Department of the

DLN: 93493116005079 OMB No 1545-0047

2018

Open to Public Inspection

Return of Organization Exempt From Income Tax

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

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

 \blacktriangleright Go to $\underline{www.irs.gov/Form990}$ for instructions and the latest information.

		nue Service					<u> </u>
A F	or th	e 2019 ca	llendar year, or tax year beginning 01-01-2018 , and ending 12-31	-2018			
□ Ac		pplicable change	C Name of organization The Freedom of Information Supporting Foundation		D Employ	er identificatio 5658	n number
☐ In	ntial re	_	Doing business as				
		d return on pending	Number and street (or P O box if mail is not delivered to street address) Room/suit 3001 N Lamar Blvd	e	E Telephon (512) 3		
			City or town, state or province, country, and ZIP or foreign postal code Austin, TX 78705		G Gross red	ceipts \$ 53,012	
			F Name and address of principal officer	H(a) Is this	a group ret	urn for	
			Diana Fuentes 3001 N Lamar Blvd Austin, TX 78705	H(b) Are all]Yes ☑No]Yes □No
I Ta	ax-exer	mpt status	✓ 501(c)(3)	include If "No,		ו Ist (see instri	
J W	/ebsit	te:► N/A		H(c) Group	exemption	number 🟲	
K For	m of o	rganızatıon	☑ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of forma	tion 2000	M State of lega	al domicile TX
Р	art I	Sumi	mary				
nce	-	The Freedo	cribe the organization's mission or most significant activities om of Information Supporting Foundation is organized to support the activit in doing so, to educate about First Amendment and freedom of information		edom of Inf	ormation Foul	ndation of
Ĕ	-						
Activities & Governance			s box $\blacktriangleright \Box$ if the organization discontinued its operations or disposed of more fiveling members of the governing body (Part VI, line 1a)	ore than 25%	of its net as	ssets	6
ಸ	1		f independent voting members of the governing body (Part VI, line 1b)			4	6
TI e	1		ber of individuals employed in calendar year 2018 (Part V, line 2a)		•	5	0
Ę	6	Total num	ber of volunteers (estimate if necessary)			6	7
⋖	1		elated business revenue from Part VIII, column (C), line 12			7a	0
	Ь	Net unrela	ated business taxable income from Form 990-T, line 34			7b	0
		<u> </u>	(5 .) (11)	Pric	or Year	Curr	ent Year
ĕ'nι	1		ons and grants (Part VIII, line 1h)				0
Ravenue	1	_	nt income (Part VIII, column (A), lines 3, 4, and 7d)		41,7	730	53,012
α	1		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,.		0
	12	Total reve	nue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		41,7	730	53,012
	13	Grants an	d sımılar amounts paid (Part IX, column (A), lines 1–3)		45,C	000	69,000
,	14	Benefits n	aid to or for members (Part IX column (A) line 4)				0
	. v	2.5	***************************************				
100		•					
							
- J							
	V.).						
	(<u>)</u> ,				_		
	(<u>)</u> ,				_		
	(),				_		
			At.				
			h-				

Statement of Program Service Accomplishments Check of Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission The Freedom of Information Supporting Foundation is organized to support the activities of The Freedom of Information Foundation of Texas and in doing so, to educate about First Amendment and freedom of Information issues Prist Amendment and Freedom of Information issues	Form	990 (2018)						Page 2
1 Birefly describe the organization's mission The Freedom of Information Supporting Foundation is organized to support the activities of The Freedom of Information Foundation of Texas and in doing so, to educate about First Amendment and freedom of information issues 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27	Pa	rt III Stateme	nt of Program Service	Accomplishmer	nts			
The Freedom of Information Supporting Foundation is organized to support the activities of The Freedom of Information Foundation of Texas and in doing so, to educate about Frist Amendment and freedom of information issues 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?		Check if So	chedule O contains a respons	e or note to any lin	e in this Part III .			
2 Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E27	1	Briefly describe th	e organization's mission					
the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Joint the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O If "Yes," describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses 5 69,000 including grants of \$ 69,000) (Revenue 5 0) See Additional Data 4b (Code) (Expenses 5 including grants of \$) (Revenue 5) Code) (Expenses 5 including grants of \$) (Revenue 5) 4c (Code) (Expenses 5 including grants of \$) (Revenue 5) Code) (Expenses 5 including grants of \$) (Revenue 5)	The F	reedom of Informa so, to educate abo	tion Supporting Foundation is out First Amendment and free	s organized to supp dom of information	ort the activities of n issues	The Freedom of Information Four	ndation of Texas a	and in
the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Joint the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O If "Yes," describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses 5 69,000 including grants of \$ 69,000) (Revenue 5 0) See Additional Data 4b (Code) (Expenses 5 including grants of \$) (Revenue 5) Code) (Expenses 5 including grants of \$) (Revenue 5) 4c (Code) (Expenses 5 including grants of \$) (Revenue 5) Code) (Expenses 5 including grants of \$) (Revenue 5)								
If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?	2	Did the organizati	on undertake any significant	program services o	luring the year whic	th were not listed on		
Did the organization cease conducting, or make significant changes in how it conducts, any program services?		the prior Form 99	0 or 990-EZ?				∐ Yes 🗹	No
services? If "Yes," describe these changes on Schedule O Describe the organizations program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported (Code) (Expenses \$ 69,000 including grants of \$ 69,000) (Revenue \$ 0) See Additional Data (Code) (Expenses \$ including grants of \$) (Revenue \$) (Code) (Expenses \$ including grants of \$) (Revenue \$) (Code) (Expenses \$ including grants of \$) (Revenue \$) (Code) (Expenses \$ including grants of \$) (Revenue \$)		•						
If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501c(x)(3) and 501c(x)(4) an	3	-	- -	-	es in how it conduct	s, any program		
Section 501(c)(3) and 501(c)(4) organization's program service accomplishments for each of its three largest program services, as measured by expenses section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 69,000 including grants of \$ 69,000) (Revenue \$ 0) See Additional Data 4b (Code) (Expenses \$ including grants of \$) (Revenue \$) Code) (Expenses \$ including grants of \$) (Revenue \$) Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) Code (Expenses \$ including grants of \$) (Revenue \$)							∐ Yes 💆	∐No
See Additional Data (Code) (Expenses \$ including grants of \$) (Revenue \$) (Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4	Describe the orga Section 501(c)(3)	nization's program service ac and 501(c)(4) organizations	complishments for are required to rep	ort the amount of g			
4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4a	•) (Expenses \$	69,000 includ	ding grants of \$	69,000) (Revenue \$	0)	
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	4b	(Code) (Expenses \$	ınclud	ding grants of \$) (Revenue \$)	
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)								
(Expenses \$ including grants of \$) (Revenue \$)	4c	(Code) (Expenses \$	ınclud	ding grants of \$) (Revenue \$)	
(Expenses \$ including grants of \$) (Revenue \$)								
(Expenses \$ including grants of \$) (Revenue \$)								
4e Total program service expenses ► 69,000	4d		,	•) (Revenue \$)	
	4e	Total program s	ervice expenses >	69,000				

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

Is the oppanization aware that it engaged in an excess henefit transaction with a disqualified person in a prior year, and

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

24d

25a

Νo

Form 9	990 (2018)		Page 5
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	4a	No
		1 1	1

Page **6**

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "National Research Ba, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	•	onse to	lines V
Se	ection A. Governing Body and Management	•	•	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	5		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisio of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	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	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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 participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records Diana Fuentes 3001 N Lamar Blvd Austin, TX 78705 (512) 377-1575			

Form 990 (2018)					Page 7
Part VII Compensation of Officers, D and Independent Contractor		stees, Key Employees, H	ighest Comper	nsated Employ	ees,
Check if Schedule O contains a resp Section A. Officers, Directors, Trustee					🗆
1a Complete this table for all persons required to			· · · · · · · · · · · · · · · · · · ·		ganızatıon's tax
year • List all of the organization's current officers of compensation Enter -0- in columns (D), (E), a			ganızatıons), rega	ardless of amount	
• List all of the organization's current key emp		·	of "key employee	IF.	
• List the organization's five current highest c who received reportable compensation (Box 5 of organization and any related organizations					
• List all of the organization's former officers, of reportable compensation from the organization	and any relat	ed organizations	•		
 List all of the organization's former director organization, more than \$10,000 of reportable co 					
List persons in the following order individual trus compensated employees, and former such person	ns				
Check this box if neither the organization noi				ctor, or trustee	Т
(A) Name and Title	(B) Average hours per week (list	Position (do not check more than one box, unless person is both an officer and a	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
•					
· -					
-					
Control Contro	· nore	In the Manual Land			
r					
<u></u>					
7 4.					
1					
	No.				
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1					4
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Part VII Section A. Officers, Direct	tors, Trustees	, Key I	Empl	loye	es,	and I	ligh	nest Compensate	d Employees (co	ntinued)
(A) Name and Title	(B) Average hours per week (list any hours		ne b	ox, u n of	t che inles ficer	s pers and a	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
				l						

1b Sub-Total				>			
c Total from continuation sheets to Pa	art VII , Section	Α		▶ [
d Total (add lines 1b and 1c)				▶	0	0	0

1b Sub-Total				>			
c Total from continuation sheets to Pa	art VII , Section	Α		▶			
d Total (add lines 1h and 1c)				- ▶ □	O	0	0

1b Sub-Total			 -	>			
c Total from continuation sheets to Pa	art VII , Section	Α		▶			
d Total (add lines 1b and 1c)				▶	0	0	0

							_
1b Sub-Total				•			_
c Total from continuation sheets to Pa	art VII , Section	Α		▶			
d Total (add lines 1b and 1c)				•	0	0	0
							_

1b Sub-Total					>			
c Total from continuation sheets to Pa	art VII , Section	Α			▶			
d Total (add lines 1b and 1c)					▶	0	0	0
			_					

b Sub-Total				•	•			
c Total from continuation sheets to Pa	rt VII , Section	Α		•				
d Total (add lines 1b and 1c)				•		0	0	0
			 					_

Yes

(C) Compensation

Form **990** (2018)

(B)

Description of services

No

1b	Sub-Total						>				
C	c Total from continuation sheets to Part VII, Section A										
ď	Total (add lines 1b and 1c)						▶	0	0	0	
2	Total number of individuals (including of reportable compensation from the		to tho	se lis	ted	abov	ve) wh	o received more than	\$100,000		

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

4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No

	1	1 1	
vidual	4		No
any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for vices rendered to the organization? If "Yes," complete Schedule J for such person	5		No
	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

(A)

Name and business address

Section B. Independent Contractors

compensation from the organization ▶

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Part			nonco /	line in this Down	ı		
	Check if Schedu	le O contains a res	ponse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a Federated campaig	ıns 1a			revenue		512 - 514
nts ints	b Membership dues	<u> </u>	<u> </u>				
Sra nou	c Fundraising events		<u> </u>				
ts, (Pari	d Related organization	<u> </u>	<u> </u>				
<u>‡</u> ₹	e Government grants (c	contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions	s, gifts, grants,	i i				
utio	and similar amounts r above	1f					
<u>ē</u>	g Noncash contribution in lines 1a - 1f \$	ons included					
i pu	h Total. Add lines 1a	ı-1f	•				
	<u>' </u>		Business	Code			
JE C	2a						
S. S.	b ————						
Service Revenue	c —						
Ser.	d						
an	e						
Program	f All other program se			'	· ·	1	•
<u> </u>	9 Total. Add lines 2a-2		<u> </u>	7	1		
	3 Investment income (in similar amounts).	including dividends	, interest, and other •	35,11	13		0 35,113
	4 Income from investm	ent of tax-exempt	bond proceeds 🕨	•			
	5 Royalties	(1) Pool		•			
	6a Gross rents	(ı) Real	(II) Personal	-			
				_			
	b Less rental expenses						
	c Rental income or (loss)			1			
	d Net rental income of	pr (loss)		-			
		(ı) Securities	(II) Other				
	7a Gross amount from sales of	17,89	9				
	assets other than inventory						
	b Less cost or			-			
	other basis and sales expenses						
	C Gain or (loss)	17,89		17,89	20	0	0 17,899
	d Net gain or (loss) . 8a Gross income from f		<u> </u>	17,83	99		17,833
ne		of					
₽ -	See Part IV, line 18	• • • • ·	a				
Re	b Less direct expense		ь				
Other Revenue	c Net income or (loss)		events >	1			
ŏ	9a Gross income from g See Part IV, line 19	gaming activities					
			a	_			
	b Less direct expense c Net income or (loss)		ties				
	10aGross sales of inven		ities •	1			
	returns and allowand		a				
	b Less cost of goods :		b	-			
	c Net income or (loss)		ntory ►				
	Miscellaneous	Revenue	Business Code				
	11a 						
	b		1				
			+				
	d All other revenue .		1				
	e Total. Add lines 11a	a-11d					
	12 Total revenue. See	Instructions .		53,01	12	0	0 53,012
	j			53,01		<u>~ </u>	53,012

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Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all comp	olumns All other orga	anızatıons must comp	olete 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	69,000	69,000		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
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				
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		- 3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
,				

Forn	n 990	(2018)				Page 11
Р	art X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part IX			🗆
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1	1
	2	Savings and temporary cash investments .	[19,631	2	19,980
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for trustees, key employees, and highest compensar Part II of Schedule L	ated employees Complete		5	
Assets	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	fied persons (as defined under n 4958(c)(3)(B), and itions of section 501(c)(9) (see instructions) Complete		6	
	7	Notes and loans receivable, net	<u> </u>			
	8	Inventories for sale or use			8	
	9 10a	Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		9	
	b	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities .	1		11	
	12	Investments—other securities See Part IV, line	₁₁	1,480,312	12	1,359,132
	13	Investments—program-related See Part IV, line			13	<u> </u>
	14	Intangible assets	<u> </u>		14	
	15	Other assets See Part IV, line 11	<u> </u>		15	<u> </u>
	16	Total assets. Add lines 1 through 15 (must equ	1,499,943	16	1,379,113	
	17	Accounts payable and accrued expenses		17		
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
c۸	21	Escrow or custodial account liability Complete F		21		
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee				
æ		persons Complete Part II of Schedule L		22		
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	third parties		24	
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
ses		Organizations that follow SFAS 117 (ASC 9) complete lines 27 through 29, and lines 33	58), check here ▶ ☑ and			
Balance	27	Unrestricted net assets	una 971		27	
Bal	28	Temporarily restricted net assets	[1,499,943	28	1,379,113
Fund	29	Permanently restricted net assets	F		29	
Ē		Organizations that do not follow SFAS 117	(ASC 958),			
ō		check here ▶ □ and complete lines 30 th			_	
ţ	30	Capital stock or trust principal, or current funds	<u> </u>		30	
Assets	31	Paid-in or capital surplus, or land, building or eq	` `		31	
	32	Retained earnings, endowment, accumulated in	· · · -	4 400 040	32	4 070 440
Net	33	Total liabilities and not assets/find halances	1,499,943	33	1,379,113	

Total liabilities and net assets/fund balances

34

1,379,113

Form **990** (2018)

1,499,943

34

Form	990 (2018)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			53,012
2	Total expenses (must equal Part IX, column (A), line 25)	2			69,000
3	Revenue less expenses Subtract line 2 from line 1	3			-15,988
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	,499,943
5	Net unrealized gains (losses) on investments	5			-104,842
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1	,379,113
Pa	TXII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If `Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil Audit Act and OMB Circular A-133?	ngle	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requadit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ired	3b		

Additional Data

Software Version: **EIN:** 31-1756658

Software ID: 18007482

Name: The Freedom of Information Supporting Foundation

Form 990 (2018)

Form 990, Part III, Line 4a:

Support the activities of the Freedom of Information Foundation of Texas

efil	e GR/	APHIC prii	nt - DO NOT PROCESS As Filed Data -						DLN: 93493116005079		
	HED m 990	ULE A			harity Status			ort	OMB No 1545-0047		
(FOI 990E		U UI	Coi		ganization is a section 4947(a)(1) nonexer			a section	2018		
	•			► Go to v	Attach to Form 9 vww.irs.gov/Form9				Open to Public		
Interna	l Reven	the Treasury			vvviii sigov / i oi mo	<u>50</u> 101 the lates			Inspection		
		ne organiza of Information		oundation				Employer identifica	ation number		
				Oler II Great	- (61) 1		- 15 1 > 0	31-1756658			
Pa The o					s (All organizations it is (For lines 1 throu			ee instructions.			
1			•		ociation of churches d	.	,	(A)(i).			
2		A school de	scribed in s e	ection 170(b)(1)(A)(ii). (Attach Sche	edule E (Form 99	0 or 990-EZ))				
3					ce organization descri	,	, ,	ii).			
4		·	•	•	d in conjunction with a			•	nter the hospital's		
•	Ш	name, city,			a in conjunction with t	Trospital deserts	Jed III Section 2	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	nter the hospital s		
5				ed for the benefit lete Part II)	of a college or univers	sity owned or ope	erated by a gov	ernmental unit describ	ped in section 170		
6		A federal, s	tate, or loca	al government or q	governmental unit des	cribed in sectio i	n 170(b)(1)(A)(v).			
7				ormally receives a)(vi). (Complete l	substantial part of its Part II)	support from a	governmental u	nit or from the genera	I public described in		
8		A communi	ty trust desc	cribed in section	170(b)(1)(A)(vi) (Complete Part II)				
9					scribed in 170(b)(1)(e instructions Enter t				ege or university or a		
10		from activit	ies related t income and	o its exempt fund	(1) more than 331/3% tions—subject to certain staxable income (less pulete Part III)	aın exceptions, a	nd (2) no more	than 331/3% of its su	pport from gross		
11	П	•			exclusively to test for	public safety Se	e section 509	(a)(4).			
12	☑	more public	ly supporte	d organizations de	exclusively for the ber escribed in section 50 he type of supporting	9(a)(1) or sec	tion 509(a)(2)	. See section 509(a			
а		Type I. A so	supporting on n(s) the pov	rganızatıon opera	ted, supervised, or co	ntrolled by its su	pported organiz	ation(s), typically by			
b	✓	manageme	nt of the su		rvised or controlled in tion vested in the sam nd C.						
С					ipporting organization				ted with, its		
d		Type III n functionally	on-function	nally integrated The organization	A supporting organize generally must satisfy IV, Sections A and	ation operated in a distribution re	n connection wit	h its supported organ			
e		Check this	box if the or	ganızatıon receive	ed a written determina ntegrated supporting	ation from the IR	S that it is a Ty	pe I, Type II, Type III	functionally		
f	Enter			ed organizations	J			_1			
g					ported organization(s						
		ame of supp organization		(ii) EIN	(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				
(A) F	eedom	of Information	Foundation	752170856	7	Yes		69,000	0		
Tota	1		4					69,000			
		vork Reduc	tion Act No	tice, see the In	structions for	 Cat No 11285	= 6	ichedule A (Form 99			

Sche	dule A (Form 990 or 990-EZ) 2018						Page 3
Р	Support Schedule for (Complete only if you c					d to qualify und	er Part II. If
	the organization fails to						C d. C 111 1.
Se	ction A. Public Support	, ,		, ,	•	,	
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(4) 2017	(6) 2013	(6) 2010	(d) 2017	(e) 2010	(1) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2							
	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						
4	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						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						l c
	from line 6)						
	ection B. Total Support		ı		1	Т	ı
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a							
104	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
r	Add lines 10a and 10b			<u> </u>			
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets (Explain in Part VI)						
13				+			
	11, and 12)			<u> </u>			
14	First five years. If the Form 990 is fo	r the organizatior	's first, second, tl	hırd, fourth, or fıft	h tax year as a se	ection 501(c)(3) o	rganization,
	check this box and stop here	-	•		•	,	▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2018 (lin			column (f))		15	0 %
	Public support percentage from 2017 S		•			16	0 70
16						10	
	ection D. Computation of Investi Investment income percentage for 201			lino 12 columns /4	://	147	
17				iiile 13, column (1	<i>))</i>	17	0 %
18	Investment income percentage from 2	•	•			18	
٠.	TYPE II - TO SEE THE	1 11	1	<u> </u>		!!	·-

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

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

Schedule A (Form 990 or 990-EZ) 2018

1

7

answer line 10b below

the organization had excess business holdings)

Section A. All Supporting Organizations Yes No

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

Page 4

No

No

No

No

No

No

No

No

No

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

Yes

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

За 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 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 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

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 4b supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the

organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

No 5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 No

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7

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)

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

8

provide detail in Part VI.

9a

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

	organization had an interest 1r Yes," provide detail in Part VI.	9b
:	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in	
	which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	

```
C
                                                                                                                                 9с
     Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding
10a
```

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

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

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		No
h	A family member of a person described in (a) above?	11b		No
	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		No
	ection B. Type I Supporting Organizations			
	section 2. Type 2 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 Pai 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	t		
_		1	Yes	
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		No
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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)	of 1		No
	11 3 3 11 3 17			
3	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		. 00	
		1	Yes	
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	Yes	<u> </u>
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			No
<u> </u>	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 instructions are instructions). 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 (so	ŕ	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.	20		
	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? Provide details in Part VI.	f 3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		

m -	
/I) See	
ıgh E	
(B) Current Year	
(optional)	

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2018

Page 6

	Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations in		
~		(A) Prior Year	

	instructions. All other Type III non-functionally integrated supporting organiza	tions i	must complete Sections A	through E
	Section A - Adjusted Net Income		(A) Prior Year	(B) C (o
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		

4 5

Add lines 1 through 3

Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions)

1

5

7

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)

a Average monthly value of securities **b** Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c)

e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d

Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6

7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

8

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

4

Enter greater of line 2 or line 3

5 Income tax imposed in prior year

temporary reduction (see instructions)

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3 4

6

7

8

1

1a

1b

1c 1d

2

3

4

5

6

7

8

1

6

(A) Prior Year

b Applied to 2018 distributable amount

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions 6 Remaining underdistributions for 2018 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 2019. Add lines 31 and 4c 8 Breakdown of line 7

a Excess from 2014. **b** Excess from 2015. c Excess from 2016.

Schedule A (Form 990 or 990-EZ) (2018)

d Excess from 2017. e Excess from 2018.

Additional Data

Software ID: 18007482

Software Version:

EIN: 31-1756658 Name: The Freedom of Information Supporting Foundation

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI

Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D. lines 5, 6, and 8, and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

Return Reference Explanation

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.

OMB No 1545-0047

DLN: 93493116005079

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information.

Inspection Employer identification number

	reedom of Information Supporting Foundation				31-1	756658		
Рā	Organizations Maintaining Donor Adv				ls or Acc	ounts.		
_	Complete if the organization answered "Ye		•	V, line 6. sed funds	1	(b)Eunda	and other a	eccounts
	Fotal number at end of year	(a) Don	or auvis	eu iulius		(D)Funds	and other a	iccounts
	Aggregate value of contributions to (during year)							
	Aggregate value of grants from (during year)							
	Aggregate value at end of year							
	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex			ts held in dono	r advised f	unds are t	_	Yes 🗌 N
	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?						missible	Yes 🗆 N
1	Conservation Easements. Complete if t	he organization	answei	ed "Yes" on F	orm 990	, Part IV,	line 7.	
	Purpose(s) of conservation easements held by the orga	nızatıon (check all	that ap	ply)				
	Preservation of land for public use (e g , recreation	n or education)		Preservation o	f an histor	cally impo	rtant land a	rea
	Protection of natural habitat			Preservation o	f a certifie	historic s	structure	
	Preservation of open space							
	Complete lines 2a through 2d if the organization held a	qualified conserva	ation co	ntribution in the	e form of a	conserva	tion	
	easement on the last day of the tax year					Held a	t the End o	f the Year
	Total number of conservation easements				2a			
	Total acreage restricted by conservation easements				2b			
	Number of conservation easements on a certified histor		•		2c			
	Number of conservation easements included in (c) acqu structure listed in the National Register	ired after //25/06	, and no	ot on a nistoric	2d			
	Number of conservation easements modified, transferred tax year ▶	ed, released, extin	guished	, or terminated	by the org	ganızatıon	during the	
	Number of states where property subject to conservation	on easement is loc	ated 🕨					
	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		rıng, in	spection, handl	ing of viola	itions,	☐ Yes	□ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of	violation	ns, and enforcin	g conserva	ation ease		g the year
	Amount of expenses incurred in monitoring, inspecting	handling of violat		Je				
	> \$	Thankaming of Thomas	ions, ar	a enforcing cor	nservation	easement	s during the	year
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?	-	•	-			s during the	year
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement) above satisfy the servation easemen e footnote to the o	require its in its rganizat	ments of section revenue and e lion's financial s	on 170(h)(xpense sta statements	4)(B)(ı) tement, a that desc	Yes nd ribes	
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement organizations Maintaining Collections Complete if the organization answered "Yes	above satisfy the servation easemene footnote to the orts of Art, Histories" on Form 990	require its in its rganizat cal Tr o , Part 1	revenue and e con's financial seasures, or 6	on 170(h)(· xpense sta statements Other Sii	4)(B)(I) tement, a that desc milar As	Yes nd ribes sets.	□ No
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement Organizations Maintaining Collections	servation easement footnote to the order on Form 990 for (ASC 958), not public exhibition,	require its in its rganizat cal Tro , Part I to repo educati	revenue and e con's financial seasures, or (EV, line 8.	xpense statements Other Sine statement in further.	tement, a that described that the the the that the the the that the the the the that the the the the the the the the the th	Yes nd ribes sets. nce sheet w	□ No
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the organization's accounting for conservation easement III Organizations Maintaining Collections Complete if the organization answered "Yes fitted organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for	servation easement footnote to the original statements of Art, Historias" on Form 990 for (ASC 958), not public exhibition, incial statements the control of	cal Tro , Part I to repo educati nat desce	revenue and e con's financial seasures, or (EV, line 8.) It in its revenue on, or research ribes these iter its revenue sta	xpense statements Other Sine statement in further in successions are statement are st	tement, a that desc milar As t and bala ance of pu d balance	Yes nd ribes sets. nce sheet w blic service, sheet works	No No vorks of
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement. Organizations Maintaining Collections Complete if the organization answered "Year the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final of the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for publisherical treasures, or other similar assets held for publisherical treasures, or other similar assets held for publisherical treasures.	servation easement footnote to the original statements of Art, Historias" on Form 990 for (ASC 958), not public exhibition, incial statements the control of	cal Tro , Part I to repo educati nat desce	revenue and e con's financial seasures, or (EV, line 8.) It in its revenue on, or research ribes these iter its revenue sta	xpense statements Other Sine statement in further in successions are statement are st	tement, a that desc milar As t and bala ance of pu d balance of public	Yes nd ribes sets. nce sheet w blic service, sheet works	No No vorks of sof art, yide the
(Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement. III Organizations Maintaining Collections Complete if the organization answered "Yeart, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finate if the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items	servation easement footnote to the original statements of Art, Historias" on Form 990 for (ASC 958), not public exhibition, incial statements the control of	cal Tro , Part I to repo educati nat desce	revenue and e con's financial seasures, or (EV, line 8.) It in its revenue on, or research ribes these iter its revenue sta	xpense statements Other Sine statement in further in successions are statement are st	tement, a that described that described the secretary described ance of public the secretary that the secretary described the secretary that the s	Yes nd ribes sets. nce sheet w blic service, sheet works service, prov	No No vorks of s of art, yide the
,	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports considerable between the organization and include, if applicable, the text of the the organization's accounting for conservation easement. Organizations Maintaining Collections Complete if the organization answered "Yes If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items Revenue included on Form 990, Part VIII, line 1	servation easement footnote to the orits of Art, Histories" on Form 990 (16 (ASC 958), not public exhibition, incial statements the original footnote (ASC 958), to republic exhibition, education of the original statements of the original	cal Tro Part I to repo educating eport in cation, o	revenue and e con's financial seasures, or (5V, line 8. Trust revenue on, or research ribes these iter its revenue state or research in financial season research	xpense sta statements Other Sin e statement in further ns itement ar urtherance	tement, a that described that described the and balance of public states that the ance of public states the ance of public states that the ance of public states the ance of	Yes nd ribes sets. nce sheet w blic service, sheet works service, pro	No No vorks of s of art, yide the
,	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports considerable by the text of the the organization's accounting for conservation easement. Organizations Maintaining Collections. Complete If the organization answered "Yes art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final fit the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets held for put following amounts relating to these items	servation easement footnote to the orits of Art, Histories" on Form 990 (16 (ASC 958), not public exhibition, incial statements the original footnote (ASC 958), to republic exhibition, education of the original statements of the original	cal Tro Part I to repo educating eport in cation, o	revenue and e con's financial seasures, or (5V, line 8. Trust revenue on, or research ribes these iter its revenue state or research in financial season research	xpense sta statements Other Sin e statement in further ns itement ar urtherance	tement, a that described that described the and balance of public states that the ance of public states the ance of public states that the ance of public states the ance of	Yes nd ribes sets. nce sheet w blic service, sheet works service, prov	No No vorks of s of art, yide the

Par	t III	Organizations Ma	aintaining Coll	lections of Art	, Histor	ical Tre	easu	ires, or Otl	her :	Similar Asse	ets (co	ntınued)	
3		g the organization's acq s (check all that apply)	uisition, accessior	n, and other recor	ds, check	any of tl	he fol	llowing that a	are a	significant use	of its o	collection	
а		Public exhibition			d		Loan	or exchange	prog	rams			
b		Scholarly research			e		Other	r					
С		Preservation for future	e generations										
4	Provi Part	ide a description of the XIII	organızatıon's coll	lections and expla	in how th	ey furthe	er the	e organizatior	ı's ex	empt purpose	ın		
5		ng the year, did the orga ts to be sold to raise fur								_	Yes	□ N	lo
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			orm 990), Part I	:V, lıı	ne 9, or rep	orte	d an amount	on Fo	rm 990,	Part
1a		e organization an agent ded on Form 990, Part)		an or other interm	nediary foi	contribi	ution	s or other as	sets r	-	Yes	□ N	lo
b	If "Y	es," explain the arrange	ement in Part XIII	and complete the	following	table				Amo	ount		_
c	Begii	nnıng balance						1 c					_
d	Addı	tions during the year						1d					_
е	Dıstr	ributions during the year	r					1e					_
f	Endı	ng balance						1f					_
2 a	Did t	the organization include	an amount on Fo	rm 990, Part X, lı	ne 21, for	escrow	or cu	stodial accou	nt lıa	bility?	Yes	□ N	lo
b	If "Y	es," explain the arrange	ment in Part XIII	Check here if the	e explanat	ion has l	been	provided in F	Part X	ш Г			
Pa	irt V	Endowment Fund	ds. Complete ıf	the organizatio	n answe	red "Ye:	s" or	n Form 990,	, Par	t IV, lıne 10.	_		
	_			(a)Current year		rior year	_	(c)Two years b	_	(d)Three years		e) Four yea	
	-	ning of year balance .		1,499,9	13	1,336,	505	1,24	5,1/9	1,268	3,53/	-	043,951
		butions		-51,83	20	208,	120	12:	1,326	-	1,642		99,860
		vestment earnings, gair	ns, and losses	-31,8.	50	200,	+36	12.	1,320		1,042		99,800
		s or scholarships	•				_						
	and pr	expenditures for facilities rograms	es	69,00	00	45,	000	30	0,000	25	5,000		1,521
		nistrative expenses .											260 507
g		f year balance		1,379,1		1,499,		<u> </u>	5,505	1,245	5,179	1,	268,537
2		ide the estimated percei	=	ent year end balar	nce (line 1	g, colum	nn (a))) held as					
а		d designated or quasi-e	ndowment >										
b		nanent endowment >											
С		porarily restricted endov		11.000/									
3a		percentages on lines 2a, there endowment funds		•	zation tha	t are hel	ld and	d administer	ad for	the			
Ja		nization by	not in the posses.	sion of the organi	Zation the	t are ne	iu ain	u aummistere	-u 101	uie		Yes	No
	(i) u	inrelated organizations									3a(i)	No
		related organizations .									3a(No
b		es" on 3a(II), are the rel	-	•			•				3t)	
4		ribe in Part XIII the inte			dowment	runas							
Pa	rt VI	Land, Buildings, Complete if the org			orm 990). Part I	V. lu	ne 11a. See	e For	m 990. Part	X. lıne	10.	
	Descr	ription of property	(a) Cost or oth (investme	er basis (b) C	ost or othe) Book valu	e
1a	Land												
		ngs											
		hold improvements											
		ment											
	Other												
		l lines 1a through 1e (Co	u olumn (d) must ed	qual Form 990, Pa	art X, colu	mn (B),	line 1	10(c))	1	<u> </u>			

Part VII Investments—Other Securities. Complete if th See Form 990, Part X, line 12.	ie organization answ	ered "Yes" on Form 9	90, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value		nod of valuation of-year market value
(1) Financial derivatives		COSt OF EHU-	or-year market value
(2) Closely-held equity interests			
(A) Total Stock Index Fund	376,029		
(B) Growth & Income Fund	388,828		F
(C) AC International Bond Fund	34,415		
(D) Value Index Fund	309,947		
(E) Vanguard GNMA Fund	118,064		
(F) Int Bond 1x Admiral (G)	131,849		F
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,359,132		
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on F	orm 990, Part IV, lır	ne 11c. See Form 990	, Part X, line 13.
(a) Description of investment	(b) Book value		nod 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	'Yes' on Form 990 Pag	rt IV line 11d. See Form	990 Part V line 15
(a) Description		Terry, line III See Form	(b) Book value
(1)			
(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.	nswered 'Yes' on Fo	rm 990, Part IV, line :	
1. (a) Description of liability	(b) Bo	ook value	
(1) Federal income taxes			
(2)			
(3)			
(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 of	the footnote to the org	ganization's financial stat	tements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 7			

Schedule D (Form 990) 2018

Pai		e venue per Audited Financial Staten Jization answered 'Yes' on Form 990, Pa		_	Return	
1		support per audited financial statements .			1	
2	Amounts included on line 1 but n	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	investments	2a			
b	Donated services and use of facili	nties	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	ed on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII) .		4b			
С	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12) .		5	
Par	t XII Reconciliation of Ex	penses per Audited Financial State	ments	With Expenses pe	r Return.	
1		uzation answered 'Yes' on Form 990, Pa			1	
2	Amounts included on line 1 but n				1	
		, ,	ء ا	I		
a	Donated services and use of facili		2a 2b		_	
b	Prior year adjustments		F		_	
С.	Other losses		2c		_	
d	Other (Describe in Part XIII)		2d		\dashv \Box	
e	Add lines 2a through 2d				2e	
3					3	
4	· ·	Part IX, line 25, but not on line 1:	1.	I		
a	•	ed on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIII)		4b		⊣ .	
С					4c	
5		4c. (This must equal Form 990, Part I, line 1	8).		5	
	t XIII Supplemental Info					
		Part II, lines 3, 5, and 9, Part III, lines 1a and s 2d and 4b Also complete this part to provide			art V, line 4, Pa	rt X, line 2, Part
	Return Reference		Ex	planation		
See A	Addıtıonal Data Table					
		+				

Page **4**

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

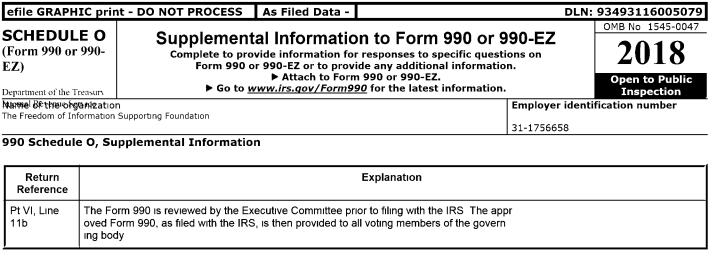
Software ID: 18007482 **Software Version:**

EIN: 31-1756658

Name: The Freedom of Information Supporting Foundation

Supplemental Information

Return Reference	Explanation
	The organization's Endowment Funds generate investment income, from these funds, the organ ization provides support to Freedom of Information Foundation of Texas, a supported organization



Return Explanation

990 Schedule O, Supplemental Information

Reference	Explanation
Pt VI, Line	The organization does not compensate officers or directors and does not have any employees

Return Explanation
Reference

Pt VI, Line 19 Governing documents, conflict of interest policy and financial statements are made available upon request

990 Schedule O, Supplemental Information

SCHEDULE R

(Form 990)

Related

Department of the Treasury

Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018

Employer identification number

DLN: 93493116005079OMB No 1545-0047

Open to Public Inspection

The Freedom of Information Supporting Foundation							31-17	⁷ 56658				
Part I Identification of Disregarded Entities Complete	e if the organ	ızatıon answe	ered "Yes	" on Form	990, Part	IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) (c) Primary activity Legal domicile (state or foreign country)			(d) Total income		(e) End-of-year assets		(f) Direct controllin entity			
Part II Identification of Related Tax-Exempt Organizat	tions Comple	te if the orga	inization	answered	"Yes" on F	orm 990,	Part IV	, line 34 be	cause it ha	d one or n	nore	
related tax-exempt organizations during the tax yea (a) Name, address, and EIN of related organization		(b) ary activity	Legal dor or foreig	(c) nicile (state in country)	(d Exempt Coo) le section	Public ch	(e) narity status n 501(c)(3))	(1 Direct co ent	ntrolling	Section (13) cor enti	512(b) ntrolled
(1)Freedom of Information Foundation 3001 N Lamar Blvd	See Stater	nent I		TX	501(c)(3)		7				Yes	No No
Austin, TX 78705 75-2170856												
For Paperwork Reduction Act Notice, see the Instructions for For	m 990			t No 5013	5v				Schodulo	R (Form 9	200) 35	119

(a) Name, address, and EIN of related organization	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant Income(related unrelated, excluded from tax under sections 512-	total income		Disprop	h) rtionate tions?	Code V-UB amount in b 20 of Schedule K (Form 106	I Ger ox ma pa	(j) eral or naging rtner?		ntage
					514)			Yes	No		Ye	No	1	
												-		
												+		
												+		
												+		
													1	
IV Identification of Related Organ because it had one or more related						ızatıon ans	wered "Yes	" on F	orm 9	90, Part I'	/, line	34		
		s a corporation		st during th	(d) controlling Tyentity (Co	(e)	wered "Yes (f) Share of total Income	Share	(g) e of end- year assets	-of- Per	/, line (h) centage	.	(1) Section (13) con entit	512(b trolle ty?
because it had one or more related (a) Name, address, and EIN of	organizations treated a	s a corporation	(c) egal micile or foreign	st during th	(d) controlling Tyentity (Co	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	.	Section (13) con entit	512(b trolle
because it had one or more related (a) Name, address, and EIN of	organizations treated a	s a corporation	(c) egal micile or foreign	st during th	(d) controlling Tyentity (Co	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	.	Section (13) con entit	512(b trolle ty?
because it had one or more related (a) Name, address, and EIN of	organizations treated a	s a corporation	(c) egal micile or foreign	st during th	(d) controlling Tyentity (Co	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	.	Section (13) con entit	512(b trolle ty?
because it had one or more related (a) Name, address, and EIN of	organizations treated a	s a corporation	(c) egal micile or foreign	st during th	(d) controlling Tyentity (Co	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	.	Section (13) con entit	512(b trolle ty?

Sched	ule R (Form 990) 2018		Pa	ge 3
Pa	Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p		No
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) (b) (c) (d) Name of related organization Transaction type (a-s) (b) (c) (d) Amount involved Method of determining a	ımount ı	nvolved	l
(1) Co	ntribution to Freedom of Information Foundation of Texas b 69,000 Cash			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile income		Legal Predominant domicile income (state or foreign unrelated,			(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General (managin partner	or g	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
	ı									Schedul	e R (Form	199	0) 2018		

Schedule R (Form 990) 2018						
Part VII Supplemental Information						
Provide additional information for responses to questions on Schedule R (see instructions)						
Return Reference	Explanation					
	Freedom of Information Foundation of Texas (FOIFT) provides leadership to ensure that the public's business is conducted in the public and protects individual liberties guaranteed by the First Amendment					

Schedule R (Form 990) 2018