-	-	
ev Form	99	0

294980 44
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.

Open to Public

Inter	nal Rev	venue Service	► Go to www.lrs.gov/Form990 for instructions and the latest information (1)	Inspection
A	For t	he 2018 calend	ar year, or tax year beginning 9/01 , 2018, and ending 8/31	, 2019
				ver identification number
_		1		1620415
	$\vdash$	duless change	3100 Cleburne St, Hannah Hall 201 E Telepho	<u> </u>
	H	· .	Uoughan TV 77004	
	⊢ "	nitial return	(832	2) 752-8284
	∐_f₁	nal return/terminated		
		mended return	G Gross re	eceipts \$ 3,699,529.
	ΠΑ	pplication pending	F Name and address of principal officer Lamont Waddell	n for subordinates? Yes X No
			Same As C Above    H(b) Are all subordinates   If "No," attach a list	included? Yes No
ī	Tax	-exempt status:	X 501(c)(3)   501(c) ( ) ◀ (insert no.)   4947(a)(1) or   527	(see instructions)
÷		ebsite: N/A		b <b>&gt;</b>
<del>-</del>				
K		n of organization		state of legal domicile TX
Pa		Summary		
	1	Briefly describ	e the organization's mission or most significant activities. The Foundation's purpo	ose is to aid in
ø		the advar	ncement of Texas Southern University's objectives and purp	<u>oses</u>
Ë				
Ĕ			·	
ð	2	Check this box		net assets.
9	3		ing members of the governing body (Part VI, line 1a)	3 18
S	4		ependent voting members of the governing body (Part VI, line 1b)	4 0
흹	5		of individuals employed in calendar year 2018 (Part V, line 2a)	5 0
Activities & Governance	6		of volunteers (estimate if necessary)	6 0
ď			d business revenue from Part VIII, column (C), line 12	7a 0.
$\dashv$	b	Net unrelated	business taxable income from Form 990-T, line 38	<b>7b</b> 0.
	_		Prior Year	Current Year
<u>.</u>	8	Contributions	2,816,587.	
Revenue	9	•	ce revenue (Part VIII, line 2g)	
ě	10		come (Part VIII, column (A), lines 3, 4, and 7d)	
<b>~</b>	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	882,942.
-	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,699,529.
	13	Grants and sin	nilar amounts paid (Part IX, column (A), lines 1-3)	3,286,916.
	14	Benefits paid t	to or for members (Part IX, column (A), line 4)	
_	15	Salaries, other	r compensation, employee benefits (Part IX, column (A), lines 5-10)	63,941.
Expenses	16a	Professional fu	undraising fees (Part IX, column (A), line 11e).	
Ē				<del>-</del>
꿃			ng expenses (Part IX, column (D), line 25) 1,400.	
	17	•	es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,193,863.
	18	=	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,544,720.
	19	Revenue less	expenses. Subtract line 18 from line 12	-845,191.
8 8			Part X June 16)  RECEIVED  Beginning of Current	t Year End of Year
Net Assets Fund Balanc	20	•	3,075,21	84. 4,781,366.
\$8	21	Total liabilities	(0.1)	
25	22	Net assets or t	furid balances. Subtract line 21 from the 20MAY 2 0 2020 3,405,4	
Pa		Signature		2,000,000.
				and holief it is true correct, and
comp	lete D	eclaration of prepare	lare that I have exemined his return, including accompanying schedules and statements, and to the best of my knowledge a er (other than officer) is based on all information of which prepared has any knowledge	and delier, it is true, correct, and
				13/20
Si.	ın /	signature	of officer Date	0/00
Sig He	,	Tama	nt Maddall Transurar	
*10	8		nt Waddell Treasurer	
				I if PTIN
		Print type pre		I of PTIN
Pai			Self-Prepared self-employee	d L
	par			
Us	e Or	lly Firm's addres	Fund's EIN	
		i	Phone no	
Mav	the	IRS discuss this	s return with the preparer shown above? (see instructions)	Yes No

Form 990 (2018) Texas Southern University Foundation	74-1620	415	P	age 2
Part III Statement of Program Service Accomplishments				
Check if Schedule O contains a response or note to any line in this Part III				
1 Briefly describe the organization's mission:				
The Foundation's purpose is to aid in the advancement of Texas S				's
objectives and purposes.				
2 Did the organization undertake any significant program services during the year which were not listed on the p	rior	_	_	
Form 990 or 990-EZ?	[	Yes	X	No
If "Yes," describe these new services on Schedule O.	_	_		
3 Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices?	Yes	X	No
If "Yes," describe these changes on Schedule O.				
4 Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	rvices, as meas ons to others, t	sured by e	expens xpens	ses. es,
and revenue, if any, for each program service reported.				
4 (0.1)				
	(Revenue \$_			)
University support includes expenses incurred for receipt and ac			<u>fu</u>	n <u>ds</u> _
in support of the schools, colleges, institutional units and pro				
Southern University. Scholarhsip support includes charges for tu	<u>lition fee</u>	s, roc	m_&	
board, books and stipend for scholars/ students in various acade	<u>mic disci</u>	plines	<u> </u>	
·				
4b (Code:) (Expenses \$ including grants of \$) (	Revenue \$			)
	<del></del>			
	<b></b> -			
4c (Code: ) (Expenses \$ including grants of \$ ) (	Revenue \$			)
	· <del></del>			—′
,				
		'		
		<b>-</b> -		
4 d Other program services (Describe in Schedule O.)		·		
(Expenses \$ including grants of \$ ) (Revenue \$			)	
4e Total program service expenses ► 4 242 536	<del></del>		<u>,</u>	

74-1620415

Page 3

# Form 990 (2018) Texas Southern University Foundation Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	x	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part Il	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	, je	\$1.50 \$1.50	7,12
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	l <u></u>	
t	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
C	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
d	I Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
b	was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		x
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	х	
AA		Form	990	2018)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
I	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
28	instructions for applicable filing thresholds, conditions, and exceptions):			
ě	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	-	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38		х
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 0		162	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		-	
	(gambling) winnings to prize winners?	1 c	000	2010
BAA	TECNION GUIGITO	rorm	フラリ (	(2018)

Form 990 (2018) Texas Southern University Foundation

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
	2 a	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.			
	ŀ	off at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		<b></b>
		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	<b></b>	ŀ
	3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
		of Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q	3 b	<u> </u>	
		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	- 55		
	70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?.	4a		X
	b	If 'Yes,' enter the name of the foreign country. ►			
		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		ļ
	6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
	b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь		
	7	Organizations that may receive deductible contributions under section 170(c).	3.5		
	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
		services provided to the payor?	7 a		X
		If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7Ь		
	C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		х
	ď	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 c		
		Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	- <u>-</u>		$\frac{1}{X}$
		Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
		If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	9	as required?	7 g		
	ħ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Q	Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 h		
	U	organization have excess business holdings at any time during the year?			
	9	Sponsoring organizations maintaining donor advised funds.	8		
		Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
		Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
		Section 501(c)(7) organizations. Enter	30		
		Initiation fees and capital contributions included on Part VIII, line 12   10a		ŀ	
		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
		Section 501(c)(12) organizations. Enter			l
		Gross income from members or shareholders	ļ		j
		Gross income from other sources (Do not net amounts due or paid to other sources	İ		1
		against amounts due or received from them.)			[
	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . 12b	$\neg$		
	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	а	Is the organization licensed to issue qualified health plans in more than one state?	13a	I	
		Note. See the instructions for additional information the organization must report on Schedule O.	ł	1	
		Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
		Enter the amount of reserves on hand			
		Did the organization receive any payments for indoor tanning services during the tax year?	14a	]	X
	b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
		Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	_ [	Ţ	
		excess parachute payment(s) during the year?  (4) Year loss instructions and (1) Four 4700 O Local L. N.	15		<u> </u>
		If 'Yes,' see instructions and file Form 4720, Schedule N.			ليب
	16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> X</u>
-		If 'Yes,' complete Form 4720, Schedule O.			<u> </u>
- (	BAA	TEEA0105L 12/31/18	Form	990 (	2018)

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 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 Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 18 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 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X a The governing body? 8 a **b** Each committee with authority to act on behalf of the governing body? 8 b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10 a X 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? 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ... 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 12 c X 13 Did the organization have a written whistleblower policy? . 13 14 Did the organization have a written document retention and destruction policy? 14 X 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? X 15 a a The organization's CEO, Executive Director, or top management official X **b** Other officers or key employees of the organization. 15 b 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 X taxable entity during the year? . 16a 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > <u>None</u> 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule 0 State the name, address, and telephone number of the person who possesses the organization's books and records Lamont Waddell 3100 Cleburne St, Hannah Hall 201 Houston TX 77004 (832) 752-8284

Form 990 (2018) Texa	s Southern	University	Foundation
----------------------	------------	------------	------------

74-1620415

Page 7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C)	)					
(A) Name and Title	(B) Average hours per	thai	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D)  Reportable compensation from the organization	(E)  Reportable compensation from	(F) Estimated amount of other compensation			
	per week (list any hours for related organiza- tions below dotted line)	or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Gerald B Smith	2									
Chairman	0	X						0.	0.	0.
(2) Willie J. Alexander	1									
Vice President	0	X	Ш		<u> </u>			0.	0.	0.
_(3) Lamont Waddell	5						-			
Treasurer	0	Х			L.,			0.	0.	0.
(4) Dr. Melanie Johnson	1	ļ								
Secretary	0	Х						0.	0.	0.
(5) Dr. Judith Craven	1									
Trustee	0	X						0.	0.	0.
	1									
Trustee	0	X		_			_	0.	0.	0.
	1									
Trustee	0	Х	Щ					0.	0.	0.
(8) Herbert Fain	1									
Trustee	0	Х					_	0.	0.	0.
(9) Marion Harper	1						i			
Trustee	0	Х						0.	0.	0.
(10) Alan Helfman	1		Ì						•	
Trustee	0	X						0.	0.	0.
(11) Antoinette Jackson	1						ł			
<u>Trustee</u>	Ō	X						0.	0.	0.
(12) Manson Johnson	1						- 1			
Trustee	0	X		$\Box$				0.	0.	0.
(13) Ramon Manning	1				i					
Trustee	0	Х	$\perp$	$\Box$			$\Box$	0.	0,	0.
(14) Troy Pradia	1			Į	[					
Trustee	0	Х						0.	0.	0.

		, ,,,			-,-			- mgmost oom	polisatoa ziii	<del>5.0,0</del> 0	<b>3</b> (00111	mucuj
(A) Name and title	Average hours	Вòоx	, unle	Po: check	erson	than is both	h an	(D) Reportable	<b>(E)</b> Reportable		<b>(F)</b> Estimate	d
Name and tibe	per week (list any hours for related organiza - tions below	or director	-	옦		Highest compe	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	am co	ount of o mpensate from the rganizate ind relate ganization	other tion e on ed
	dotted line)	8	stee			nsated						
(15) Matthew Rogers Trustee	10	х						0.	0			0.
(16) Regina Rogers Trustee	$-\frac{1}{0}$	x						0.	0			0.
(17) Dr. Frazier Wilson Trustee	1	x						0.	0			0.
(18) Michael Williams Trustee	1	х						0.	0			0.
(19) Thanh Le Senior Accountant	_ 45 _				х			63,941.	0		-	0.
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total	<del></del>	I				l	<b></b>	63,941.	0			0.
c Total from continuation sheets to Part VII, Secti	on A						<b>•</b>	0.	0			0.
d Total (add lines 1b and 1c)							<b>•</b>	63,941.	0			0.
2 Total number of individuals (including but not limited from the organization ► 0	to those I	sted	abo	ve) v	who	receiv	ved				วก	
											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru <i>h ındıvıdu</i>	stee, al	key	em e	ploy	yee,	or h	iighest compensat	ed employee	3		Х
For any individual listed on line la, is the sum of the organization and related organizations greate such individual									rom	4		X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e compen s,' comple	satio	n fro	om : lule	any <i>J fo</i>	unre <i>r suc</i>	late h p	d organization or i	individual	5	-	X
Section B. Independent Contractors												
<ol> <li>Complete this table for your five highest compen compensation from the organization. Report compen</li> </ol>	sated indessation for	epend the ca	dent alen	t cor dar y	ntrac year	ctors endir	tha ng w	t received more th with or within the org	nan \$100,000 of ganization's tax yea	ır.		
(A) Name and business add	ress							<b>(B)</b> Description o	f services		(C) ensatio	วท
Crystal Edwards 2927 Quail Valley East Dri	ve Misso	ouri	Ci	ty,	TX	774	89				26,	773.
LaRence Snowden 3202 South MacGreogor Way	Houston,	TX	77	021								500.
Howard Henderson 2028 Doolan Drive Conroe,	TX 7730	)1										229.
Brittani Armstrong 12415 Atwell Drive Hous												<u> 250.</u>
Georgia Provost 3821 N. Macgregor Way Hous  2 Total number of independent contractors (including t				.c. 1		l ab a		who socould mare	than		21,0	000.
\$100,000 of compensation from the organization		icu ((	J 1110	ise II	iste0	ano/	ve) \	who received more	uidii			Ì
4.00,000 of compensation from the organization	U								1			

					· · · · · · · · · · · · · · · · · · ·	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function	Unrelated business revenue	Revenue excluded from tax under sections
<u> </u>	•	Fadayatad assess		4.1			revenue		512-514
캶		Federated campaigns	•	1 a		-			
를		Membership dues		1Ь	<del></del>				
₹ ₹		Fundraising events		1 c					
Ē		Related organizations		1 d					
S.E.S	е	Government grants (contributi	ons)	1 e					
and Other Similar Amounts		All other contributions, gifts, g similar amounts not included		1f	2,816,587.				
	-	Noncash contributions included	d in lines 1a-	1f. \$_					
<u>8</u>	h	Total. Add lines 1a-1f	<u> </u>	<u> </u>	·· · · · · · · · ·	2,816,587.			
Ę	_				Business Code				
Program Service Revenue	2 a								
e B	b								
Š	C								
8	d								
щ	e	AU-#							
5	T	All other program service	ce revenu	e. L					
Δ.		Total. Add lines 2a-2f		<del></del>					<u> </u>
	3	Investment income (incother similar amounts)	luding div	idends	, interest and				
•	4	•	t of tax-e	xemnt	hand proceeds >				
	<ul><li>4 Income from investment of tax-exen</li><li>5 Royalties</li></ul>			, ciripi	bona procedus			·	
	_	Noyames	(i) Re	al	(ii) Personal				
	6a	Gross rents .							
		Less: rental expenses							
		Rental income or (loss)							
		Net rental income or (lo	oss) .	· · ·	<u> </u>				
		Gross amount from sales of	(i) Secu	nties	(II) Other				
	, a	assets other than inventory				1			}
	h	Less. cost or other basis				•			
		and sales expenses							
	С	Gain or (loss)							
	d	Net gain or (loss)			<b>&gt;</b>				
ę	8a	Gross income from fund	draising e	vents					
	-	(not including \$							
≽¥e		of contributions reported	d on line	1c).					
Œ		See Part IV, line 18		а	850,457.	}			
Other Reven	Ь	Less: direct expenses		b				·	
g	С	Net income or (loss) fro	m fundra	ising e	vents >	850,457.			
	9 a	Gross income from gam See Part IV, line 19	ning activi	ties. a				•	
		Less. direct expenses		b		<u> </u>			
	С	Net income or (loss) fro	m gamıng	g activi	ties •				
	10 a	Gross sales of inventory and allowances	y, less ret	urns a					
	, P	Less. cost of goods sold	d	- b					
		Net income or (loss) fro		_	L		· · · · · · · · · · · · · · · · · · ·	······································	
		Miscellaneous Rovenu		1	Business Code				5.1
	11 a	Interest Income	e		900099	18,398.	18,398.		
		In-Kind Stock I			523000	14,087.	14,087.		
	С			= == - -		= 1,00,11		<del></del>	<u> </u>
	d	All other revenue							
	е	Total. Add lines 11a-11	d.		. •	32,485.			
	12	Total revenue. See inst	ructions		▶		32 485	0	0.

	Check if Schedule O contains a response or note to any line in this Part IX							
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses			
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,304,342.	2,304,342.					
2	Grants and other assistance to domestic individuals. See Part IV, line 22	982,574.	982,574.					
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16							
4 5	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees	63,941.	63,941.	0.	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	` 0.			
7	Other salaries and wages .							
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)							
9	Other employee benefits							
10	Payroll taxes							
11	Fees for services (non-employees)	· · · · · · · · · · · · · · · · · · ·						
a	Management							
Ŀ	Legal							
(	: Accounting	12,203.	4,566.	7,637.				
c	Lobbying		1	, , , , , , , , , , , , , , , , , , , ,				
6	Professional fundraising services. See Part IV, line 17							
f	Investment management fees .							
g	Other. (If line 11g amount exceeds 10% of line 25, column							
12	(A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	1,800.	400.		1,400.			
	Office expenses	62,775.	35,210.	27,565.	1,400.			
14	Information technology .	02,113.	33,210.	21,303.				
15	Royalties .							
16	Occupancy							
17	Travel.	61,365.	57,801.	3,564.				
	Payments of travel or entertainment expenses for any federal, state, or local public officials	01,303.	37,001.	3,304.				
19	Conferences, conventions, and meetings	411,632.	276,634.	134,998.				
20	Interest	57,055.		57,055.				
21	,							
22	Depreciation, depletion, and amortization .	66,912.	66,912.					
23	Insurance	19,747.		19,747.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)							
a	Other Professional Services	403,694.	387,612.	16,082.				
	Printing and Publications	28,988.	12,145.	16,843.				
	Miscellaneous	22,152.	14,232.	7,920.				
C	Facilities&Equipment	19,325.	19,325.					
e	All other expenses .	26,215.	16,842.	9,373.				
25	Total functional expenses. Add lines 1 through 24e	4,544,720.	4,242,536.	300,784.	1,400.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ If following SOP 98-2 (ASC 958-720)							

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 2,442,088. Cash - non-interest-bearing 3,153,045 1 2 Savings and temporary cash investments 239,818. 2 107,794. 3 Pledges and grants receivable, net . 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 2,156,524 10b b Less, accumulated depreciation 76,251 119,289 10 c 2,080,273 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 14 15 Other assets. See Part IV, line 11 15 163,132 151,211 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,675,284 4,781,366 Accounts payable and accrued expenses 17 Grants payable 18 18 571,829. 269,846 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 9,145. Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 1,632,710. Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 8,332. Total liabilities. Add lines 17 through 25 269,846 26 222,016. X and complete Organizations that follow SFAS 117 (ASC 958), check here > Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 774,908 27 637,937. Temporarily restricted net assets. 28 29 Permanently restricted net assets 2,630,530 1,921,413. Fund Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building, or equipment fund. 31 32 Retained earnings, endowment, accumulated income, or other funds 32 **₹** 33 Total net assets or fund balances 3,405,438 33 2,559,350. Total liabilities and net assets/fund balances 4,781,366. 3,675,284 TEEA0111L 08/03/18 BAA Form 990 (2018)

Form	1990 (2018) Texas Southern University Foundation 74	1-162041	5	Pa	age 12
Par	t XI Reconciliation 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	3.6	99.!	529.
2	Total expenses (must equal Part IX, column (A), line 25)	2			720.
3	Revenue less expenses. Subtract line 2 from line 1	3			191.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			438.
5	Net unrealized gains (losses) on investments	5			897.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	10			
Date	column (B))	10	2,5	59,	<u> 350.</u>
Par	t XII Financial Statements and Reporting				'
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie separate basis, consolidated basis, or both:	wed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepabasis, consolidated basis, or both:	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the autreview, or compilation of its financial statements and selection of an independent accountant?	lit,	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		х
b	off 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	•	3ь		l
BAA	TEEA0112L 08/03/18	-	Form	990 (	(2018)

.

,

•

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-F7

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Texas Southern University Foundation 74-1620415 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (iv) is the organization listed (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) in your governing document? Yes No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,109,412.	2,074,182.	3,233,003.	4,564,698.	3,681,131.	14,662,426.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						0.		
4	Total. Add lines 1 through 3	1,109,412.	2,074,182.	3,233,003.	4,564,698.	3,681,131.	14,662,426.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.		
6	Public support. Subtract line 5 from line 4						14,662,426.		
Sec	tion B. Total Support								
	ndar year (or fiscal year nning in) ►	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total		
7	Amounts from line 4	1,109,412.	2,074,182.	3,233,003.	4,564,698.	3,681,131.	14,662,426.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					18,398.	18,398.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.		
11	Total support. Add lines 7 through 10						14,680,824.		
12	Gross receipts from related activ	vities, etc. (see in:	structions) .		•	12	0.		
	First five years. If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth t	tax year as a section	on 501(c)(3)	<b>▶</b> □		
Sec	tion C. Computation of Pu		<del></del>						
14	Public support percentage for 20	• .	•	ne 11, column (f))		14	99.87%		
15	Public support percentage from	2017 Schedule A,	Part II, line 14	•	•	. 15	0.00%		
16a	<b>33-1/3% support test—2018.</b> If to and <b>stop here.</b> The organization				d line 14 is 33-1/3	3% or more, check	this box		
b	b 33-1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop her	e. Explain in Part	VI how		
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as	box and <b>stop her</b> a publicly support	<b>re.</b> Explain in Part ed organization.	VI how the ►		
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	or 17b, check th				
DAA							00 000 EZ 2010		

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018  9 Amounts from line 6  10a Gross income from interest, 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  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	(f) Total
and membership fees received. (Do not include any funusual grants.)  2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues leved for the organization's benefit and either pard to or expended on its behalf.  5 The value of services or facilities furnished by the organization without charge or facilities furnished to the organization without charge orga	
2 Gross receipts from admissions, merchandles sold or services performed, or facilities furnished in any activity that is related to the organization's tax -evempt purpose and any activity that is related to the organization's tax -evempt purpose that are not an unrelated trade or business under section 513 4 Tax reverues levered for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from other than disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year careful or the year careful or the part of the p	,
that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge of Total. Add lines 1 through 5. 7a Amounts included on lines 1, 2, and 3 received from disqualified persons. b Amounts included on lines 2, and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b. 8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support Calendar year (or fiscal year beginning in) P 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, reist, royalbes, and income from similar sources. b Unrelated business taxable income (less section 51 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activites not included in line 10b, whether or not the business is	•
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.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year  c Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) > (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018  10a Gross income from interest, dividends, payments received on securities loans, rents, royaltes, and income from similar sources b Unrelated business at saable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is section 51 taxes from businesses is acquired after June 30, 1975 c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	•
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. b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) > 9 Amounts from line 6  10a Gross income from interest, 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 c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	•
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year  c Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) > (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018  9 Amounts from line 6  10a Gross income from interest, 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  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	
and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year  c Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) > 9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	
8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in)  9 Amounts from line 6  10a Gross income from interest, 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  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	
To from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ► (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018  9 Amounts from line 6  10a Gross income from interest, 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  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	
Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018  9 Amounts from line 6  10a Gross income from interest, 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  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	
9 Amounts from line 6  10a Gross income from interest, 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  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	(f) Total
payments received on securities loans, rents, royalties, and income from similar sources	
income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is	
Net income from unrelated business activities not included in line 10b, whether or not the business is	
regularly carried on	
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	
13 Total support. (Add lines 9, 10c, 11, and 12.)	
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	▶ 🗌
Section C. Computation of Public Support Percentage	
15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2017 Schodulo A Port III, line 15	<u> </u>
16 Public support percentage from 2017 Schedule A, Part III, line 15	<del></del>
	<del></del>
17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	
19a 33-1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line	
is not more than 33-1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <b>b 33-1/3% support tests—2017.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%	▶
lyne 18 is not more than 33-1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization of the organizat	on ►

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

Section	A. All	<b>Supporting Organizations</b>
	A. A.	Supporting Organizations

			Yes	No		
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.					
2	Did the organization have any supported organization that does not have an IRS determination of status under section	1				
-	509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2				
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.					
t	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 <b>Part VI</b> when and how the organization made the determination	3b	_			
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use					
<b>4</b> a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	 4a				
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.					
		40				
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> 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				
5-	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b)					
Ja	and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported					
	organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by					
	amendment to the organizing document)	5a				
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the					
	organization's organizing document?	5b				
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c				
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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 <b>Part VI</b> .	-6				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor					
•	(as 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).	8				
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons					
	as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> .	9a				
b	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? If 'Yes,' provide detail in <b>Part VI</b> .					
C	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 <b>Part VI</b> .	9c				
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding					
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	10a	<del> </del>			
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine					
	whether the organization had excess business holdings.)	10ь				

Part IV Supporting Organizations (continued)  11 Has the organization accepted a gift or contribution from any of the following persons?  a 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?  b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.  11c  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	No No No
a 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?  b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.  11c  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	No
a 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?  b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.  11c  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	
b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.  11c  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	
Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	Yes	
or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> 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,	Yes	
directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,		No
applied to such powers during the tax year.		No
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.		No
Section C. Type II Supporting Organizations		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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	
Section 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?		
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).		
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
Section E. Type III Functionally Integrated Supporting Organizations	l	Ь
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instructions).		
a  The organization satisfied the Activities Test. Complete line 2 below.		
b The organization is the parent of each of its supported organizations. Complete line 3 below.		
c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	tions)	
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 <b>Part VI identify those supported</b> 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.		
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.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
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 <b>Part VI</b> the role played by the organization in this regard.		

_	edule A (Form 990 or 990-EZ) 2018 Texas Southern University Found			20415 Page
<u> </u>	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga  Check here if the organization satisfied the Integral Part Test as a qualifying trust			Part VI) See
	instructions. All other Type III non-functionally integrated supporting organization	ns mu	ist complete Sections A	through E.
Sec	tion A – Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	. 3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
æ	Average monthly value of securities	1a		
ŧ	Average monthly cash balances			
(	Fair market value of other non-exempt-use assets	1c		
•	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6	•	
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated (see instructions).	grated	Type III supporting org	anization

BAA

Schedule A (Form 990 or 990-EZ) 2018

BAA

d Excess from 2017 e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Texas Southern University Foundation 74-1620415 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 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.)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Texas Southern University Foundation 74-1620415 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. |Part | Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year). 2,205,380 Aggregate value of grants from (during year) ... Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes X No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? X Yes No Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements....... 2 b 2с c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for

# Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- **b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenue included on Form 990, Part VIII, line 1
- **b** Assets included in Form 990, Part X.

conservation easements.

<b>►</b> \$			
the follow	เกฎ		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3301L 10/10/18

Schedule D (Form 990) 2018

►\$ ►\$

Schedule D (Form 990) 2018 Texa	s Southe	rn Univers	sity Fo	undation		74-162	0415	Page 2
Part III Organizations Mainta	ining Coll	ections of A	rt, Histor	rical Treasu	ires, or C	ther Similar Ass	ets (conti	nued)
3 Using the organization's acquisition items (check all that apply).	n, accession, a	and other record	s, check an	y of the follows	ng that are a	a significant use of its	collection	
a Public exhibition		d	Loan o	r exchange pr	ograms			
<b>b</b> Scholarly research		e	Other	<del></del>				
c Preservation for future gene								
4 Provide a description of the organi. Part XIII.			_	_		, , ,		
5 During the year, did the organiza to be sold to raise funds rather t	ation solicit o	r receive donat	ions of art,	historical trea	asures, or c	other similar assets	Yes	No
Part IV Escrow and Custodia	l Arranger	nents. Comp	olete if th	e organiza		rered 'Yes' on Fo		
line 9, or reported an	amount or	Form 990,	Part X, I	ine 21.				
1 a is the organization an agent, tru on Form 990, Part X?	stee, custodi	an or other inte	rmediary fo	or contribution	s or other	assets not included	Yes	XNo
b If 'Yes,' explain the arrangemen	t in Part XIII	and complete t	he followin	g table:				
							Amount	
c Beginning balance						1 c		
d Additions during the year				•		1 d		
e Distributions during the year	•		,		•	1 e		
f Ending balance	•					1f		0.
2a Did the organization include an a	amount on Fo	orm 990, Part X	, line 21, f	or escrow or c	custodial ac	count liability?	X Yes	No
<b>b</b> If 'Yes,' explain the arrangement	t in Part XIII.	Check here if t	he explana	ation has beer	provided o			П
Part V Endowment Funds. C	complete if	the organiza	ation ans	wered 'Yes	on Forn	n 990, Part IV, lir	ne 10.	
•	(a) Curren	t year (I	) Prior year	(c) Two	years back	(d) Three years back	(e) Four ye	ears back
1 a Beginning of year balance	L							
<b>b</b> Contributions								
c Net investment earnings, gains, and losses								
d Grants or scholarships .								
<ul> <li>Other expenditures for facilities and programs</li> </ul>								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentag	e of the curre	ent year end ba	lance (line	1g, column (a	a)) heid as	I		
a Board designated or quasi-endowm		9	· 5		**			
<b>b</b> Permanent endowment ▶		<u> </u>						
c Temporarily restricted endowmer	nt ►	કૃ						
The percentages on lines 2a, 2b, a	nd 2c should e	equal 100%						
_			tion that are	a bald and adm		- Al		
3a Are there endowment funds not in to organization by:	ne hozzezzioi	r or the organiza	uon mat an	e neid and adm	iiriisterea ioi	ne	Yes	No
(i) unrelated organizations.							3a(i)	
(ii) related organizations					•		3a(ii)	
b If 'Yes' on line 3a(ii), are the rela	ated organiza	tions listed as i	eauired or	Schedule R?			3b	-
4 Describe in Part XIII the intended								
Part VI Land, Buildings, and		_						
Complete if the organi			on Form	990. Part I	V. line 1	la. See Form 990	). Part X.	line 10.
Description of property		<del>,</del>		· · · · · · · · · · · · · · · · · · ·	<del>-                                    </del>		<del> </del>	
Description of property		(a) Cost or oth (investme		(b) Cost or of basis (other		(c) Accumulated depreciation	(d) Book	value
1 a Land .	., ,	<del> </del>	,000.			·····	6	6,000.
<b>b</b> Buildings		1,882				36,612.		6,298.
c Leasehold improvements							-/07	<del>-,</del>
<b>d</b> Equipment		207	,614.	<del></del>		39,639.	16	7,975.
e Other		207	, , , , , ,			35,035.		<u>,,,,,,</u>
Total. Add lines 1a through 1e. (Colum	n (d) must e	gual Form 990.	Part X. co	lumn (B). Ime	10c.)		2 08	0,273.
BAA		,		,-,,		Schedu	le D (Form 9	

(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 15)

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of hability	(0)	JOOK Value
(1) Federal income taxes	,	
(2) Overdraft Cash	1	8,332.
(3)		
(4)		
(5)		
(6)		-
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	<b>•</b>	8,332.

2 Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

chedule D (Form 990) 2018 Texas Southern University Foundation	74-1620415	Page 4
art XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	······································	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities . 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)	i	•
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b .		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
<u>art XII</u> Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	es per Return. N/A	
	es per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	2e	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	. 1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	2e	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	2e	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	2e	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	2 e 3	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments	2e 3	

#### **SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information. OMB No 1545-0047

Open to Public Inspection

Name of the organization					-	Employer identific	ation number			
	Texas Southern University Foundation 74-1620415									
Part I Fundraising Activities. Complete If the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.										
1 Indicate whether the organization	raised funds th	rough any	of the foll	owing activities. Check	all that	apply.				
a X Mail solicitations			е	X Solicitation of non-	governn	nent grants				
<b>b</b> X Internet and email solicitation	b X Internet and email solicitations f Solicitation of government grants									
c X Phone solicitations			g	X Special fundraising	events					
d X In-person solicitations										
2a Did the organization have a written employees listed in Form 990, Pa	or oral agreemen irt VII) or entity	it with any in connec	individual ( tion with p	including officers, directo rofessional fundraising	rs, truste services	es, or key	Yes X N			
<b>b</b> If 'Yes,' list the 10 highest paid in compensated at least \$5,000 by t	dıvıduals or ent he organizatıon	tities (fund	lraisers) pu	ursuant to agreements	under wl	nich the fundrai	ser is to be			
(i) Name and address of individual or entity (fundraiser)	· (ii) Activity	have custo	fundraiser ody or control ributions?	(iv) Gross receipts from activity	or r	nount paid to etained by) aiser listed in olumn (i)	(vi) Amount paid to (or retained by) organization			
		Yes	No							
1										
2										
3										
4										
5										
6										
7					•					
8										
9										
10										
Total .	<del>1</del>	·	<u> </u>				0			
List all states in which the organization licensing.	on is registered o	or licensed	to solicit co	ontributions or has been	notified if	is exempt from				

Sch	edůle	G (Form 990 or 990-EZ) 2018 Texas	Southern Univer	sity Foundation	n 74-16	20415 Page 2
Pa	rt II	Fundraising Events. Complete if	the organization a	nswered 'Yes' on Fo	orm 990, Part IV, I	ine 18, or reported
		more than \$15,000 of fundraising List events with gross receipts gr	event contribution eater than \$5.000.	s and gross income	e on Form 990-EZ,	lines I and 6b.
		3	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Maroon and Gra		None	(add column (a) through column (c))
R	1		(event type)	(event type)	(total number)	trirough column (c))
REVENUE	1	Gross receipts .	850,457.			850,457.
E	2	Less. Contributions .				
	-					
	3	Gross income (line 1 minus line 2) .	850,457.			850,457.
	4	Cash prizes				
D	5	Noncash prizes .				
D I R E C T	6	Rent/facility costs				
	7	Food and beverages				
Ž	8	Entertainment .	•			
EXPENSES	9	Other direct expenses				
Š	10	Direct expense summary. Add lines 4 thi	ough 9 in column (d)			
	11	Net income summary. Subtract line 10 fr		•		850,457.
Pa	t III	Gaming. Complete if the organiza	ation answered 'Ye	s' on Form 990, Pa	rt IV, line 19, or re	ported more than
	<del>,</del>	\$15,000 on Form 990-EZ, line 6a.				
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
ñ						
	1	Gross revenue .				
		Cash prizes				
DIRECT	3	Noncash prizes .		,		
E N C S T E	4	Rent/facility costs .				
	5	Other direct expenses				,
		· · · · · · · · · · · · · · · · · · ·	Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)	• •		
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	ın (d).		
	als th	er the state(s) in which the organization co ne organization licensed to conduct gamino				Yes No
t	if 'N	lo,' explain.				
10 -	 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	e any of the organization's gaming license		•		
		e any of the organization's gaming license es,' explain.		-	<del>-</del>	Yes No
BAA			TEEA3702L 0	7/02/18	Schedule G (Fon	m 990 or 990-EZ) 2018

Scne	edule G (Form 990 or 990-E2) 2018 Texas Southern University Foundation	74-162	20415	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed administer charitable gaming?	to	Yes	No
12	Indicate the percentage of gaming activity conducted in:	1 1		
	a The organization's facility	13a		કૃ
	<b>b</b> An outside facility	13b		
	Enter the name and address of the person who prepares the organization's gaming/special events books and recoi		<del> </del>	
	Name ►			
	Address ►			
15 <i>a</i>	a Does the organization have a contract with a third party from whom the organization receives gaming reve		∏Yes	No
	b If 'Yes,' enter the amount of gaming revenue received by the organization▶ \$ and			
	of gaming revenue retained by the third party ► \$			
•	c If 'Yes,' enter name and address of the third party.			
	Name •			<b>-</b> -
	Address >			
16	Gaming manager information:			
	Name •	<b></b>		
	Gaming manager compensation ► \$			
	Description of services provided			<b>-</b> -
	Director/officer Employee Independent contractor			
17	Mandatory distributions.			
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	n the	1	
D	organization's own exempt activities during the tax year ► \$			
Par	and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.	ny addi	(III) and ( tional	v);

SCHEDULE 1		ָבָי פֿיליקי. פֿיליים	Grants and Oth	and Other Assistance to Organizations,	to Organization	IS,		OMB No 1545-0047
		Complet	e if the organization	Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.	orm 990, Part IV, line 2	ales 21 or 22.	<u> </u>	2018
epartment of the Treasury Iternal Revenue Service	•		► Go to www.irs	<ul> <li>Attach to Form 990.</li> <li>Go to www.irs.gov/Form990 for the latest information</li> </ul>	u. st information		· · · ·	Open to Public Inspection
ame of the organization T	Texas Southern Un	University F	Foundation				Employer Identification number 74-1620415	atton number
Part   General In	<b>General Information on Grants and Assistance</b>	and Assista	nce				,	
1 Does the organizate the selection criter 2 Describe in Part IV	Does the organization maintain records to substantiate the amount of the selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the use	stantiate the amo ints or assistance res for monitoring	unt of the grants or e? . I the use of grant fur	ne grants or assistance, the grantees' eligibility for the grants or assistance, and of grant funds in the United States.	eligibility for the grants	or assistance, and		Yes X No
Part II Grants and Form 990,	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Ye Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	to Domestic (	Organizations at that received r	izations and Domestic Governments. Complete if the organization answered 'Yes' on eceived more than \$5,000. Part II can be duplicated if additional space is needed.	ernments. Comple	ete if the organizaticated if additional	ion answered 'Y space is neede	es' on d.
1 (a) Name and address of organization or government	ess of organization mment	(e) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) Texas Southern University 3100 Cleburne Street Houston, TX 77004	<u>University</u> <u>treet</u> 04	74-6001391		2,368,283.	0.			
<u>(E</u>								
4								
<u></u>								
<u>u</u>								
<u></u>								
2 Enter total numbe 3 Enter total numbe	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. Enter total number of other organizations listed in the line 1 table.	d government or isted in the line	ganizations listed 1 table	in the line 1 table				0 0
3AA For Paperwork R	3AA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	the Instructions	for Form 990.		TEEA3901L 07/13/18	07/13/18	Schedu	Schedule I (Form 990) (2018)

Schedule I (Form 990) (2018) Texas Southern University Foundation

Part III Grants and Other Assistance to Domestic Individuals. Complete If the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Aid	1 Aid for College Tuition/Fees		982, 574.			
7						
က						
4						
ro						
9						
7						
Part IV	Part IV   Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	de the information	required in Part I,	line 2; Part III, col	umn (b); and any other	additional information.

#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Texas Southern University Foundation

Employer Identification number 74-1620415

#### Form 990 Governing Body Review

Form 990 is reviewed by the Foundation Treasurer and the Audit Committee.

#### **Annual Related Party Questionaire s**

Foundation Board Trustees completes annual Related Party questionaires which is reviewed by the independent auditor.

#### Governing Documents, etc. Available to Public

Documents are available upon request.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.