,617,712			
					Business				
킱	2a								
نج	b			-					
Service Revenue	C	/							
<u> </u>	d	 		_					
S E	e			_					
Program	f	All other program se	rvice revenue						
å	g	Total.Add lines 2a-2f	f		>				
	3	Investment income (ii	ncluding divid	ends,	interest, and other				T
	9	sımılar amounts) .			•		1		5,190,711
		Income from investme				-			
	5	Royalties	(ı) Rea		(II) Personal	1			
	6a	Gross rents	(I) Rea	1	(II) Fersonal	\dashv			
				.50,655					
	b	Less rental expenses	1	.09,878					
		Rental income or		40,777		\dashv			
		(loss)							
	c	Net rental income o	<u> </u>	•		40,777	7		40,777
	- -	Gross amount	(ı) Securi	ties	(II) Other	4			
	/a	from sales of assets other	27,2	71,319					
		than inventory							
	b	Less cost or				+			
		other basis and sales expenses	25,0	05,033					
		Gain or (loss)		266,286					
		l Net gain or (loss) .			•	2,266,286	5		2,266,286
a,	8a	Gross income from for for the control of the contro		ents of					
Other Revenue		contributions reporte			ļ				
eve		See Part IV, line 18				4			
œ.		Less direct expense : Net income or (loss)		b sing ev	ents .				
the		Gross income from g			ents •	1			
δ		See Part IV, line 19			J				
	_			а		_			
		Less direct expense		b					
		: Net income or (loss) Gross sales of invent		activit	ies >	1			
		returns and allowand	ces						
				а					
	b	Less cost of goods s	sold	b					
ŀ	C	Net income or (loss) Miscellaneous		invent	Business Code				
	11	•aOTHER	Revenue		90009				8,820
		OITIEK]				
	ь								
	C	•							
						1	-		
	C								
						1	1		
		A All other revenue .							
		Total. Add lines 11a			•	8,820			
	12	! Total revenue. See	Instructions		<u> </u>	20,124,306	5	0	0 7,506,594
				_					Form 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all col	lumns All other orga	nızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
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	6,747,902	6,747,902	-	
2 Grants and other assistance to domestic individuals See Part IV, line 22	1,051,648	1,051,648		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	175,000	35,000	105,000	35,000
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	289,300	83,822	135,478	70,000
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	33,045	8,457	17,115	7,473
9 Other employee benefits	80,825	20,685	41,861	18,279
10 Payroll taxes	32,554	8,331	16,861	7,362
11 Fees for services (non-employees)				
a Management				
b Legal	5,813		5,813	
c Accounting	25,397		25,397	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	227,401		227,401	
q Other (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	44,302			44,302
13 Office expenses	13,434		13,434	
14 Information technology	84,779		84,779	
15 Royalties				
16 Occupancy	44,707		44,707	
17 Travel	16,841		16,841	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	24,567		24,567	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	57,650		57,650	
23 Insurance	8,035		8,035	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a BANK CHARGES	47,945		47,945	
b DUES AND MEMBERSHIPS	14,048		14,048	
с				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	9,025,193	7,955,845	886,932	182,416
26 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)			·	<u> </u>

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

End of year

(A)

Beginning of year

3,354,937

438.726

1,379,861

811.493

2.967.169

2.038.695

365.986

6.335

119,370,781

31.270.126

31,276,461

1.897.671

86.196.649

88,094,320

119.370.781

111.807.577

1

2 3

4

5

6

8 9

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

Page **11**

2,607,219

1,523,648

2,916,211

9.966.112

360.894

5,346 41,362

149,823,227

38.734.495

38,781,203

2.259.011

108.783.013

111,042,024

149.823.227

Form **990** (2017)

132.099.143

350,000

Check if Schedule O contains a response or note to any line in this Part IX .

Accounts receivable, net .

Part II of Schedule L

Inventories for sale or use .

b Less accumulated depreciation

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

1	Cash-non-interest-bearing	
2	Savings and temporary cash investments	

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)

voluntary employees' beneficiary organizations (see instructions) Complete

10a

10b

Pledges and grants receivable, net . . .

II of Schedule L

Notes and loans receivable, net . .

basis Complete Part VI of Schedule D

Intangible assets

Accounts payable and accrued expenses

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

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

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

key employees, highest compensated employees, and disqualified

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

Page **12**

Yes

Yes

Yes

2a

2b

2c

3a

3b

No

No

No

Form 990 (2017)

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	88
5	Net unrealized gains (losses) on investments	5	11
6	Donated services and use of facilities	6	
7	Investment expenses	7	

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

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

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Form 990 (2017)

Schedule O

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	6,796,585
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-6,308,620
10	Net assets or fund halances at end of year. Combine lines 3 through 9 (must equal Part X. line 33, column (B))	10	111 042 024

	Net assets or fund balances at en		_		_			 	 _			.042.02
			_		_			 	 _			
	-		,	•						 		<u> </u>
9	Other changes in net assets or fu	nd halar	nces (e	vnlain ir	Sche	dule O				9	-6	5.308.62
8	Prior period adjustments						 			 8	6	5,796,58
7	Investment expenses									7		

✓ Cash ☐ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Additional Data

Software ID:

Software Version:

EIN: 73-1634145

Name: SAN ANGELO AREA FOUNDATION

Form 990 (2017)

DIRECTORS APPROVAL OF SAID GRANTS

Form 990, Part III, Line 4a:

GRANTS TO VARIOUS QUALIFIED 501 (C)(3) ORGANIZATIONS, OR OTHER QUALIFIED ENTITIES LIKE GOVERNMENTAL ORGANIZATIONS, COLLEGES, UNIVERSITIES AND RELIGIOUS ENTITIES, FOR QUALIFIED CHARITABLE PURPOSES GRANTS ARE MADE FROM COMPONENT FUNDS WHICH ARE DESIGNATED PURPOSE FUNDS, DONOR-ADVISED FUNDS, FIELD OF INTEREST FUNDS AND UNRESTRICTED FUNDS, AND ARE BASED ON AN UNDERLYING GIFT AGREEMENT, WHICH REQUIRE THE BOARD OF

efil	e GR/	APHIC pri	nt - <u>DO N</u> O	T PROCESS	As Filed Data -			DLN: 93	3493199003388
SCI (For	HED m 990	ULE A		Public (Charity Statu	ion 501(c)(3) d	organization o	ort	2017
990I	EZ)				4947(a)(1) nonexe ▶ Attach to Form				
•		the Treasury	► Info	ormation abou	it Schedule A (Form	990 or 990-EZ ov/form990.) and its instru	ictions is at	Open to Public Inspection
Nam	e of th	ne Service ne organiza			<u>www.ns.g</u>	<u>00/10/11/990</u> .		Employer identific	<u> </u>
SAN A	NGELO	AREA FOUNDA	TION					73-1634145	
	rt I				us (All organization			See instructions.	
	rganız —		•		ent is (For lines 1 thro	3 ,	,		
1		A church, c	onvention of	churches, or as	sociation of churches	described in sec t	tion 170(b)(1)	(A)(i).	
2		A school de	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3		·	•	·	vice organization desc			•	
4		name, city,	and state _		ed in conjunction with				
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6			•	-	governmental unit de				
7	✓	_		mally receives (vi). (Complete	a substantıal part of ıt : Part II)	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desci	ibed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	ıts exempt fun unrelated busın	(1) more than 331/39 octions—subject to cer ess taxable income (learnplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	- '
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	i09(a)(1) or se d	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting o nt of the sup	rganızatıon sup porting organiza	ervised or controlled i ation vested in the sar				
C		Type III f	unctionally i		and C. supporting organizatio ions) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrate The organization	d. A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e			•	-	't IV, Sections A and ved a written determir	•		pe I, Type II, Type II	functionally
_		ıntegrated,	or Type III n	on-functionally	integrated supporting		.,		•
f g				lorganizations				_	_
		Name of support organization	orted	(ii) EIN	ipported organization((iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organic in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					,,	Yes	No		
Tota	l								l

supported organization

(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part										
III. If the organization fails to qualify under the tests listed below, please complete Part III.)										
Section A. Public Support										
Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total				

	III. If the organization fa	ails to qualify und	er the tests list	ed below, please	e complete Part	III.)	
S	ection A. Public Support						
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(6) 2014	(6) 2013	(d) 2010	(e) 2017	(1) Total
L	Gifts, grants, contributions, and						
	membership fees received (Do not	10,313,485	7,007,751	7,525,245	8,618,945	7,669,607	41,135,033
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
•	The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	10,313,485	7,007,751	7,525,245	8,618,945	7,669,607	41,135,033
-	The portion of total contributions by	10,313,403	7,007,731	7,323,243	0,010,545	7,003,007	41,133,033
•							
	each person (other than a governmental unit or publicly						
	supported organization) included on						13,479,033
	line 1 that exceeds 2% of the						13,479,032
	amount shown on line 11, column (f)						
5	Public support. Subtract line 5						27,656,000
	from line 4						27,636,000
S	ection B. Total Support						
	Calendar year	(a)2013	(b) 2014	(c)2015	(d) 2016	(e)2017	(f)Total
	(or fiscal year beginning in) ▶		` '				
7	Amounts from line 4	10,313,485	7,007,751	7,525,245	8,618,945	7,669,607	41,135,033
8	Gross income from interest,						
	dividends, payments received on	420,404	3,068,790	4,138,616	3,636,756	5,350,186	16,614,752
	securities loans, rents, royalties and	,	5,555,755	.,200,020	0,000,00	0,000,200	
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10							
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11							57,749,785
	10 Gross receipts from related activities,	etc (see instruction	ne)			142	
					_	12	
L3	First five years. If the Form 990 is for	-			•		
	check this box and stop here					<u> ▶ ∟</u>	
	ection C. Computation of Public						
14	Public support percentage for 2017 (III	ne 6, column (f) div	rided by line 11, co	olumn (f))		14	47 890 %
15	Public support percentage for 2016 Sc	hedule A, Part II, lı	ne 14			15	49 800 %
16a	33 1/3% support test—2017. If the	organization did n	ot check the box o	on line 13, and line	14 is 33 1/3% or	more, check this b	oox
	and stop here. The organization qual	ifies as a nublicly si	ipported organizat	tion			▶ ☑
ŀ	33 1/3% support test—2016. If th		1.		nd line 15 is 33 1/	3% or more, check	
-	box and stop here. The organization				/	,	▶ □
					12 162 or 16h	and line 14	P L
17a	10%-facts-and-circumstances test						
	is 10% or more, and if the organization in Part VI how the organization meets						
	<u>-</u>	the facts-and-circ	umstances test i	me organization q	uannes as a public	ciy supported	. —
	organization						ightharpoons
b	10%-facts-and-circumstances tes						
	15 is 10% or more, and if the organiz	zation meets the "fa	acts-and-circumsta	ances" test, check	this box and stop	here.	
	Explain in Part VI how the organization	on meets the "facts	-and-circumstance	es" test. The organ	iization qualifies a	s a publicly	

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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 Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	III section 303(a)(1) or (2)			
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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		

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				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,		
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	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes				
5a	old 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 irganizations 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			

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone o than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing				
	organization's supported organizations? If "Yes," provide detail in Part VI .				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a				
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)				

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

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

organization's organizing document?

10a

answer line 10b below

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

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"				
	complete Part I of Schedule L (Form 990 or 990-EZ)	8			
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as			i	

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

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,"

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

Pa	rt IV Supporting Organizations (continued)			-9
			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		
	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		
	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 or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
s	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 instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
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 supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more 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.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 Carryover from 2012 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.



efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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.

DLN: 93493199003388 OMB No 1545-0047

> Open to Public Inspection

(Form 990)

▶ Attach to Form 990.

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** SAN ANGELO AREA FOUNDATION 73-1634145 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 43 2 Aggregate value of contributions to (during year) 2,493,256 Aggregate value of grants from (during year) 1.950.700 Aggregate value at end of year 18,222,053 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes □ No. Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ✓ Yes □ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par		Organizations M	aintaining Col	lections of Art,	Historical T	reas	ures, or Oth	er Similar <i>I</i>	Assets (conti	nued)	
3		the organization's acq (check all that apply)	uisition, accessior	n, and other record	ls, check any of	the fo	ollowing that ar	e a significant	use of its coll	ection	
а		Public exhibition			d 🗌	Loar	n or exchange p	rograms			
b		Scholarly research			e 🗌	Othe	er				
c		Preservation for future	e generations								
4	Provide Part	de a description of the XIII	organızatıon's col	lections and explai	n how they furt	her th	ne organization's	s exempt purp	oose in		
5		ng the year, did the org is to be sold to raise fur							☐ Yes	□ N	o
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			orm 990, Parl	: IV,	ine 9, or repo	rted an amo	ount on Form	990,	Part
1a	Is the	e organization an agent ded on Form 990, Part	;, trustee, custodii X?	an or other interme	ediary for contr	ibutio	ns or other asse	ets not	☐ Yes	□ N	o
ь	If "Y∈	es," explain the arrange	ement in Part XIII	and complete the	following table				Amount		_
c		nning balance		'	J		1c				_
d	_	ions during the year					1d				_
е	Dıstrı	butions during the year	r				1e				_
f	Endın	ng balance					1f				_
2 a		he organization include	an amount on Fo	rm 990, Part X, lın	e 21, for escro	v or c	ustodial account	t liability?	☐ Yes	N	0
b	If "Ye	es," explain the arrange			<u>'</u>		<u> </u>				
Pa	rt V	Endowment Fun	ds. Complete ıf	the organization	n answered "Y	'es" o	n Form 990, l	Part IV, line	10.		
_	_			(a)Current year	(b)Prior yea		(c)Two years ba				rs back
	_	ning of year balance .		117,587,93			105,393,		3,736,213		303,648
		outions		12,617,711 25,773,68		7,345	7,525, -2,819,		2,027,457 3,341,121		814,485 108,474
		vestment earnings, gair			· ·				· · ·		
		or scholarships		7,799,55	5,39	0,986	6,136,	536 1	2,278,727	5,	530,339
е		expenditures for faciliting	es	-1,076,89		5,758	44,		39,315		40,963
f	Admını	istrative expenses .		1,335,52	1 1,23	2,863	1,105,		1,392,753		919,092
g	End of	year balance		147,921,15	8 117,58	7,937	102,812,	401 10	5,393,996	93,	736,213
2 a	Board	de the estimated perce d designated or quasi-e	-	ent year end baland 80 000 %	ce (line 1g, colu	ımn (a	a)) held as				
b		anent endowment 🟲									
С		porarily restricted endo		000 %							
_		percentages on lines 2a									
3а		here endowment funds nization by	not in the posses	sion of the organiz	ation that are r	ieia ai	na aaministerea	for the		Yes	No
	-	nrelated organizations							3a(i)		No
	(ii) r	elated organizations .							3a(ii)		No
ь 4		es" on 3a(II), are the re	-	·		۱۶۶			. 3b		
	rt VI	Land, Buildings,									
		Complete if the or			orm 990, Part	: IV,	ıne 11a. See	Form 990, P	art X, line 10).	
	Descri	iption of property	(a) Cost or oth (Investme		st or other basis ((other)	(c) Accumulate	ed depreciation	(d) Bo	ook valu	е
1a	Land				2	22,954	1				222,954
	Buildin					42,459		262,684	1	:	2,579,775
		nold improvements		-		,,,,,,,					,,,,,
		nent				.37,778	3	176,042	,		61,736
		nent		-		51,746		1,0,042	-		51,746
_			1	I .		,, 70	· 1		1		21,170

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

2,916,211

Part VII Investments—Other Securities. Complete if the	ne organization ansv	wered "Yes" on Form 9	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value	(c) Met	hod of valuation
(including name of security) (1) Financial derivatives		Cost or end-	of-year market value
(2) Closely-held equity interests			
(3) Other (A) HELD IN TRUST - LAND	1,732,057		С
(B) HELD IN TRUST - CASH	55,606		С
(C) LIMITED PARTNERSHIPS	257,735		C
(D) BENEFICIAL INT IN CHARITABLE REMAINDER TRUSTS	7,920,714		С
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	9,966,112		
Part VIII Investments—Program Related.	•		
Complete if the organization answered 'Yes' on F (a) Description of investment	orm 990, Part IV, II (b) Book value	1	hod of valuation
			of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization answered	▶ d 'Yes' on Form 990, Pa	 art IV, line 11d See Form	n 990, Part X, line 15
(1) (a) Description	n		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			. •
Part X Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	answered 'Yes' on Fo	orm 990, Part IV, line	11e or 11f.
1. (a) Description of liability	(b) E	look value	
(1) Federal income taxes			
PRESENT VALUE OF CHARITABLE LEAD ANNUITY TRUST AGENCY ENDOWMENTS		1,756,837 36,879,134	
DEFERRED COMPENSATION		98,524	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text o	▶ If the footnote to the o	38,734,495	Itements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 7			

Part XI

2

b

1

2

c

Schedule D (Form 990) 2017

Page 4

11,470,505 11,783,033

8,341,273

20,124,306

8,179,317

109,879

955,755

9.025.193

8,069,438

3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a						
b	Other (Describe in Part XIII)	4b		8,341,273			

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Add lines 4a and 4b . 4c

5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Other (Describe in Part XIII) d Add lines 2a through 2d . .

Donated services and use of facilities . . .

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

3

4 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 . . . b

5 Part XIII **Supplemental Information** Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Return Reference

See Additional Data Table

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Explanation

2a

2b

2c

2d

2a 2b

2c

2d

4a

4b

955.755

109,879

11,360,626

109.879

2e

4c 5

2e

3

Schedule D (Form 990) 2017

Page 5		Schedule D (Form 990) 2017 Part XIII Supplemental Info		
	ormation (continued)			
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

FIN: 73-1634145

Name: SAN ANGELO AREA FOUNDATION

PART V, LINE 4

Supplemental Information Return Reference Explanation

FOUNDATIO

AS A COMMUNITY FOUNDATION, WE PROVIDE DONORS WITH THE ABILITY TO ESTABLISH DESIGNATED PURP

R PASS-THROUGH FOR SPECIAL PROJECTS DEEMED CHARITABLE BY THE BOARD OF DIRECTORS

OSE FUNDS, FIELD OF INTEREST FUNDS, UN-RESTRICTED FUNDS AND DONOR-ADVISED FUNDS, UNDER A G IFT AGREEMENT WHILE EACH GIFT AGREEMENT IS UNIOUE TO EACH FUND. THE FOUNDATION UTILIZES A STANDARD GIFT AGREEMENT IN COMPLIANCE WITH THE NATIONAL STANDARDS FOR COMMUNITY

NS. SANCTIONED BY THE COUNCIL ON FOUNDATIONS THESE FUNDS CAN BE ENDOWED, OUASI-ENDOWED, O

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	IN ACCORDANCE WITH ASC 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, MANAGEMENT HAS EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UN CERTAIN TAX POSITIONS THAT REQUIRED ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE WITH A FEW EXCEPTIONS, THE FOUNDATION IS NO LONGER SUBJEC T TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2012

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES INCLUDED IN REVENUE ON FORM 990 109,879

S

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS FOR AGENCY ENDOWMENT FUND ON AUDIT PER SFAS 136 8,341,273

Sı

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES INCLUDED IN REVENUE ON FORM 990 109,879

Sı

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	DISTR & EXP FOR AGENCY ENDOWMENT FUNDS REPORTED ON AUDIT PER SFAS 136 955,755

Sı

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLI	N: 934931990	003388
Schedule I (Form 990) Department of the Treasury	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .						OMB No 1545-0047 2017 Open to Public Inspection		
Internal Revenue Service Name of the organization						Emplo	yer identific	ation number	
SAN ANGELO AREA FOUNDATI						73-16	34145		
	mation on Grants		*I	Ale a superferent all all all best	6- u. blob				
the selection criteria use Describe in Part IV the c	ed to award the grants organization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States			Do at TV land	✓ Yes	□ No
			ditional space is needed	ents. Complete if the o	rganızatıon answered "Yes	on Form 990,	Part IV, line	21, for any recip	ient
(a) Name and address of organization or government	(Þ) 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) Descri noncash as		(h) Purpose of or assistance	f grant
(1) See Addıtıonal Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
	, , , , -	-	s listed in the line 1 table				▶		148
For Paperwork Reduction Act No	otice, see the Instruction	ons for Form 990.		Cat No 50055	5P		Scho	edule I (Form 990) 2017

Schedule I (Form 990) 2017					Page 2
Part III Grants and Other Assistance to Part III can be duplicated if addition	Domestic Individua ional space is needed	als. Complete if the organ	nization answered "Yes'	on Form 990, Part IV, line 22	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS FOR AREA STUDENTS ATTENDING VARIOUS LOCAL COLLEGES AND UNIVERSITIES	1373 D	1,051,648			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
Part IV Supplemental Informati	.ion. Provide the info	ormation required in F	Part I, line 2; Part III	I, column (b); and any other ac	dditional information.
Return Reference Explanati	ion				

THE FOUNDATION REQUIRES GRANT RECIPIENTS OF DISCRETIONARY OR PROACTIVE GRANTS TO PROVIDE THEIR PLANS FOR EVALUATION AND IMPACT PRIOR TO ANY FUNDING IF A GRANT IS APPROVED, EACH EVALUATION AND MONITORING OF A GRANT IS AGREED UPON IN A GRANT AGREEMENT, WHICH PROVIDES FOR FOLLOW-UP SITE VISITS, REPORTS, DOCUMENTATION AND SUBSEQUENT EVALUATION TO ENSURE PROCEEDS FROM THE GRANT WHERE USED ACCORDING TO THE

Schedule I (Form 990) 2017

PART I, LINE 2

GRANT REQUEST

Additional Data

ADULT LITERACY COUNCIL

SAN ANGELO, TX 76902

707 NORTH US HWY 277 ELDORADO, TX 76936

PO BOX 2602

AIYM INC

Software ID: **Software Version: EIN:** 73-1634145 Name: SAN ANGELO AREA FOUNDATION

75-2195119

26-4408219

<u>Forn</u>

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government				accictance	other)	1

f	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuatior
		ıf applıcable	grant	cash	(book, FMV, appraisal,
				assistance	other)

41,571

10,000

(a) Harrie and dad coo or	(- /	(0) 1110 000000	(a) / o a o a o a o	(0) /	(1) Hourson or rainantion
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

501(C)(3)

501(C)(3)

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisa

rm 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	c Governments.
(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 non-cash assistance (h) Purpose of grant

or assistance

EDUCATION

RELIGIOUS

(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 or government other) assistance 75-1609328 501(C)(3) 129.891 ALCOHOL AND DRUG ABUSE HUMAN SERVICES COUNCIL FOR THE CONCHO VALLEY

3553 W HOUSTON HARTE EXPY SAN ANGELO, TX 76901 AMBLESIDE SCHOOL OF SAN 47-0869323 501(C)(3) 78.298

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

SAN ANGELO, TX 76903

EDUCATION ANGELO 511 W HARRIS AVE

(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 64-0607275 501(C)(3) 6.000 **THUMAN DEVELOPMENT** AMERICAN FAMILY

ASSOCIATION PO BOX 2440 TUPELO, MS 38803 75-1999991 501(C)(3) 37.761 EDUCATION

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

ANGELO CATHOLIC SCHOOL 2315 AM

SAN ANGELO, TX 76904

(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 ANGELO CIVIC THEATRE 75-0888979 501(C)(3) 16.888 CULTURAL ARTS

1936 SHERWOOD WAY SAN ANGELO, TX 76901		, , ,	,		
ANGELO STATE UNIVERSITY FOUNDATION	75-1585285	501(C)(3)	149,758		EDUCATION

ASU STATION 11009

SAN ANGELO, TX 76909

(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, organization grant cash non-cash assistance or assistance or government other) assistance 83-0507951 501(C)(3) 13.585 EDUCATION ANGELO STATE UNIVERSITY MEAT & FOOD SCIENCE ASSOCIATION 2601 W AVENUE N

RELIGIOUS

14,000

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

501(C)(3)

SAN ANGELO, TX 76909
APOLOGETICS PRESS

230 LANDMARK DRIVE MONTGOMERY, AL 36117

(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 87-0777592 501(C)(3) 16.814 CULTURAL ARTS ART IN UNCOMMON PLACES 2612 CIRCLE J STREET SAN ANGELO, TX 76901

EDUCATION

5.556

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

501(C)(3)

SAN ANGELO, TX 76901
ASU DEPT OF NATURAL &
BIOLOGICAL SCIENCES

ASU STATION 11023 SAN ANGELO, TX 76909

(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, organization grant cash non-cash assistance or assistance or government other) assistance BALLET SAN ANGELO 75-1895746 501(C)(3) 17.550 CULTURAL ARTS PO BOX 5092

PO BOX 5092
SAN ANGELO, TX 76902

BALLINGER MEMORIAL 27-5559128 501(C)(3) 23,596

HEALTH
HOSPITAL DISTRICT HEALTH
FOUNDATION
PO BOX 617

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

BALLINGER, TX 76821

(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 30-0041245 501(C)(3) 65.000 BAMBERGER RANCH PRESERVEL COMMUNITY 2341 BLUE RIDGE DR DEVELOPMENT 74-2315743 501(C)(3) 9,500 RELIGIOUS

JOHNSON CITY, TX 78636
BANDERA UNITED METHOD CHURCH
PO BOX 128

BANDERA, TX 78003

(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 75-2755400 501(C)(3) 15.594 RELIGIOUS BAPTIST MEMORIAL CENTER PO BOX 5661

RELIGIOUS

30,000

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

501(C)(3)

SAN ANGELO, TX 76902 BCS CHURCH OF CHRIST

COLLEGE STATION, TX 77845

11914 SH 30

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

DEVELOPMENT

BE THEATRE 19 WEST BEAUGARD SAN ANGELO, TX 76903	47-1890997	501(C)(3)	17,180		CULTURAL ARTS
BLUEBONNET CASA OF MASON	30-0117462	501(C)(3)	25,000		COMMUNITY

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

PO BOX 130 MASON, TX 76856

(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, organization grant cash non-cash assistance or assistance or government other) assistance BOYS AND GIRLS CLUB OF 26-3174725 501(C)(3) 26 619 YOUTH DEVELOPMENT

MENARD PO BOX 1043 MENARD, TX 76859					
BOYS AND GIRLS CLUB OF	75-1216481	501(C)(3)	39,944		YOUTH DEVELOPMENT

SAN ANGELO, TX 76902

SAN ANGELO INC PO BOX 107

(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 61-1429244 501(C)(3) 17.000 CAMP IDA CHRISTIAN YOUTH YOUTH DEVELOPMENT

CASSIE'S PLACE	47-5533888	501(C)(3)	14,243		HUMAN DEVELOPMENT
50 CR 1207 MAUD, TX 75567					
ENCAMPMENT					

622 ASHFORD DRIVE SAN ANGELO, TX 76901

(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 CATHEDRAL OF THE SACRED 75-1086083 501(C)(3) 7.500 RELIGIOUS HEART

20 E BEAUREGARD AVENUE SAN ANGELO, TX 76903					
CENTRAL TEXAS OPPORTUNITIES INC 118 W PECAN STREET SUITE 405	75-1230663	501(C)(3)	10,000		HUMAN DEVELOPMENT

COLEMAN, TX 76834

(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 CHILDREN'S ADVOCACY 75-2401001 501(C)(3) 57.107 COMMUNITY PMENT

CENTER OF TOM GREEN COUNTY INC PO BOX 5195 SAN ANGELO, TX 76902			,		DEVELOPMENT
CHILDREN'S BED PROJECT	75-1170261	501(C)(3)	11,717		YOUTH DEVELOPMENT

4522 COLLEGE HILLS BLVD SAN ANGELO, TX 76904

(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, organization grant cash non-cash assistance or assistance or government other) assistance 73-1634145 501(C)(3) 6.682 EDUCATION CHRISTOVAL EDUCATION FUND 20065 3RD STREET

PUBLIC SAFETY

10.929

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

501(C)(3)

CHRISTOVAL, TX 76935

CHRISTOVAL VOLUNTEER FIRE
DEPARTMENT

CHRISTOVAL, TX 76935

PO BOX 193

(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 CITY OF MENARD 75-6000604 501(C)(3) 50,000 COMMUNITY MENT

108 W SAN SABA AVENUE MENARD, TX 76859					DEVELOPMENT
CITY OF SAN ANGELO PARKS DEPARTMENT	75-6000659	501(C)(3)	27,426		COMMUNITY DEVELOPMENT

702 S CHADBOURNE STREET SAN ANGELO, TX 76903

(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 23-7102643 501(C)(3) 61.725 CONCHO VALLEY HOME FOR YOUTH DEVELOPMENT

GIRLS INC 412 PRFUSSER SAN ANGELO, TX 76903

CONCHO VALLEY PAWS 75-6030459 501(C)(3) 27.225 COMMUNITY 4001 SUNSET DR DEVELOPMENT

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

SAN ANGELO, TX 76904

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-1897032 501(C)(3) 334,440 CONCHO VALLEY REGIONAL HUMAN SERVICES FOOD BANK OF TEXAS INC

BOX 1207 SAN ANGELO, TX 76902 CONCHO VALLEY TURNING 32-0292036 501(C)(3) 35.843 HUMAN SERVICES

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

POINT PO BOX 60072

SAN ANGELO, TX 76906

(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 CORNERSTONE CHRISTIAN 75-2123230 E01(C)(3) 455 726 FDUCATION

1502 N JEFFERSON SAN ANGELO, TX 76901					
SCHOOL	75 2125250	301(0)(3)	+33,720		LDOCATI

WALL, TX 76957

CRITTER SHACK RESCUE 41-2090330 21.048 COMMUNITY 501(C)(3) PO BOX 192 DEVELOPMENT

(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 65-1156061 501(C)(3) 7.500 CROSS CATHOLIC OUTREACH RELIGIOUS 2700 N MILITARY TRAIL BOCA RATON, FL 33427

CRU GLOBAL INC 45-3697029 501(C)(3) 5,000 RELIGIOUS 100 LAKE HART DRIVE STE 3500

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

ORLANDO, FL 32832

(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, organization grant cash non-cash assistance or assistance or government other) assistance 27-1394708 501(C)(3) 5.000 DR JAMES DOBSON'S FAMILY THUMAN DEVELOPMENT TALK 540 FLKTON DRIVE STE 201

EDUCATION

5,000

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

501(C)(3)

COLORADO SPRINGS, CO

ELDORADO HIGH SCHOOL

205 W FIELDS AVENUE ELDORADO, TX 76936

75-6001370

80907

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-0863849 501(C)(3) 5.000 RELIGIOUS EMMANUEL EPISCOPAL CHURCH

3 S RANDOLPH ST SAN ANGELO, TX 76903 86-0439625 501(C)(3) 275,000 HUMAN SERVICES

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

FAMILY MATTERS SUITE A-120

SCOTTSDALE, AZ 85254

(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 FELLOWSHIP OF CHRISTIAN 44-0610626 501(C)(3) 6.552 YOUTH DEVELOPMENT

ATHLETES PO BOX 3711 SAN ANGELO, TX 76902			·		
FIRST BAPTIST CHURCH	75-0808781	501(C)(3)	11,250		RELIGIOUS

PO BOX 2138

SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-0926762 501(C)(3) 5.000 RELIGIOUS FIRST BAPTIST CHURCH OF DALLAS 1707 SAN JACINTO STREET

DALLAS, TX 75201

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

MERTZON, TX 76941

FIRST CHRISTIAN CHURCH 75-1947631 501(C)(3) 12.659 RELIGIOUS PO BOX 791

(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, organization grant cash non-cash assistance or assistance or government other) assistance FIRST PRESBYTERIAN CHURCH 75-0904033 501(C)(3) 193.000 RELIGIOUS 32 NORTH IRVING

32 NORTH IRVING
SAN ANGELO, TX 76903

FOREST HILL CHURCH OF 62-0722864 501(C)(3) 9,000
CHRIST
3950 FOREST HILL IRENE
ROAD

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

MEMPHIS, TN 38125

(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 75-2804188 501(C)(3) 18.299 HISTORIC FORT CHADBOURNE PRESERVATION

HISTORIC

PRESERVATION

25.839

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

501(C)(3)

FOUNDATION
651 FORT CHADBOURNE RD
BRONTE, TX 76933
FORT CONCHO FOUNDATION

SAN ANGELO, TX 76903

630 S OAKES ST

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-6000659 501(C)(3) 5.383 HISTORIC FORT CONCHO NATIONAL HISTORIC LANDMARK PRESERVATION 630 S OAKES ST

COMMUNITY

DEVELOPMENT

5.000

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

501(C)(3)

630 S OAKES ST SAN ANGELO, TX 76903 FRIENDS OF THE IRION COUNTY LIBRARY

PO BOX 654 MERTZON, TX 76941

(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, organization grant cash non-cash assistance or assistance or government other) assistance GIRL SCOUTS CENTRAL TEXAS 75-1162671 501(C)(3) 5.700 YOUTH DEVELOPMENT COUNCIL 304 W AVE A

RELIGIOUS

5.200

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

501(C)(3)

SAN ANGELO, TX 76903
GLEN MEADOWS BAPTIST

6002 KNICKERBOCKER RD SAN ANGELO, TX 76904

CHURCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-1867441 501(C)(3) 10.022 GOODWILL WEST TEXAS HUMAN SERVICES 2200 N 1ST STREET

RELIGIOUS

14,000

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

501(C)(3)

ABILENE, TX 79603
GOSPEL BROADCASTING
NETWORK

901 N MAIN STREET SAN ANGELO, TX 76903

(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 or government other) assistance 75-2255391 501(C)(3) 16.976 PUBLIC SAFETY GRAPE CREEK VOLUNTEER FIRE DEPARTMENT PO BOX 1021 SAN ANGELO, TX 76902 COMMUNITY

PO BOX 1021
SAN ANGELO, TX 76902

GREATER HOUSTON 23-7160400 501(C)(3) 20,022

COMMUNITY FOUNDATION HURRICANE HARVEY
5120 WOODWAY DRIVE STE
6000

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

HOUSTON, TX 77056

(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 LIADITAT FOR LUMANITY 7E 2E220E0 E01/C1/21 15 212 COMMUNITY

401 N CHADBOURNE STREET SAN ANGELO, TX 76903	75-2532656	501(C)(3)	15,213		DEVELOPMENT
HALO HOUSE FOUNDATION 4010 BLUE BONNET BLVD STE	27-1220705	501(C)(3)	6,000		COMMUNITY DEVELOPMENT

110 HOUSTON, TX 77025

(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 HANDLEY CHURCH OF CHRIST 75-1537924 501(C)(3) 5,000 RELIGIOUS

3029 HANDLEY DRIVE FORT WORTH, TX 76112					
HEALTHY FAMILIES SAN ANGELO	75-2012206	501(C)(3)	10,068		HUMAN SERVICES

200 S MAGDALEN ST SAN ANGELO, TX 76903

(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, organization grant cash non-cash assistance or assistance or government other) assistance HEART OF TEXAS BIBLE CAMP 74-2290616 501(C)(3) 15.000 RELIGIOUS INC

COMMUNITY

DEVELOPMENT

21.841

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

501(C)(3)

PO BOX 830
BRADY, TX 76825
HERITAGE PARK
36 F TWOHIG AVENUE STE

SAN ANGELO, TX 76903

110

(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

HOLY ANGELS CHURCH 2202 RUTGERS STREET SAN ANGELO, TX 76904	75-1086083	501(C)(3)	20,000		RELIGIOUS
HOUSE OF FAITH-SAN ANGELO	74-2694406	501(C)(3)	116,146		RELIGIOUS

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

321 MONTECITO DR SAN ANGELO, TX 76903

(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 or government other) assistance TOD DDIDOEC 75 4504000 E04/61/31 0 550 HUMAN SERVICES

PO BOX 5018	/5-1584080	501(C)(3)	9,553		HUMAN SERVICES
SAN ANGELO, TX 76902					
INDIAN CREEK YOUTH CAMP	63-6066849	501(C)(3)	10,000		YOUTH DEVELOPMENT

7855 PLEASANTFIELD ROAD OAKMAN, AL 35579

(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 75-2066135 501(C)(3) 6.168 COMMUNITY JAMES PHILLIPS WILLIAMS MEMORIAL FOUNDATION DEVELOPMENT

MEMORIAL FOUNDATION
403 W WASHINGTON DRIVE
SAN ANGELO, TX 76903

JUNIOR LEAGUE OF SAN 75-0878540 501(C)(3) 8,674
ANGELO INC.

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

PO BOX 3033

SAN ANGELO, TX 76902

(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 GIOUS

EDUCATION

KATY CHURCH OF CHRIST PO BOX 854	74-2028467	501(C)(3)	40,000		RELIG
KATY, TX 77492					

LAMAR ELEMENTARY SCHOOL 75-6002404 501(C)(3) 9,283

3444 SCHOOLHOUSE ROAD SAN ANGELO, TX 76904

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 (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance LAURA W BUSH INSTITUTE 75-6002403 501(C)(3) 36.000 EDUCATION

5301 KNICKERBOCKER RD STE 200 SAN ANGELO, TX 76904		,,,,,	·		
LAURA W BUSH INSTITUTE FOR WOMEN'S HEALTH 5301 KNICKERBOCKER RD STE	75-1585285	501(C)(3)	5,628		EDUCATION

200 SAN ANGELO, TX 76904

(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 LIFE OUTREACH 75-2684727 501(C)(3) 11.280 RELIGIOUS

INTERNATIONAL PO BOX 982000 FORT WORTH, TX 761828000					
MEALS FOR THE ELDERLY	51-0159134	501(C)(3)	68,865		HUMAN SERVICES

310 E HOUSTON HARTE SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-6377159 501(C)(3) 7.500 MENARD PIONEER CEMETERY COMMUNITY DEVELOPMENT ---

FUND					DEVELOPMENT
PO BOX 981					
MENARD, TX 76859					
MENARD PUBLIC LIBRARY	75-6049150	501(C)(3)	7,500		HUMAN SERVICES

MENARD PUBLIC LIBRARY /5-6049150 501(C)(3)| 7,5001 PO BOX 404

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

MENARD, TX 76859

(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 MOSAIC 11-3666999 501(C)(3) 21.885 COMMUNITY 5191 S BRYANT BLVD DEVELOPMENT SAN ANGELO, TX 76904

RELIGIOUS

40,295

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

501(C)(3)

MT CARMEL HERMITAGE

CHRISTOVAL, TX 76935

PO BOX 337

(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 MT 1ULIET CHURCH OF CHRIST 62-0905151 501(C)(3) 10.000 RELIGIOUS 1940 N MT JULIET RD

RELIGIOUS

6,000

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

501(C)(3)

MT JULIET, TN 37122

NEW LIFE MINISTRIES

LAKE FOREST, CA 926091029

PO BOX 1029

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-1227807 501(C)(3) 6.863 OUMC LOAVES & FISHES RELIGIOUS PO BOX 983 OZONA, TX 76943 OUR LADY OF GRACE 75-1086360 501(C)(3) 5,000 RELIGIOUS

MONASTERY PO BOX 337

CHRISTOVAL, TX 76935

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-1897769 501(C)(3) 34.635 COMMUNITY OZONA COMMUNITY CENTER INC DEVELOPMENT PO BOX 471

PUBLIC SAFETY

16.719

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

501(C)(3)

OZONA, TX 76943
PECAN CREEK VOLUNTEER

FIRE DEPARTMENT INC 12076 PECAN CREEK LANE SAN ANGELO, TX 76904

(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, organization grant cash non-cash assistance or assistance or government other) assistance 47-2215544 501(C)(3) 10.000 COMMUNITY PERMIAN BASIS HONOR FLIGHT DEVELOPMENT 810 N DIXIF BLVD STF 109

HUMAN SERVICES

33.957

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

501(C)(3)

ODESSA, TX 79761

THE CONCHO VALLEY 2525 SHERWOOD WAY SAN ANGELO, TX 76901

PREGNANCY HELP CENTER OF

(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 47-4499350 501(C)(3) 10,000 COMMUNITY PRESERVATION OF SOUTH

WEST TEXAS WILDLIFE PO BOX 264 ROCKSPRINGS, TX 78880					DEVELOPMENT
PROMISES FOR FAMILIES FOUNDATION	27-2915427	501(C)(3)	14,359		HUMAN SERVICES

133 WEST CONCHO AVE STE 210

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

SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-2275195 501(C)(3) 13.641 CULTURAL ARTS RAILWAY MUSEUM OF SAN ANGELO 703 S CHADBOURNE STREET

EDUCATION

5.000

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

501(C)(3)

SAN ANGELO, TX 76903 RED RAIDER CLUB

PO BOX 456 LUBBOCK, TX 79408

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-2950303 501(C)(3) 51.131 RUST STREET MINISTRIES RELIGIOUS 803 RUST ST 75-6027934 501(C)(3) 32.570 RELIGIOUS

SAN ANGELO, TX 76903 SAINT JOHNS EPISCOPAL CHURCH PO BOX 1100

SONORA, TX 76950

(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

58-1437002 501(C)(3) 9.500 SAMARITIAN'S PURSE HUMAN SERVICES 235 NE LOOP 820 STE 202 HURST, TX 76053

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

119 W 1ST ST

SAN ANGELO, TX 76903

SAN ANGELO ART CLUB 75-6037393 501(C)(3) 10,213 CULTURAL ARTS

(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, organization grant cash non-cash assistance or assistance or government other) assistance 27-1832775 501(C)(3) 7.369 CULTURAL ARTS SAN ANGELO BROADWAY ACADEMY YOUTH THEATER 10 N TAYLOR ST

10 N TAYLOR ST
SAN ANGELO, TX 76901

SAN ANGELO CHRISTIAN 20-0216446 501(C)(3) 54,232

EDUCATION

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

518 COUNTRY CLUB RD SAN ANGELO, TX 76904

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-0968319 501(C)(3) 14.419 YOUTH DEVELOPMENT SAN ANGELO EARLY CHILDHOOD CENTER

619 JULIAN STREET SAN ANGELO, TX 76903 75-2532455 501(C)(3) 11.956 SAN ANGELO LIONS

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

SAN ANGELO, TX 76903

COMMUNITY CHARITIES DEVELOPMENT 27 W CONCHO

(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, organization grant cash non-cash assistance or assistance or government other) assistance SAN ANGELO MUSEUM OF 75-1776765 501(C)(3) 212.940 CULTURAL ARTS FINE ARTS 1 LOVE STREET

CULTURAL ARTS

118.611

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

501(C)(3)

SAN ANGELO, TX 76903
SAN ANGELO PERFORMING

ARTS COALITION INC 221 S IRVING ST SAN ANGELO, TX 76903

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-2184551 501(C)(3) 8.277 EDUCATION SAN ANGELO SCHOOLS FOUNDATION

CULTURAL ARTS

12.708

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

FOUNDATION
2129 VALLEYVIEW DRIVE
SAN ANGELO, TX 76904

SAN ANGELO STOCK SHOW 75-0871755 501(C)(3)

AND RODEO ASSOCIATION 200 W 43RD STREET SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-6003857 501(C)(3) 22.459 CULTURAL ARTS SAN ANGELO SYMPHONY

PO BOX 5922 SAN ANGELO, TX 76902					
SAN ANTONIO 1000 CANCER GENOME PROJECT	46-5020113	501(C)(3)	10,000		HUMAN SERVICES

601 CONTOUR DR

SAN ANTONIO, TX 78212

(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 83-0371223 501(C)(3) 11.034 SANTA RITA ELEMENTARY EDUCATION 615 S MADISON STREET SAN ANGELO, TX 76901 75-2939181 501(C)(3) 6.389 RELIGIOUS

SET FREE MINISTRIES -JUSTICE HOME

SAN ANGELO, TX 76902

PO BOX 2705

(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 organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 75-2559845 501(C)(3) 14.009 SHANNON MEDICAL CENTER -HUMAN SERVICES CHILDREN'S MIRACLE

NETWORK 120 E HARRIS AVE SAN ANGELO, TX 76903					
SIERRA VISTA UNITED METHODIST CHURCH	75-1170261	501(C)(3)	12,000		RELIGIOUS

4522 COLLEGE HILLS BLVD SAN ANGELO, TX 76904

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-6002465 501(C)(3) 54.849 EDUCATION SONORA INDEPENDENT SCHOOL DISTRICT 807 S CONCHO AVENUE SONORA, TX 76950

HUMAN SERVICES

7.899

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

501(C)(3)

SONRISAS THERAPEUTIC

RIDING INC 5185 S BRYANT LANE SAN ANGELO, TX 76904

(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, organization grant cash non-cash assistance or assistance or government other) assistance 78-0224428 501(C)(3) 15.000 RELIGIOUS SOUTHAVEN CHURCH OF CHRIST 1483 BROOKHAVEN DRIVE

HUMAN SERVICES

8.442

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

501(C)(3)

SOUTHAVEN, MS 38671

SOUTHERN CAREERS

INSTITUTE 6963 NW LOOP 410 SAN ANTONIO, TX 78238

(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, organization grant cash non-cash assistance or assistance or government other) assistance 74-2257048 501(C)(3) 6.000 RELIGIOUS SOUTHWEST SCHOOL OF BIBLE STUDIES

8900 MANCHACA ROAD AUSTIN.TX 78748 SPECIAL OLYMPICS TEXAS INC 74-1998367 501(C)(3) 5.000

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

AUSTIN, TX 78754

HUMAN SERVICES - AREA 14 BIG COUNTRY 1804 RUTHERFORD LANE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-6027934 501(C)(3) 7.913 ST JOHN'S EPISCOPAL RELIGIOUS CHURCH PO BOX 1100

RELIGIOUS

28.190

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

501(C)(3)

SONORA, TX 76950

1100 W PARSONAGE ST WINTERS, TX 79567

ST JOHN'S LUTHERAN CHURCH

(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, organization grant cash non-cash assistance or assistance or government other) assistance 62-0646012 501(C)(3) 5.000 ST JUDE CHILDREN'S HUMAN SERVICES RESEARCH HOSPITAL

RESEARCH HOSPITAL
501 ST JUDE PLACE
MEMPHIS, TN 38105

STERLING CITY INDEPENDENT 75-6002522 501(C)(3) 15,205
SCHOOL DISTRICT

EDUCATION

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

BOX 786

STERLING CITY, TX 76951

(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, organization grant cash non-cash assistance or assistance or government other) assistance 04-3642997 501(C)(3) 77.056 SUTTON COUNTY HEALTH HUMAN SERVICES

FOUNDATION PO BOX 18 SONORA, TX 76950 TEXAS A&M UNIVERSITY 12TH 74-1185725 501(C)(3) 26.500 EDUCATION MAN FOUNDATION

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

PO DRAWER I -1

COLLEGE STATION, TX 77844

(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, organization grant cash non-cash assistance or assistance or government other) assistance 74-2245072 501(C)(3) 10.000 EDUCATION TEXAS A&M UNIVERSITY FOUND ATTOM

401 GEORGE BUSH DRIVE COLLEGE STATION, TX 77840					
TEXAS DISTRICT OF THE LUTHERAN CHURCH - MISSOURI SYNOD	74-1189681	501(C)(3)	25,000		RELIGIOUS

7900 US-290

AUSTIN, TX 78724

(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 TEXAS LEADERSHIP CHARTER 75-2890597 501(C)(3) 13,104 EDUCATION

5687 MELROSE AVENUE SAN ANGELO, TX 76901					
TEXAS SOUTHWEST COUNCIL - BOY SCOUTS OF AMERICA 104 VETERANS MEMORIAL	75-0800617	501(C)(3)	54,199		YOUTH DEVELOPMENT

DRIVE

SAN ANGELO, TX 76902

(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

THE ARC OF SAN ANGELO INC PO BOX 1922 SAN ANGELO, TX 76902	75-1242148	501(C)(3)	13,837		HUMAN SERVICES
THE CHAPIN SCHOOL	13-1635257	501(C)(3)	8,333		EDUCATION

THE CHAPIN SCHOOL 13-1635257 501(C)(3) 8,3331 100 E END AVE

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

NEW YORK, NY 10028

(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 74-1117340 501(C)(3) 28.189 THE GOOD SAMARITAN HUMAN SERVICES CENTER OF SAN ANTONIO

TEXAS 1600 SALTILLO ST SAN ANTONIO, TX 78207					
THE HOSPICE OF SAN ANGELO	75-2129019	501(C)(3)	10,965		HUMAN SER

SAN ANGELO, TX 76906

ERVICES FOUNDATION PO BOX 62211

(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 90-0337669 501(C)(3) 269.869 THE SALVATION ARMY HUMAN SERVICES

PO BOX 589 SAN ANGELO, TX 76902 THE WORKING RANCH 75-2929140 501(C)(3) 10,000 COMMUNITY COWBOYS FOUNDATION I DEVELOPMENT

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

PO BOX 7765 AMARILLO, TX 79114

(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 THROUGH GOD COMES 75-2778164 501(C)(3) 5 510 RELIGIOUS

SAM ANGLES, TA 76362	
PO BOX 3126 SAN ANGELO, TX 76902	
JUSTICE MINISTRY	CELIGIOOD

SAN ANGELO, TX 76903

TOM GREEN COUNTY LIBRARY 75-6001184 501(C)(3) 118,648 ICOMMUNITY 113 W BEAUREGARD DEVELOPMENT

(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, organization grant cash non-cash assistance or assistance or government other) assistance 75-6003634 501(C)(3) 40.111 RELIGIOUS TRINITY LUTHERAN CHURCH 3536 YMCA DRIVE SAN ANGELO, TX 76904

YOUTH DEVELOPMENT

16.276

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

501(C)(3)

TRINITY LUTHERAN SCHOOL

AND EARLY CHILDHOOD

3516 LUTHERAN WAY SAN ANGELO, TX 76904

CENTER

(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, organization grant cash non-cash assistance or assistance or government other) assistance UNITED WAY OF THE CONCHO 75-0859662 501(C)(3) 118.101 HUMAN SERVICES VALLEY PO BOX 3710 SAN ANGELO, TX 76902

RELIGIOUS

8.801

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

501(C)(3)

UNITY CHURCH OF SAN

5237 S BRYANT BLVD SAN ANGELO, TX 76904

ANGELO

(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, organization grant cash non-cash assistance or assistance or government other) assistance 56-2563807 501(C)(3) 30.472 RELIGIOUS WESLEY UMC DAILY BREAD PROGRAM RELIGIOUS

301 W 18TH STREET SAN ANGELO, TX 76903 WEST MAIN CHURCH OF 64-0689216 501(C)(3) 5.000 CHRIST

2460 WEST MAIN TUPELO, MS 38801

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 (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-0954831 501(C)(3) 258.900 WEST TEXAS BOYS RANCH YOUTH DEVELOPMENT 10223 BOYS RANCH ROAD

10223 BOYS RANCH ROAD
SAN ANGELO, TX 76904

WEST TEXAS COUNSELING & 75-1561599 501(C)(3) 82,324

GUIDANCE

YOUTH DEVELOPMENT

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

242 N MAGDALEN ST SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-0868320 501(C)(3) 65.493 WEST TEXAS REHABILITATION HUMAN SERVICES CENTER

3001 S JACKSON SAN ANGELO, TX 76904

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

MAXWELL, TX 78656

WORLD VIDEO BIBLE SCHOOL 74-2452538 501(C)(3) 10.000 RELIGIOUS 25 LANTANA LANE

(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 organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance YOUNG LIFE - SAN ANGELO 84-0385934 501(C)(3) 20,844 YOUTH DEVELOPMENT ADEA # TV-102

PO BOX 61816 SAN ANGELO, TX 76906					
YOUNG MEN'S CHRISTIAN ASSOCIATION OF SAN	75-0800698	501(C)(3)	34,275		YOUTH DEVELOPMENT

ANGELO 353 S RANDOLPH ST

SAN ANGELO, TX 76903

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Dat	a -	DLN: 934	9319	9003	388
Schedule J (Form 990)		Comp	oensat	ion Information	MO	IB No	1545-0	0047
		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.			2017			
	tment of the Treasury al Revenue Service	▶ Information about		(Form 990) and its instructions agov/form990.	is at O		to Pul ectio	
	ne of the organiza	ation	<u> </u>		Employer identificat			
SAN	I ANGELO AREA FOU	NDATION			73-1634145			
Pa	rt I Questi	ons Regarding Compensation			73-1034143			
	(<u>-</u>					Yes	No
1a				f the following to or for a person liste ly relevant information regarding the				
	First-class	or charter travel		Housing allowance or residence for	personal use			
	_	companions		Payments for business use of perso				
		nification and gross-up payments	▽	Health or social club dues or initiation				
	☐ Discretion	ary spending account		Personal services (e g , maid, chauf	reur, cner)			
b		kes in line 1a are checked, did the ord Il of the expenses described above? I		ollow a written policy regarding paym nplete Part III to explain	nent or reimbursement	1 b	Yes	
2		ition require substantiation prior to re		or allowing expenses incurred by all r, regarding the items checked in line	. 1?	2	Yes	
	directors, truste	es, officers, including the CEO/Execu	tive Directo	r, regarding the items checked in line	: Id'			
3				ed to establish the compensation of the	ne			
	_	EO/Executive Director Check all that d organization to establish compensa		not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
		-		•				
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	✓	Approval by the board or compensa	tion committee			
		-	_					
4	related organiza		rait VII, Se	ction A, line 1a, with respect to the f	illing organization or a			
а	Receive a sever	ance payment or change-of-control p	ayment?			4a		No
b	Participate in, o	receive payment from, a supplemen	ital nonqual	ıfıed retırement plan?		4b	Yes	
С	•	receive payment from, an equity-ba		-		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and prov	vide the app	plicable amounts for each item in Part	: 111			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) orga	anizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section A, I ontingent on the revenues of	ine 1a, did	the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A, I ontingent on the net earnings of	ine 1a, did	the organization pay or accrue any				
а	The organization	٦٦				6 a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A, I escribed in lines 5 and 6? If "Yes," de		the organization provide any nonfixed irt III	d	7		No
8		nts reported on Form 990, Part VII, p litial contract exception described in F		red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No
9	If "Yes" on line 53 4958-6(c)?	3, did the organization also follow the	rebuttable	presumption procedure described in	Regulations section	9		
For I	Danerwork Pedi	ction Act Notice, see the Instruct	ions for Fo	orm 990 Cat No 5	50053T Schedule 1	(Form	990)	2017

			y Employees, and Hig					
			orted on Schedule J, report at are not listed on Form 99		organization on row (i) an	id from related organizati	ions, described in the	
Note. The sum of colu	mns (F	3)(ı)-(ııı) for each listed in	ndividual must equal the to	otal amount of Form 990,	, Part VII, Section A, line	1a, applicable column (D) and (E) amounts for the	at individual
(A) Name and Title		(B) Breakdown	n of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 MATT LEWIS PRESIDENT & CEO	(i)	175,000	0	0	33,045	4,800	212,845	0
	(ii)	0	0	0	0	0	0	0
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Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information 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 Return Reference Explanation SCHEDULE J, LINE I, COLUMN C SCHEDULE J PART I QUESTION 4(B) SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN MATT LEWIS, \$18,785

Schedule J (Form 990) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493199003388 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶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** SAN ANGELO AREA FOUNDATION 73-1634145 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 26 1,080,361 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles **19** Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ▶ (___ 26 Other ▶ (______) 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Νo b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a No 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, Schedule M (Form 990) (2017) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2017)						
Part II	Supplemental Info	rmation.				
	Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part				
	I, column (b), the nu	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) (2017)				

efile GRAPH	IC print - DO	NOT PROCESS	As Filed Data -		DLN:	93493199003388
SCHEDUL (Form 990 or EZ)	990-	▶ Attach to Form 990 or 990-EZ.			2017 Open to Public Inspection	
SAN ANGELO AREA FOUNDATION 990 Schedule O, Supplemental Information Employer identification 73-1634145					fication number	
Return Reference				Explanation		
FORM 990, PART VI, SECTION B, LINE 11B	EW FORM 990, TO ALL MEMBE UGH THE CEO	PRIOR TO ITS ANN ERS OF THESE COI 'S OFFICE IN CONC	NUAL FILING EACH MMITTEES FOR REV ERT WITH THE FOL	ANCIAL COMMITTEE AND AN YEAR, FORM 990 IS DISTRIBU IEW ANY COMMENTS OR QU INDATION'S AUDITOR ONCE IDENT & CEO OF SAAF SIGNS	JTED ELECTRONIO JESTIONS ARE HA ALL PARTIES AGE	CALLY ANDLED THRO REE WITH

Return

Reference	
FORM 990,	SAAF REQUIRES BOARD MEMBERS TO REVIEW AND SIGN THE APPROVED CONFLICT OF INTEREST POLICY AC
PART VI,	CEPTANCE STATEMENT AND DISCLOSE ANNUALLY ANY POTENTIAL CONFLICTS OF INTEREST. THIS PROCESS
SECTION B,	IS COMPLETED AT THE FIRST BOARD MEETING OF THE CALENDAR YEAR SAAF EXECUTIVE COMMITTEE AN
LINE 12C	D CEO REVIEW THESE STATEMENTS, INVESTIGATE AND DISCLOSE ANY POTENTIAL ISSUES AND ARE SUBSE
	QUENTLY ADDRESSED BY THE BOARD, IF NEEDED

Explanation

FORM 990, PART VI, SECTION B, LINE 15 SAAF ANNUALLY PARTICIPATES IN THE COUNCIL ON FOUNDATION'S COMPENSATION SURVEY AND IS ABLE TO ASCERTAIN COMPARABLE DATA ON A NATIONAL AND REGIONAL BASIS AS WELL AS ASSET SIZE, TO DE TERMINE APPROPRIATE SALARY RANGES FOR ITS CEO AS WELL AS OTHER EMPLOYEES OF THE ORGANIZATI ON TO ALLOW IT THE ABILITY TO ATTRACT AND RETAIN QUALITY STAFF THE SAAF BOARD OF DIRECTOR 'S EXECUTIVE COMMITTEE ANNUALLY PERFORMS A PERFORMANCE REVIEW OF THE PRESIDENT & CEO THIS REVIEW IS COMPLETED BY EACH MEMBER OF THE COMMITTEE (FIVE PERSONS) AND IN TURN THE BOARD CHAIRMAN COMPILES THE REVIEWS INTO ONE MASTER REVIEW THIS REVIEW IS THEN DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS FOR FURTHER COMMENT THE BOARD OF DIRECTORS THEN REVIEWS THIS REPORT WITH THE PRESIDENT & CEO, RECOGNIZING ACCOMPLISHMENTS, AREA TO EXCEL AND ESTABLISH FUTURE GOALS THE BOARD OF DIRECTORS USES THE AFOREMENTIONED SALARY SURVEY AS WELL AS ITS OWN KNOWLEDGE OF SIMILAR PROFESSIONAL POSITIONS IN THE COMMUNITY, ALONG WITH ITS PERFORMA NCE REVIEW, TO ESTABLISH THE COMPENSATION PACKAGE FOR THE CEO THE CEO ANNUALLY REVIEWS THE E STAFF OF SAAF AND ALSO USES THIS SAME COUNCIL ON FOUNDATION'S SURVEY DATA FOR RECOMMENDING COMPENSATION FOR THE REMAINDER OF SAAF STAFF AND MAKES SAID RECOMMENDATION ANNUALLY TO THE BOARD OF DIRECTORS FOR THEIR CONSIDERATION OF ANY COMPENSATION CHANGES FOR OTHER STAFF OF SAAF	Return Reference	Explanation
	PART VI, SECTION B,	TO ASCERTAIN COMPARABLE DATA ON A NATIONAL AND REGIONAL BASIS AS WELL AS ASSET SIZE, TO DE TERMINE APPROPRIATE SALARY RANGES FOR ITS CEO AS WELL AS OTHER EMPLOYEES OF THE ORGANIZATI ON TO ALLOW IT THE ABILITY TO ATTRACT AND RETAIN QUALITY STAFF THE SAAF BOARD OF DIRECTOR 'S EXECUTIVE COMMITTEE ANNUALLY PERFORMS A PERFORMANCE REVIEW OF THE PRESIDENT & CEO THIS REVIEW IS COMPLETED BY EACH MEMBER OF THE COMMITTEE (FIVE PERSONS) AND IN TURN THE BOARD CHAIRMAN COMPILES THE REVIEWS INTO ONE MASTER REVIEW THIS REVIEW IS THEN DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS FOR FURTHER COMMENT THE BOARD OF DIRECTORS THEN REVIEWS THIS REPORT WITH THE PRESIDENT & CEO, RECOGNIZING ACCOMPLISHMENTS, AREA TO EXCEL AND ESTABLISH FUTURE GOALS THE BOARD OF DIRECTORS USES THE AFOREMENTIONED SALARY SURVEY AS WELL AS ITS OWN KNOWLEDGE OF SIMILAR PROFESSIONAL POSITIONS IN THE COMMUNITY, ALONG WITH ITS PERFORMA NCE REVIEW, TO ESTABLISH THE COMPENSATION PACKAGE FOR THE CEO THE CEO ANNUALLY REVIEWS THE STAFF OF SAAF AND ALSO USES THIS SAME COUNCIL ON FOUNDATION'S SURVEY DATA FOR RECOMMENDING COMPENSATION FOR THE REMAINDER OF SAAF STAFF AND MAKES SAID RECOMMENDATION ANNUALLY TO THE BOARD OF DIRECTORS FOR THEIR CONSIDERATION OF ANY COMPENSATION CHANGES FOR OTHER STAFF

Return Explanation
Reference

FORM 990, SAAF MAKES AVAILABLE, UPON REQUEST, ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, ITS AUDITED FINANCIAL STATEMENTS AND FILED FORM 990, TO THE PUBLIC THE PUBLIC MAY REQUES SECTION C, IT THIS INFORMATION VIA THE SAAF WEBSITE, OR BY PHONE OR IN WRITING

Return Explanation Pafaranca

Reference	
FORM 990,	REVENUE(LOSS) FOR AGENCY ENDOWMENT FUNDS PER SFAS #136 -8,341,273 GRANTS & EXPENSES MADE
PART XI,	FROM AGENCY ENDOWMENT FUNDS PER SFAS #136 955,755 CHANGE IN VALUE OF SPLIT INTEREST AGREE

MENT 1,076,898 LINE 9

990 Schedule O, Supplemental Information

Return Explanation
Reference

PART XI,	THE POLICY TO HAVE A COMMITTEE TO OVERSEE THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECT
LINE 2C	ION OF INDEPENDENT ACCOUNTANTS HAS NOT CHANGED FROM THE PRIOR YEAR THAT COMMITTEE WAS IN
	PLACE IN PRIOR YEARS ALSO

990 Schedule O, Supplemental Information

Return

Reference

Explanation

Reference	
PART I, LINE	15 BOARD MEMBERS AND 30 GRANT APPLICATION COMMITTEE MEMBERS AND 20 ADDITIONAL VOLUNTEERS