

For calendar year 2017, or tax year beginning 12-01-2017, and ending 11-30-2018

|                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                   |                                                                                                                                                                             |                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| Name of foundation<br>LLOYD M BENTSEN FOUNDATION                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                   | A Employer identification number<br>74-2244153                                                                                                                              |                                                         |
| Number and street (or P O box number if mail is not delivered to street address)<br>PO BOX 593                                                                                                                                                                                                                                        |                                                                                                                                                                                                   | Room/suite                                                                                                                                                                  | B Telephone number (see instructions)<br>(956) 686-7426 |
| City or town, state or province, country, and ZIP or foreign postal code<br>MISSION, TX 78573                                                                                                                                                                                                                                         |                                                                                                                                                                                                   | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                  |                                                         |
| G Check all that apply<br><div><input type="checkbox"/> Initial return<br/><input type="checkbox"/> Final return<br/><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity<br/><input type="checkbox"/> Amended return<br/><input type="checkbox"/> Name change</div> |                                                                                                                                                                                                   | D 1. Foreign organizations, check here <input type="checkbox"/><br>2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |                                                         |
| H Check type of organization<br><input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                                                   |                                                                                                                                                                                                   | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                               |                                                         |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 227,593                                                                                                                                                                                                                                          | J Accounting method<br><input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis ) | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                            |                                                         |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) ) |                                                                                                                | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                             | 1 Contributions, gifts, grants, etc , received (attach schedule)                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . . |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 3 Interest on savings and temporary cash investments . . . . .                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 4 Dividends and interest from securities . . . . .                                                             | 7,298                              | 7,298                     |                         |                                                             |
|                                                                                                                                                                     | 5a Gross rents . . . . .                                                                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Net rental income or (loss) _____                                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 6a Net gain or (loss) from sale of assets not on line 10                                                       | 5,055                              |                           |                         |                                                             |
|                                                                                                                                                                     | b Gross sales price for all assets on line 6a 13,668                                                           |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 7 Capital gain net income (from Part IV, line 2) . . . . .                                                     |                                    | 5,055                     |                         |                                                             |
|                                                                                                                                                                     | 8 Net short-term capital gain . . . . .                                                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 9 Income modifications . . . . .                                                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 10a Gross sales less returns and allowances _____                                                              |                                    |                           |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                               | b Less Cost of goods sold . . . . .                                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | c Gross profit or (loss) (attach schedule) . . . . .                                                           |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 11 Other income (attach schedule) . . . . .                                                                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 12 Total. Add lines 1 through 11 . . . . .                                                                     | 12,353                             | 12,353                    |                         |                                                             |
|                                                                                                                                                                     | 13 Compensation of officers, directors, trustees, etc                                                          | 0                                  | 0                         |                         | 0                                                           |
|                                                                                                                                                                     | 14 Other employee salaries and wages . . . . .                                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 15 Pension plans, employee benefits . . . . .                                                                  |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 16a Legal fees (attach schedule) . . . . .                                                                     |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Accounting fees (attach schedule) . . . . .                                                                  | 1,350                              | 1,350                     |                         | 0                                                           |
|                                                                                                                                                                     | c Other professional fees (attach schedule) . . . . .                                                          |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 17 Interest . . . . .                                                                                          |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 18 Taxes (attach schedule) (see instructions) . . . . .                                                        | 106                                | 0                         |                         | 0                                                           |
|                                                                                                                                                                     | 19 Depreciation (attach schedule) and depletion . . . . .                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 20 Occupancy . . . . .                                                                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 21 Travel, conferences, and meetings . . . . .                                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 22 Printing and publications . . . . .                                                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 23 Other expenses (attach schedule) . . . . .                                                                  | 47                                 | 47                        |                         | 0                                                           |
|                                                                                                                                                                     | 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .                              | 1,503                              | 1,397                     |                         | 0                                                           |
|                                                                                                                                                                     | 25 Contributions, gifts, grants paid . . . . .                                                                 | 4,950                              |                           |                         | 4,950                                                       |
|                                                                                                                                                                     | 26 Total expenses and disbursements. Add lines 24 and 25                                                       | 6,453                              | 1,397                     |                         | 4,950                                                       |
|                                                                                                                                                                     | 27 Subtract line 26 from line 12                                                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | a Excess of revenue over expenses and disbursements                                                            | 5,900                              |                           |                         |                                                             |
|                                                                                                                                                                     | b Net investment income (if negative, enter -0-)                                                               |                                    | 10,956                    |                         |                                                             |
|                                                                                                                                                                     | c Adjusted net income (if negative, enter -0-)                                                                 |                                    |                           |                         |                                                             |

**Part II** **Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

|          |                                                                                                                                   | Beginning of year | End of year    |                       |
|----------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------------|
|          |                                                                                                                                   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>1</b> | Cash—non-interest-bearing . . . . .                                                                                               | 5,592             | 10,167         | 10,167                |
| <b>2</b> | Savings and temporary cash investments . . . . .                                                                                  | 1,160             | 131            | 131                   |
| <b>3</b> | Accounts receivable ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                                                      |                   |                |                       |
| <b>4</b> | Pledges receivable ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                                                       |                   |                |                       |
| <b>5</b> | Grants receivable . . . . .                                                                                                       |                   |                |                       |
| <b>6</b> | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . . |                   |                |                       |
| <b>7</b> | Other notes and loans receivable (attach schedule) ▶ _____<br>Less: allowance for doubtful accounts ▶ _____                       |                   |                |                       |
| <b>8</b> | Inventories for sale or use . . . . .                                                                                             |                   |                |                       |

[illegible]

|                                                                                          |   |   |
|------------------------------------------------------------------------------------------|---|---|
| <b>Total</b> number of others receiving over \$50,000 for professional services. . . . . | ▶ | 0 |
|------------------------------------------------------------------------------------------|---|---|

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

**Part TY-B Summary of Program-Related Investments (see instructions)**

**Part TY-B Summary of Program-Related Investments (see instructions)**

**Part VII-A Statements Regarding Activities** (continued)

|           |                                                                                                                                                                                           |           |            |           |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|-----------|
| <b>11</b> | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).  | <b>11</b> |            | <b>No</b> |
| <b>12</b> | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions). | <b>12</b> |            | <b>No</b> |
| <b>13</b> | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address <b>N/A</b>                                         | <b>13</b> | <b>Yes</b> |           |
| <b>14</b> | The books are in care of <b>CHARLES M CROWSEY CPA</b> Telephone no <b>(956) 686-7426</b>                                                                                                  |           |            |           |

Located at **2520 E BUS 83 MISSION TX** ZIP+4 **78752**

|           |                                                                                                                                                                                                                                                                                                                                                                                          |           |            |           |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|-----------|
| <b>15</b> | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>                                                                                                                                      |           |            |           |
| <b>16</b> | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b> | <b>16</b> | <b>Yes</b> | <b>No</b> |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

|           |                                                                                                                                                                                                                                                                                                                         |  |            |           |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|-----------|
| <b>1a</b> | During the year did the foundation (either directly or indirectly)                                                                                                                                                                                                                                                      |  | <b>Yes</b> | <b>No</b> |
| (1)       | Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                  |  |            |           |
| (2)       | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                          |  |            |           |
| (3)       | Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                              |  |            |           |
| (4)       | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                    |  |            |           |
| (5)       | Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                           |  |            |           |
| (6)       | Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |            |           |
| <b>b</b>  | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> <b>1b</b>                                                          |  |            |           |
| <b>c</b>  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? <input type="checkbox"/> <b>1c</b>                                                                                              |  |            | <b>No</b> |
| <b>2</b>  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                           |  |            |           |
| <b>a</b>  | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>                               |  |            |           |
| <b>b</b>  | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2))                                                                                  |  |            |           |

|           |                                                                                                                                                               |                              |                                        |  |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------|--|
| <b>5a</b> | During the year did the foundation pay or incur any amount to                                                                                                 |                              |                                        |  |
|           | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?                                                                     | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |  |
|           | (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . . | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |  |
|           | (3) Provide a grant to an individual for travel, study, or other similar purposes?                                                                            | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |  |
|           | (4) Provide a grant to an organization other than a charitable, etc., organization described                                                                  |                              |                                        |  |

[illegible]

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

| (a) Name and address | Title, and average hours per week (b) devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | Expense account, (e) other allowances |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| BETTY BENTSEN WINN   | PRESIDENT                                                 | 0                                         | 0                                                                     | 0                                     |

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |                                                                                                             |           |         |
|----------|-------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes  |           |         |
| <b>a</b> | Average monthly fair market value of securities.                                                            | <b>1a</b> | 225,834 |
| <b>b</b> | Average of monthly cash balances.                                                                           | <b>1b</b> | 4,675   |
| <b>c</b> | Fair market value of all other assets (see instructions).                                                   | <b>1c</b> | 0       |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c).                                                                      | <b>1d</b> | 230,509 |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).  | <b>1e</b> | 0       |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets.                                                       | <b>2</b>  | 0       |
| <b>3</b> | Subtract line 2 from line 1d.                                                                               | <b>3</b>  | 230,509 |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).  | <b>4</b>  | 3,458   |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | <b>5</b>  | 227,051 |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5.                                                       | <b>6</b>  | 11,353  |



**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                                            | (a)<br>Corpus | (b)<br>Years prior to 2016 | (c)<br>2016 | (d)<br>2017 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2017 from Part XI, line 7                                                                                                                                |               |                            |             | 11,134      |
| <b>2</b> Undistributed income, if any, as of the end of 2017                                                                                                                               |               |                            |             |             |
| <b>a</b> Enter amount for 2016 only. . . . .                                                                                                                                               |               |                            | 0           |             |
| <b>b</b> Total for prior years 20____, 20____, 20____                                                                                                                                      |               | 0                          |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2017                                                                                                                                   |               |                            |             |             |
| <b>a</b> From 2012. . . . .                                                                                                                                                                | 13,161        |                            |             |             |
| <b>b</b> From 2013. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>c</b> From 2014. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>d</b> From 2015. . . . .                                                                                                                                                                | 4,688         |                            |             |             |
| <b>e</b> From 2016. . . . .                                                                                                                                                                |               |                            |             |             |
| <b>f</b> Total of lines 3a through e. . . . .                                                                                                                                              | 17,849        |                            |             |             |
| <b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 4,950                                                                                                                |               |                            |             |             |
| <b>a</b> Applied to 2016, but not more than line 2a                                                                                                                                        |               |                            | 0           |             |
| <b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .                                                                                      |               | 0                          |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .                                                                                              | 0             |                            |             |             |
| <b>d</b> Applied to 2017 distributable amount. . . . .                                                                                                                                     |               |                            |             | 4,950       |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                                        | 0             |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2017<br>(If an amount appears in column (d), the same amount must be shown in column (a) )                                              | 6,184         |                            |             | 6,184       |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                            |               |                            |             |             |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                                   | 11,665        |                            |             |             |
| <b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .                                                                                                         |               | 0                          |             |             |
| <b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . |               | 0                          |             |             |
| <b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .                                                                                                           |               | 0                          |             |             |
| <b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .                                                                             |               |                            | 0           |             |
| <b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .                                                               |               |                            |             | 0           |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(3) (Election may                                                |               |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

|                                                                                                                                                                                                    |                 |                 |                 |                 |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------|-----------------|-----------------|------------------|
| <b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶ |                 |                 |                 |                 |                  |
| <b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)          |                 |                 |                 |                 |                  |
| <b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .                                                      | Tax year        | Prior 3 years   |                 |                 | <b>(e) Total</b> |
|                                                                                                                                                                                                    | <b>(a) 2017</b> | <b>(b) 2016</b> | <b>(c) 2015</b> | <b>(d) 2014</b> |                  |
| <b>b</b> 85% of line 2a . . . . .                                                                                                                                                                  |                 |                 |                 |                 |                  |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .                                                                                                             |                 |                 |                 |                 |                  |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .                                                                                           |                 |                 |                 |                 |                  |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .                                                                   |                 |                 |                 |                 |                  |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon                                                                                                                                 |                 |                 |                 |                 |                  |
| <b>a</b> "Assets" alternative test—enter                                                                                                                                                           |                 |                 |                 |                 |                  |
| <b>(1)</b> Value of all assets . . . . .                                                                                                                                                           |                 |                 |                 |                 |                  |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                                                               |                 |                 |                 |                 |                  |
| <b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .                                                                |                 |                 |                 |                 |                  |
| <b>c</b> "Support" alternative test—enter                                                                                                                                                          |                 |                 |                 |                 |                  |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .                                 |                 |                 |                 |                 |                  |

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)                  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount |
|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|--------|
| <b>a</b> <i>Paid during the year</i><br>See Additional Data Table |                                                                                                                    |                                      |                                     |        |
| <b>Total . . . . .</b>                                            |                                                                                                                    |                                      | <b>▶ 3a</b>                         | 4,950  |
| <b>b</b> <i>Approved for future payment</i>                       |                                                                                                                    |                                      |                                     |        |
| <b>Total . . . . .</b>                                            |                                                                                                                    |                                      | <b>▶ 3b</b>                         | 0      |

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

|                                                                             | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income<br>(See instructions ) |
|-----------------------------------------------------------------------------|---------------------------|---------------|--------------------------------------|---------------|--------------------------------------------------------------------|
|                                                                             | (a)<br>Business code      | (b)<br>Amount | (c)<br>Exclusion code                | (d)<br>Amount |                                                                    |
| <b>1</b> Program service revenue                                            |                           |               |                                      |               |                                                                    |
| <b>a</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>b</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>c</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>d</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>e</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>f</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>g</b> Fees and contracts from government agencies                        |                           |               |                                      |               |                                                                    |
| <b>2</b> Membership dues and assessments. . . . .                           |                           |               |                                      |               |                                                                    |
| <b>3</b> Interest on savings and temporary cash investments . . . . .       |                           |               |                                      |               |                                                                    |
| <b>4</b> Dividends and interest from securities. . . . .                    |                           |               | 14                                   | 7,298         |                                                                    |
| <b>5</b> Net rental income or (loss) from real estate                       |                           |               |                                      |               |                                                                    |
| <b>a</b> Debt-financed property. . . . .                                    |                           |               |                                      |               |                                                                    |
| <b>b</b> Not debt-financed property. . . . .                                |                           |               |                                      |               |                                                                    |
| <b>6</b> Net rental income or (loss) from personal property                 |                           |               |                                      |               |                                                                    |
| <b>7</b> Other investment income. . . . .                                   |                           |               |                                      |               |                                                                    |
| <b>8</b> Gain or (loss) from sales of assets other than inventory . . . . . |                           |               | 18                                   | 5,055         |                                                                    |
| <b>9</b> Net income or (loss) from special events                           |                           |               |                                      |               |                                                                    |
| <b>10</b> Gross profit or (loss) from sales of inventory                    |                           |               |                                      |               |                                                                    |
| <b>11</b> Other revenue <b>a</b> _____                                      |                           |               |                                      |               |                                                                    |
| <b>b</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>c</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>d</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>e</b> _____                                                              |                           |               |                                      |               |                                                                    |
| <b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .                  |                           | 0             |                                      | 12,353        | 0                                                                  |
| <b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .            |                           |               | <b>13</b>                            |               | 12,353                                                             |

(See worksheet in line 13 instructions to verify calculations )

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

|                                                                                                                                                                                                                                                                                                                                                                                                                     |              |            |           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------|-----------|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                                        |              | <b>Yes</b> | <b>No</b> |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of                                                                                                                                                                                                                                                                                                                          |              |            |           |
| <b>(1)</b> Cash. . . . .                                                                                                                                                                                                                                                                                                                                                                                            | <b>1a(1)</b> |            | <b>No</b> |
| <b>(2)</b> Other assets. . . . .                                                                                                                                                                                                                                                                                                                                                                                    | <b>1a(2)</b> |            | <b>No</b> |
| <b>b</b> Other transactions                                                                                                                                                                                                                                                                                                                                                                                         |              |            |           |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .                                                                                                                                                                                                                                                                                                                                          | <b>1b(1)</b> |            | <b>No</b> |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .                                                                                                                                                                                                                                                                                                                                    | <b>1b(2)</b> |            | <b>No</b> |
| <b>(3)</b> Rental of facilities, equipment, or other assets. . . . .                                                                                                                                                                                                                                                                                                                                                | <b>1b(3)</b> |            | <b>No</b> |
| <b>(4)</b> Reimbursement arrangements. . . . .                                                                                                                                                                                                                                                                                                                                                                      | <b>1b(4)</b> |            | <b>No</b> |
| <b>(5)</b> Loans or loan guarantees. . . . .                                                                                                                                                                                                                                                                                                                                                                        | <b>1b(5)</b> |            | <b>No</b> |
| <b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .                                                                                                                                                                                                                                                                                                                              | <b>1b(6)</b> |            | <b>No</b> |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .                                                                                                                                                                                                                                                                                                                  | <b>1c</b>    |            | <b>No</b> |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received. |              |            |           |

| (a) Line No | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|-------------|---------------------|-----------------------------------------------|----------------------------------------------------------------------|
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

|                  |                                                                                                                                                                                                                                                                                                                        |                    |                |
|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------|
| <b>Sign Here</b> | 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 taxpayer) is based on all information of which preparer has any knowledge. |                    |                |
|                  | *****<br>Signature of officer or trustee                                                                                                                                                                                                                                                                               | 2019-04-08<br>Date | *****<br>Title |

May the IRS discuss this return with the preparer shown below  
 (see instr )? ☒ Yes ☐ No

|                                                                                  |                               |                      |            |                                                 |                                |
|----------------------------------------------------------------------------------|-------------------------------|----------------------|------------|-------------------------------------------------|--------------------------------|
| <b>Paid Preparer Use Only</b>                                                    | Print/Type preparer's name    | Preparer's Signature | Date       | Check if self-employed <input type="checkbox"/> | PTIN                           |
|                                                                                  | SHARI S MANNING               |                      | 2019-04-08 |                                                 | P01055150                      |
|                                                                                  | Firm's name <b>►</b> FCA CORP |                      |            |                                                 | Firm's EIN <b>►</b> 76-0076528 |
| Firm's address <b>►</b> 791 TOWN COUNTRY BLVD SUITE 250<br>HOUSTON, TX 770243925 |                               |                      |            |                                                 | Phone no (713) 781-2856        |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |                                                                                                           |                                |                                  |        |
|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Recipient                                                                                                | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business)                                                                      |                                                                                                           |                                |                                  |        |
| <b>a</b> <i>Paid during the year</i>                                                                     |                                                                                                           |                                |                                  |        |
| FELLOWSHIP OF CHRISTIAN ATHLETES<br>4312 N TAYLOR ROAD<br>MCALLEN, TX 78504                              | NONE                                                                                                      | PUBLIC                         | OPERATIONS                       | 1,800  |
| MUSEUM OF SOUTH TEXAS HISTORY<br>200 N CLOSNER BLVD<br>EDINBURG, TX 78541                                | NONE                                                                                                      | PUBLIC                         | OPERATIONS                       | 1,250  |
| RGV LIVESTOCK SHOW CHAMP FOR CHAMPIONS<br>1000 N TEXAS AVE<br>MERCEDES, TX 78570                         | NONE                                                                                                      | PUBLIC                         | OPERATIONS                       | 1,000  |
| <b>Total . . . . .</b> ▶<br><b>3a</b>                                                                    |                                                                                                           |                                |                                  | 4,950  |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment |                                                                                                           |                                |                                  |        |
|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Recipient                                                                                                | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business)                                                                      |                                                                                                           |                                |                                  |        |
| <b>a</b> <i>Paid during the year</i>                                                                     |                                                                                                           |                                |                                  |        |
| FIRST UNITED METHODIST CHURCH<br>BLDG FUND<br>4200 NORTH MCCOLL<br>MCALLEN, TX 78504                     | NONE                                                                                                      | PUBLIC                         | OPERATIONS                       | 300    |
| ST PAUL'S UNITED METHODIST CHURCH<br>8051 E BROADWAY BLVD<br>TUCSON, TX 85710                            | NONE                                                                                                      | PUBLIC                         | OPERATIONS                       | 300    |
| WESTMINSTER PRESBYTERIAN CHURCH<br>3208 EXPOSITION BLVD<br>AUSTIN, TX 78703                              | NONE                                                                                                      | PUBLIC                         | OPERATIONS                       | 300    |
| <b>Total . . . . . ▶</b><br><b>3a</b>                                                                    |                                                                                                           |                                |                                  | 4,950  |

**TY 2017 Accounting Fees Schedule****Name:** LLOYD M BENTSEN FOUNDATION**EIN:** 74-2244153**Accounting Fees Schedule**

| <b>Category</b> | <b>Amount</b> | <b>Net Investment<br/>Income</b> | <b>Adjusted Net<br/>Income</b> | <b>Disbursements<br/>for Charitable<br/>Purposes</b> |
|-----------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| TAX PREPARATION | 1,350         | 1,350                            |                                | 0                                                    |



**TY 2017 Applied to Prior Year Election****Name:** LLOYD M BENTSEN FOUNDATION**EIN:** 74-2244153**Election:** SEE ATTACHED ELECTION TO APPLY QUALIFYING DISTRIBUTION  
TO UNDISTRIBUTED INCOME FROM YEARS PRIOR TO THE  
CURRENT YEAR

**TY 2017 Investments Corporate Stock Schedule****Name:** LLOYD M BENTSEN FOUNDATION**EIN:** 74-2244153

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|---------------|------------------------|-------------------------------|
| SECURITIES    | 193,163                | 217,295                       |

**TY 2017 Other Expenses Schedule****Name:** LLOYD M BENTSEN FOUNDATION**EIN:** 74-2244153**Other Expenses Schedule**

| Description            | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|------------------------|--------------------------------------|--------------------------|------------------------|---------------------------------------------|
| DUES AND SUBSCRIPTIONS | 47                                   | 47                       |                        | 0                                           |

**TY 2017 Taxes Schedule****Name:** LLOYD M BENTSEN FOUNDATION**EIN:** 74-2244153

| Category           | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|--------------------|--------|--------------------------|------------------------|---------------------------------------------|
| FEDERAL EXCISE TAX | 106    | 0                        |                        | 0                                           |