DLN: 93493252006510 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 D Employer identification number B Check if applicable SAN ANGELO AREA FOUNDATION □ Address change 73-1634145 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 221 S IRVING ST ☐ Amended return ☐ Application pending (325) 947-7071 City or town, state or province, country, and ZIP or foreign postal code SAN ANGELO, TX $\,$ 76903 $\,$ G Gross receipts \$ 41,359,357 Name and address of principal officer H(a) Is this a group return for MATT LEWIS ☐Yes **☑**No subordinates? 221 S IRVING ST H(b) Are all subordinates SAN ANGELO, TX 76903 ☐Yes ☐No ıncluded? **✓** 501(c)(3) 4947(a)(1) or 501(c) () **◀** (insert no) If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW SAAFOUND ORG L Year of formation 2001 M State of legal domicile Summary 1 Briefly describe the organization's mission or most significant activities MANAGING ENDOWED GIFTS IN ORDER TO MATCH DONOR INTERESTS WITH COMMUNITY NEEDS OF THE AREA Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 15 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 9 **6** Total number of volunteers (estimate if necessary) 6 65 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year** Current Year 8 Contributions and grants (Part VIII, line 1h) . 15,966,946 15,529,800 Ravenua 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 6,053,933 4,877,582 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 51,241 94,486 22,115,365 20,458,623 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 10,383,391 12,027,595 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 611,067 677,037 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶313,150 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 709,664 732,702 11,704,122 13,437,334 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 10,411,243 7,021,289 Net Assets or Fund Balances Beginning of Current Year End of Year 142,857,999 173,855,815 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 36,615,428 44,560,505 22 Net assets or fund balances Subtract line 21 from line 20 . 106,242,571 129,295,310 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-09-03 Signature of officer Sign Here MATT LEWIS CEO Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-08-27 P00277460 Paid self-employed Firm's name CONDLEY AND COMPANY LLP Firm's EIN ► 75-1056027 Preparer Use Only Firm's address ▶ P O BOX 2993 Phone no (325) 677-6251 ABILENE, TX 796042993 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)					Page 2
Pa	rt III Stateme	ent of Program Servic	e Accomplis	hments		
	Check if S	Schedule O contains a respo	nse or note to a	any line in this Part III .		🗆
1		he organization's mission				
		SAN ANGELO AREA FOUNDA RDER TO MATCH DONOR IN			NTHROPY BY ATTRACTING AND PR THE AREA	UDENTLY MANAGING
2	Did the organizat	tion undertake any significa	nt program ser	vices during the year wh	nich were not listed on	_
	the prior Form 99	90 or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe	these new services on Sch	edule O			
3	Did the organizat	tion cease conducting, or m	ake significant	changes in how it condu	cts, any program	
						☐ Yes 🗹 No
4	Describe the orga Section 501(c)(3	anızatıon's program service	accomplishmer	to report the amount of	argest program services, as measu f grants and allocations to others, ti	
4a	(Code) (Expenses \$	12.335.645	including grants of \$	12,027,595) (Revenue \$)
	See Additional Data		,,	,	,,	,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4d	Other program s (Expenses \$	ervices (Describe in Schedu	ıle O) udıng grants of	\$) (Revenue \$)
4e	Total program	service expenses >	12,335,6	45		

No

Nο

No

Nο

Nο

No

16

20a

20h

21

Yes

Form **990** (2019)

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 . . . Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3

Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 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

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

No Yes 6 Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II 💙 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 No 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

9 10

No Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, Yes permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its No

11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes 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 🥦 11f Yes

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Yes 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

b Was the organization included in consolidated, independent audited financial statements for the tax year? Nο Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 No 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? . . Nο **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 14b Nο

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV

No

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

17 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19

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

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

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

	990 (2019) The Charlist of Beguired Schodules (continued)			Page 4
Pa	Checklist of Required Schedules (continued)		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	Yes	110
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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		No
b	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		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If '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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance	'		_
	Check if Schedule O contains a response or note to any line in this Part V	<u>. ;</u>		
1 =	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 40		Yes	No
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

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Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	4a		No
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7		_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		No No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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	.		N1 -
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess	14b		
	parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No

Form 990 (2019) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 No 1a Enter the number of voting members of the governing body at the end of the tax year 15 1a 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 Enter the number of voting members included in line 1a, above, who are independent 1b 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Nο Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 No

of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 4 Nο Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο 6 Did the organization have members or stockholders? No 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7a Nο Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b Nο Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes 8b Yes Each committee with authority to act on behalf of the governing body? . . .

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? . . . 10a Nο b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12h Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes 13 Yes Did the organization have a written whistleblower policy? 14 Yes 14 Did the organization have a written document retention and destruction policy? . 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? a The organization's CEO, Executive Director, or top management official . . 15a Yes Other officers or key employees of the organization 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Nο b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

List the states with which a copy of this Form 990 is required to be filed▶ Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O) 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 State the name, address, and telephone number of the person who possesses the organization's books and records ►MATT LEWIS 221 S IRVING ST SAN ANGELO, TX 76903 (325) 947-7071

Form **990** (2019)

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII $\,$. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

See instructions for the order in which to list the										
Check this box if neither the organization no (A) Name and title	(B) Average hours per week (list any hours for related	Position than on the second se	on (de one be	(C o no ox, u in of) t ch unle: ficer	eck mess pers	ore son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
(1) JEFFREY BOZEMAN BOARD MEMBER	2 00	x						0	0	0
(2) BRADY JOHNSON BOARD MEMBER	2 00	х						0	0	0
(3) JON BAILEY BOARD MEMBER	2 00	Х						0	0	0
(4) CAMILLE YALE SECRETARY/TREASURER	2 00	Х						0	0	0
(5) CARMEN DUSEK CHAIRMAN	2 00	Х		х				0	0	0
(6) FRED HERNANDEZ VICE CHAIRMAN	2 00	Х		х				0	0	0
(7) JAMES HUFFMAN BOARD MEMBER	2 00	Х						0	0	0
(8) JANE RICHARDSON BOARD MEMBER	2 00	х						0	0	0
(9) JASON COX BOARD MEMBER	2 00	Х						0	0	0
(10) JAY BOYD BOARD MEMBER	2 00	Х						0	0	0
(11) RONNIE D HAWKINS JR BOARD MEMBER	2 00	Х						0	0	0
(12) DREW WALLACE BOARD MEMBER	2 00	Х						0	0	0
(13) GAYLA THORNTON BOARD MEMBER	2 00	Х						0	0	0
(14) PATRICK SHANNON BOARD MEMBER	2 00	Х						0	0	0
(15) SUSAN BROOKS PAST CHAIRMAN	2 00	х		х				0	0	0
(16) MATT LEWIS PRESIDENT & CEO	40 00			х				187,500	0	16,050

Form 990 (2019) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (A) (C) (F) (B) (D) (E)

Name and title	Average hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)					on	Reportable Reportable compensation from the organization organization compensation organizations		Estimated amount of other compensation from the organization and related organizations
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	related

1 b	Sub-Total						>					
C	Total from continuation sheets to Pa	art VII, Section	Α				▶					
ď	「otal (add lines 1b and 1c)						•		187,500	0		16,050
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rece	eived more than \$1	00,000		
											Voc	No

	Sub-Total	•	
c T	Total from continuation sheets to Part VII, Section A		
d 1	Total (add lines 1b and 1c)		16,050
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 1		
		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		

u	otal (add lines 10 and 1c)	U .		10,030
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 1			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
				_

		3
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	
	ındıvıdual	4
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5

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

4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
Se	ction B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of con	onensa	tion	

	The 1d 17 yes, complete selledate 5 for such marriada.	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		.,	
		4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
S	ection B. Independent Contractors			

5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person							
Section B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation							

5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No				
Se	Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year							

	services rendered to the organization? If "Yes," complete Schedule J for such person									
Se	Section B. Independent Contractors									
1	Complete this table for your five highest compensated independent contractors that received from the organization. Report compensation for the calendar year ending with or within the organization.		ensation							
	(A)	(B)		(C)						
	Name and business address	Description of services	Comp	pensation						

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

compensation from the organization ▶ 0 Form **990** (2019)

		(2019)								Page 9
Part	VIII									
		Check if Sched	dule	O contains a	respo	nse or note to any	/ line in this Part VIII			<u>U</u>
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	12	1a Federated campaigns 1a						revenue		512 - 514
nts		b Membership dues		. [1b					
18 TO					<u> </u>					
A.G.		c Fundraising even		Ŀ	1c					
ifts ar		d Related organiza		<u> </u>	1d					
m	'	e Government grants	(con	tributions)	1e					
Sil	1	 All other contribution and similar amounts 	ns, g	ifts, grants,						
uţi.		above		L	1f	15,529,800				
훈	!	g Noncash contributio lines 1a - 1f \$	ns in	cluded in	1g	6,967,056				
Contributions, Gifts, Grants and Other Similar Amounts		h Total Add lives		_ _	-9	0,967,030				
<u> </u>		h Total. Add lines :	14-1	' · · ·			15,529,800			
	_					Business Code				
	2a									
Ĕ										
2,	b	•								
Program Service Revenue	С									
Z S	٠	· 								
3s	d	I								
ran										
Tog	е									
<u>α</u>	f	All other program	carv	ice revenue						
		Total. Add lines 2								
		Investment income				nterest and other	1	1		
	9	similar amounts) .		· · ·	· ·	interest, and other	5,308,61	.7		5,308,617
	4	Income from invest	men	it of tax-exen	npt bo	ond proceeds	•			
	5	Royalties				•	<u> </u>			
				(ı) Real		(II) Personal				
	6a	Gross rents	6a	12	27,479	,				
		Less rental					1			
		expenses	6b		76,238	3				
	С	Rental income or (loss)	6c		51,241					
	c	Net rental income	or (<u>.</u>			-1		51,241
				(ı) Securit	ies	(II) Other				
	7a	Gross amount	_							
		from sales of assets other	7a	20,02	24,422	369,03	39			
		than inventory					-			
	b	Less cost or other basis and	7b	20,56	55,496	259,00	00			
		sales expenses					\dashv			
	С	Gain or (loss)	7с	-54	11,074	110,03	19			
	c	Net gain or (loss)	•				-431,03	15		-431,035
e)	8a	Gross income from fu (not including \$	ındra	ısıng events of						
⋾		contributions reported		line 1c)						
ě		See Part IV, line 18	•		8a					
æ		Less direct expen			8b					
Other Revenue	•	: Net income or (los	s) fr	om fundraisii	ng eve	ents	_	1		
	9a	Gross income from	aamı	ıng activities						
	_	See Part IV, line 19	•		9a					
	b	Less direct expen	ses		9b					
	c	: Net income or (los	s) fr	om gaming a	ctıvıtı	es >				
	10.									
	10.	aGross sales of inve returns and allowa	nces	ry, iess	10a					
	ь	Less cost of good	s sol	ld	10b		-			
		Net income or (los			nvent.	ory ►	_			
		Miscellaneo				Business Code				
	11	.a								
	ь	,				•				
	c				\dashv			1		
	_									
		All other revenue						1		
		Total. Add lines 1			. l		1	1		
								1		
	12	! Total revenue. S	ee ır	istructions .	•	• • • •	20,458,62	.3	0	0 4,928,823
										Form 990 (2019)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Р	art IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must c		_		mn (A)
	Check if Schedule O contains a response or note to ar	y line in this Part IX			<u> ⊔</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	10,560,956	10,560,956		
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,466,639	1,466,639		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	187,500	37,500	112,500	37,500
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	321,205	114,955	129,750	76,500
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	71,039	20,776	34,179	16,084
9	Other employee benefits	61,761	18,062	29,715	13,984
10	Payroll taxes	35,532	10,673	16,904	7,955
11	Fees for services (non-employees)				
a	ı Management				
	Legal	5,500		5,500	
	: Accounting	30,709		30,709	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees	257,382		257,382	
	Other (If line 11g amount exceeds 10% of line 25, column	5,631		5,631	
,	(A) amount, list line 11g expenses on Schedule O)	3,031		5,031	
12	Advertising and promotion	52,325			52,325
13	Office expenses	15,834	4,631	7,618	3,585
14	Information technology	81,275	23,769	39,104	18,402
15	Royalties				
16	Occupancy	56,827	19,964	21,407	15,456
	Travel	21,891	6,402	10,533	4,956
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	24,534	7,175	11,804	5,555
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	125,541	36,715	60,402	28,424
23	Insurance	7,805	2,283	3,755	1,767
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a BANK CHARGES	29,856		3,182	26,674
	b DUES AND MEMBERSHIPS	17,592	5,145	8,464	3,983
	с				
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	13,437,334	12,335,645	788,539	313,150
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form 990 (2019)

1

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Assets

11

12

13

14

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16

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21

23

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25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 End of year

Beginning of year

4,721,990

3,287,162

9.283.774

357,439

1,425

1.000

142,857,999

36,613,003

36.615.428

2.417,135

103,825,436

106,242,571

142,857,999

125,114,238

93,396

1

2

3

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6 7

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11

12 13

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16

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20 21

22 23

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30

31

32

33

Page **11**

1,389,240

3,225,339

157,242,294

11.082.429

95,089

1.691

0

173,855,815

44.558.814

44.560.505

2,907,132

126,388,178

129,295,310

173,855,815

Form 990 (2019)

821,424

Check	ıf	Schedule	o

Accounts receivable, net . .

Inventories for sale or use . .

Notes and loans receivable, net

Prepaid expenses and deferred charges . . .

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Tax-exempt bond liabilities . . .

Accounts payable and accrued expenses .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

basis Complete Part VI of Schedule D

b Less accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Cash-non-interest-bearing	•				
Savings and temporary cash investments		-			
Pledges and grants receivable, net					

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

contains a response or note to any line in this Part IX

10a

10b

3,884,373

659,034

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

3a

3b

No

Form 990 (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 73-1634145

Name: SAN ANGELO AREA FOUNDATION

Form 990 (2019)

DIRECTORS APPROVAL OF SAID GRANTS

Form 990, Part III, Line 4a:

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

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493252006510		
SCI		ULE A	- Dublic (Charity Statu	e and Dul	alic Supp	ort	OMB No 1545-0047		
	m 99			criarity Statu rganization is a sect				2019		
990I	EZ)		-	4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.						
Depart	ment of	the Treasury	► Go to <u>www.irs</u>	s.gov/Form990 for in			ormation.	Open to Public		
Interna	l Reven	ne Service ne organiza	tion				Employer identific	Inspection ation number		
		AREA FOUNDA								
Pa	rt I	Reason	for Public Charity Stat	us (All organization	s must comple	te this part.) S	73-1634145 See instructions.			
			a private foundation because							
1		A church, c	onvention of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).			
2		A school de	scribed in section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))				
3		A hospital o	or a cooperative hospital ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).			
4		A medical r name, city,	esearch organization operat and state	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	nter the hospital's		
5			ation operated for the benefi (iv). (Complete Part II)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170		
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).			
7	✓		ation that normally receives ' 0(b)(1)(A)(vi). (Complete		s support from a	governmental u	ınıt or from the gener	al public described in		
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi)	(Complete Part I	I)				
9			ural research organization de rant college of agriculture S					ege or university or a		
10		from activit	ation that normally receives ties related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	nctions—subject to cer less taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its si	ipport from gross		
11			ation organized and operated		r public safety S	ee section 509	(a)(4).			
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a			
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by			
b		manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ation vested in the sar						
c			unctionally integrated. A sorganization(s) (see instruct					ited with, its		
d		Type III n	on-functionally integrate integrated The organization (i) You must complete Pai	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgai			
e		Check this	box if the organization receiver or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally		
f	Enter		of supported organizations	g. acca supporting	gamzation					
g	Provi	de the follow	ing information about the su	pported organization(s)					
	(i) Name of supported organization			(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
			<u> </u>							
_										
Tota		l. P. '	tion Act Notice, see the I		Cat No 11285		 Schedule A (Form 9	000 57) 5515		

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2
P	art II Support Schedule for						
	(Complete only if you ch						nder Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please c	omplete Part III	.)	
- 3	ection A. Public Support Calendar year						
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	7,525,245	8,618,945	7,669,607	13,016,946	15,529,800	52,360,543
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
4	the organization without charge	7,525,245	8,618,945	7,669,607	13,016,946	15,529,800	52,360,543
4 5	Total. Add lines 1 through 3 The portion of total contributions by	7,323,243	8,018,943	7,009,007	13,010,940	13,329,800	32,300,343
•	governmental unit or publicly supported organization) included on						6,217,166
	line 1 that exceeds 2% of the amount shown on line 11, column (f)						0,217,100
	Public support. Subtract line 5 from line 4						46,143,377
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) ⊤otal
7	Amounts from line 4	7,525,245	8,618,945	7,669,607	13,016,946	15,529,800	52,360,543
8	Gross income from interest,	, ,	, ,		, ,	, ,	<u> </u>
	dividends, payments received on securities loans, rents, royalties and income from similar sources	4,138,616	3,636,756	5,350,186	5,955,812	5,546,135	24,627,505
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						76,988,048
12	Gross receipts from related activities,	etc (see instructio	ns)			12	
13	First five years. If the Form 990 is fo	or the organization	's first, second, thi	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) orga	nızatıon,
	check this box and stop here					▶ 🗆	
S	ection C. Computation of Public	C Support Perc	entage				
14	Public support percentage for 2019 (lii	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	59 940 %
15	Public support percentage for 2018 Sc	hedule A, Part II, l	ıne 14			15	49 830 %
16 a	33 1/3% support test—2019. If the	organization did r	ot check the box o	on line 13, and line	14 is 33 1/3% or	more, check this b	юх
E	and stop here. The organization quali 33 1/3% support test—2018. If th				nd line 15 is 33 1/2	3% or more, check	this
17a	box and stop here. The organization qualifies as a publicly supported organization To a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
b	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organiz	ation meets the "f	acts-and-circumsta	ances" test, check	this box and stop	here.	▶□
	Explain in Part VI how the organization Supported organization			_	·		▶ □
18	Private foundation. If the organizati	on ala not check a	DOX OF TIME 13, 16	oa, 10D, 1/a, or 1/	b, check this box	and see	. □
	instructions				Cohodula	Δ (Form 990 or	₽ <u></u>

P		upport Schedule for						
		Complete only if you cl						der Part II. If
		ne organization fails to	qualify under t	ne tests listed i	pelow, please co	omplete Part II.)	
56	ection A. Pub	ndar year			1			T
		r beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1		contributions, and						
		ees received (Do not						
_		nusual grants ")						
2		from admissions, sold or services						
		facilities furnished in						
		at is related to the						
	organization's	tax-exempt purpose						
3		from activities that are						
		ed trade or business						
4	under section Tax revenues	F						
-		benefit and either paid						
		d on its behalf						
5		ervices or facilities						
		governmental unit to						
		on without charge						
6	Total. Add line	-						
/a		ded on lines 1, 2, and m disqualified persons						
b		ded on lines 2 and 3						
_		other than disqualified						
		exceed the greater of						
		of the amount on line						
_	13 for the yea Add lines 7a a							
8		rt. (Subtract line 7c						
0	from line 6)	it. (Subtract line / c						
Se	ection B. Tota	al Support				•		
		ıdar year	(-) 201E	(h) 2016	(=) 2017	(4) 2010	(-) 2010	(f) Tatal
		r beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts fron	n line 6						
L0a		from interest,						
		yments received on						
		ns, rents, royalties and similar sources						
b		siness taxable income						
_		511 taxes) from						
		equired after June 30,						
	1975							
_	Add lines 10a							
11		rom unrelated business						
		included in line 10b, ot the business is						
	regularly carr							
12		Do not include gain or						
		sale of capital assets						
	(Explain in Pa							+
13	11, and 12)	rt. (Add lines 9, 10c,						
14	First five yea	a rs. If the Form 990 is foi	r the organization	's fırst, second, th	nird, fourth, or fift	th tax year as a se	ction 501(c)(3)	organization,
•		and stop here		, ,	, ,	•	()()	▶ □
Se		nputation of Public S	Support Perce	ntage				
15		percentage for 2019 (lin			column (f))		15	
16	• •	: percentage from 2018 S		•	(//		16	
		nputation of Investr					1 -0	
17		come percentage for 201			line 13. column (f	f))	17	
		come percentage from 20	,		25, 201411111 (1	• / /		
18				·	on line 14	aa 1 E ja waana 41	18 22 1/20/ and l	na 17 ia
		ort tests—2019. If the						_
		/3%, check this box and s	-					▶□
b	33 1/3% sup	pport tests—2018. If the	e organization did	not check a box	on line 14 or line	19a, and line 16 is	more than 33 i	_
	not more than	n 33 1/3%, check this box	and stop here.	The organization (qualifies as a publ	licly supported org	anızatıon	▶□
20	Private found	dation. If the organization	n did not check a	box on line 14, 1	19a, or 19b, check	this box and see	instructions	ightharpoons

Schedule A (Form 990 or 990-EZ) 2019

6

7

8

10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

			Yes	No
•	e all of the organization's supported organizations listed by name in the organization's governing documents? "No," describe in Part VI how the supported organizations are designated If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		

	describe the designation If historic and continuing relationship, explain	1	Γ
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
la	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		Γ
	below	3a	Γ
1.	Did the appropriate and the cook appropriate appropriate and propriate and appropriate and app		Т

		_	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
ı	determination		

3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination			
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below			

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

	Checked 12a or 12b in Part 1, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations			
С	nd the organization support any foreign supported organization that does not have an IRS determination under sections 01(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		<u> </u>	
	organization's organizing document?	5b	1	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

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

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

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

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

than (1) its supported organizations. (11) 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

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

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

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

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

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

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

	dule A (Form 990 of 990-E2) 2019		۲	age :
Pai	t IV Supporting Organizations (continued)			
_			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
•	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	_		
	organization	2		
S	ection C. Type II Supporting Organizations		1	
	., 11 2 2		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
•	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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
	D	2		
	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
<u> </u>	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	,		
	The organization is the parent of each of its supported organizations. Complete line 3 below			
	_		_L \	
(instru	ctions)	
	Activities Test Answer (a) and (b) below.		Yes	No
ā	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
	substantially all of its activities	2a		
ŀ	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	2 h		
}	Parent of Supported Organizations Answer (a) and (b) below.	2b		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
ŀ	Did the organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

3b

Page **6**

Schedule A (Form 990 or 990-F7) 2019

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E						
	Section 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					
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1					
a	Average monthly value of securities	1a					
b	Average monthly cash balances	1 b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	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					
	Section 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					

3	Subtract line 2 from line 1d		
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	
	Section 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	Enter greater of line 2 or line 3 Income tax imposed in prior year	4 5	
		<u> </u>	

instructions)

Total annual distributions. Add lines 1 through 6		
Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions		
Distributable amount for 2019 from Section C, line 6		

8	Distributions to attentive supported organizations to who			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI)			

details in Part VI) See instructions	ilcii tile organization is respon	sive (provide	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			

(see instructions)	Excess Distributions	Pre-2019	Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
 Carryover from 2014 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2019 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder Subtract lines 4a and 4b from 4		

j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2019 from Section D, line 7		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2019 Subtract		

c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		
7 Excess distributions carryover to 2020. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		

Schedule A (Form 990 or 990-EZ) (2019)

a Excess from 2015. **b** Excess from 2016. **c** Excess from 2017.

d Excess from 2018. e Excess from 2019.

Additional Data

Software ID:

Software Version: FIN: 73-1634145

Names CAN ANGELO AD

Name: SAN ANGELO AREA FOUNDATION

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)

Instructions)

Facts And Circumstances Test

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

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

Supplemental Financial Statements

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

2019

DLN: 93493252006510OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990. ► Go to <u>www.irs.qov/Form990</u> for instructions and the latest information. Open to Public Inspection

	ame of the organization AN ANGELO AREA FOUNDATION				Employer identif	ication number
JAI	IN ANGELO AREA FOUNDATION				73-1634145	
Pā	art I Organizations Maintaining I	Donor Advised Funds or	Other Simi	lar Funds or	Accounts.	
	Complete if the organization a	•				
		(a) Do	onor advised fu	ınds	(b) Funds an	d other accounts
L	Total number at end of year			45		
2	Aggregate value of contributions to (during			6,131,101		
3	Aggregate value of grants from (during yea	ar)		5,108,244		
1	Aggregate value at end of year			19,921,477		
5	Did the organization inform all donors and organization's property, subject to the org			eld in donor advi	sed funds are the	☑ Yes ☐ No
5	Did the organization inform all grantees, or charitable purposes and not for the benefi private benefit?					ible Yes No
Pa	art II Conservation Easements.					
	Complete if the organization a	nswered "Yes" on Form 99	0, Part IV, lı	ne 7.		
L	Purpose(s) of conservation easements hel	ld by the organization (check a	all that apply)			
	\square Preservation of land for public use (e	g , recreation or education)	☐ Pres	ervation of an h	istorically importar	nt land area
	Protection of natural habitat		☐ Pres	ervation of a cei	rtified historic stru	cture
	Preservation of open space					
2	Complete lines 2a through 2d if the organ easement on the last day of the tax year	ızatıon held a qualıfıed conser	vation contribu	ition in the form		
_				1 -	2a Held at th	e End of the Year
a ı.		acomonto				
b			الماسيل	<u> </u>	2b	
c			` '		2c	
d	Number of conservation easements include structure listed in the National Register	ed in (c) acquired after 7/25/0	o, and not on	a nistoric	2d	
3	Number of conservation easements modificated tax year ▶	ied, transferred, released, ext	ınguıshed, or t	erminated by th	ie organization dur	ing the
ļ	Number of states where property subject	to conservation easement is lo	ocated ►			
5	Does the organization have a written polic and enforcement of the conservation ease		toring, inspect	ion, handling of	_	Yes 🗌 No
5	Staff and volunteer hours devoted to mon	nitoring, inspecting, handling o	f violations, ar	nd enforcing con	servation easemer	nts during the year
7	Amount of expenses incurred in monitorin \$\bigs\\$	ig, inspecting, handling of viol	ations, and en	forcing conserva	ation easements du	ırıng the year
3	Does each conservation easement reporte and section $170(h)(4)(B)(II)$?	ed on line 2(d) above satisfy th	ne requirement	s of section 170	D(h)(4)(B)(ı) □	Yes 🗌 No
•	In Part XIII, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conserva	the text of the footnote to the				
aı	Organizations Maintaining (Complete of the organization a				r Similar Asset	s.
La	If the organization elected, as permitted u art, historical treasures, or other similar a provide, in Part XIII, the text of the footno	issets held for public exhibition	n, education, o	r research ın fur		
b	If the organization elected, as permitted u historical treasures, or other similar assets following amounts relating to these items					
((i) Revenue included on Form 990, Part VIII	i, line 1			▶ \$	
((ii)Assets ıncluded ın Form 990, Part X				► \$	
2	If the organization received or held works following amounts required to be reported				cial gain, provide th	ne
а	Revenue included on Form 990, Part VIII,	line 1			> \$	
b	Assets included in Form 990, Part X				▶ \$	_

Cat No 52283D

Schedule D (Form 990) 2019

1a Land . .

b Buildings . . .

 $c \ \ \mathsf{Leasehold} \ \mathsf{improvements}$

Sche	dule D	(Form 990) 2019										Page 2
Par	t III	Organizations Ma	aintaining Collections	of Art, H	listorio	al Tre	asuı	res, or Other S	Similar A	ssets (cor	itinued)	
3	_	the organization's acq (check all that apply)	uisition, accession, and oth	er records,	check a	ny of th	e foll	lowing that are a s	significant	use of its co	ollection	
а		Public exhibition			d		oan d	or exchange progr	ams			
b		Scholarly research			е		ther					
c		Preservation for future	e generations									
4	Provi Part :		organization's collections ar	nd explain i	how they	further	r the	organization's ex	empt purpo	ose in		
5		<i>,</i> ,	anization solicit or receive c nds rather than to be maint						lar	☐ Yes	□ N €	0
Pa	rt IV		odial Arrangements.									
		Complete if the org X, line 21.	ganızatıon answered "Ye	s" on For	m 990,	Part I\	/, lın	ne 9, or reported	d an amoi	unt on For	m 990,	Part ———
1a		e organization an agent ded on Form 990, Part)	, trustee, custodian or othe X?	r ıntermed	ary for o	contribu	tions	or other assets n	ot	☐ Yes	□ n ∈	o
ь	TE "Ve	es " evoluin the arrange	ement in Part XIII and comp	olete the fo	llowing t	able				Amount		_
c		ining balance	ment in rait Alli and comp	nete the lo	nowing t	abie		1c		············		-
d	_	ions during the year						1d				-
e		butions during the year						1e				-
f		ig balance						1f				-
2 a	Did tl	ne organization include	an amount on Form 990, P	art X, line i	21, for e	scrow o	r cus	stodial account lial	oility?	☐ Yes	No	– D
b	If "Y∈	s," explain the arrange	ment in Part XIII Check he	re if the ex	kplanatio	n has b	een i	provided in Part X	III	. 🗆		
	rt V	Endowment Fund										
		Complete if the org	ganization answered "Ye									
4_	D = ====			ent year 11,151,272		or year 47,921,1		c) Two years back 117,587,937		ears back (e 1,812,401) Four year	s back 193,996
	-	ing of year balance .		15,529,800		18,454,2	-	12,617,712		,737,345	•	525,245
		outions	<u> </u>	28,225,978		12,180,3		25,773,682		,707,798		319,853
		estment earnings, gair or scholarships	is, and losses	12,027,595		12,844,2	_	7,799,550		,390,986		.36,536
		expenditures for facilities					\dagger	, ,				
	and pr	ograms		1,052,560		-1,017,5	22	-1,076,898		45,758		44,730
f	Admını	strative expenses .		-1,796,967		1,217,1	36	1,335,521	1	,232,863	1,1	.05,721
g	End of	year balance	17	73,623,862	1	41,151,2	72	147,921,158	1 17	,587,937	102,8	312,401
2	Provi	de the estimated percei	ntage of the current year e	nd balance	(line 1g	column	n (a)]) held as				
а	Board	d designated or quasi-e	ndowment ► 60 000 %									
b	Perm	anent endowment ►										
С	Temp	orarily restricted endov	vment ► 40 000 %									
	The p	ercentages on lines 2a	, 2b, and 2c should equal 1	00%								
3a		here endowment funds	not in the possession of the	e organizat	ion that	are held	d and	d administered for	the		Yes	No
	(i) uı	nrelated organizations								3a(i)	No
	(ii) n	elated organizations .								3a(ii	5 	No
b	If "Y∈	es" on 3a(11), are the rel	lated organizations listed as	required o	on Sched	ule R?				. Зь		
4	Desci	ribe in Part XIII the inte	ended uses of the organizat	ion's endov	vment fu	ınds						
Pai	rt VI	, ,										
	Desarr		ganization answered "Ye (a) Cost or other basis		m 990, or other b			ne 11a. See Fori (c) Accumulated de			10. Book value	
	Descri	ption of property	(a) Cost or other basis (investment)	(b) Cost	or owner t	asis (Oth	iei)	(C) Accumulated de	epreciation	(a)	DOOK VAIUE	;

 ${f d}$ Equipment 258,158 215,757 42,401 4,725 4,725 **e** Other . Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . 3,225,339

222,954

2,842,459

556,077

404,807

38,470

222,954

2,437,652

517,607

Part VII Investments—Other Securities.				
Complete if the organization answered "Yes" on F (a) Description of security or category	orm 990, Part IV, lii (b) Book value	ne 11b		Part X, line 12. d of valuation
(including name of security)	(b) Book value		• •	year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(A) LIMITED PARTNERSHIPS	255,328			С
(B) BENEFICIAL INT IN CHARITABLE REMAINDER TRUSTS (C)	10,827,101			С
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	11,082,429			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on F	orm 990. Part IV. lu	ne 11c	. See Form 990.	Part X. line 13.
(a) Description of investment			(b) Book value	(c) Method of valuation Cost or end-of-year market
				value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets.	_	•		
Complete if the organization answered 'Yes' on Fo		e 11d	. See Form 990, Par	
(a) Description	<u> </u>			(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)				•
Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo	orm 990 Part IV lin	م 11م	or 11f See Form	990 Part V line 25
1. (a) Description of lie		ic iic	01 111.500 101111	(b) Book value
(1) Federal income taxes				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			<u> </u>	44,558,814
2. Liability for uncertain tax positions In Part XIII, provide the text of organization's liability for uncertain tax positions under FIN 48 (ASC 7				_
organization a hability for uncertain tax positions under FIN 46 (ASC /	, check here il tile	-CAL 01	and roomingte mas be	on provided in fait AIII L

Part XI

2

5

1

2

3

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2019

Page 4

22,215,884 11,281,951

9,176,672

20,458,623

12,242,063

76,237

12,165,826

1,271,508

13.437.334

Schedule D (Form 990) 2019

Donated services and use of facilities .

Donated services and use of facilities

Other (Describe in Part XIII) . .

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Prior year adjustments

С	Recoveries of prior year grants
d	Other (Describe in Part XIII)
e	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, line 12, but not on lin
а	Investment expenses not included on Form 990, Part VIII, line 7
b	Other (Describe in Part XIII)

Total expenses and losses per audited financial statements

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

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Supplemental Information

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

	2c
	2d
ne 1	
7b .	4a
	4b

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

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

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

Other (Describe in Part XIII)	2d	
Add lines 2a through 2d		
Subtract line 2e from line 1		
Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$		
Investment expenses not included on Form 990, Part VIII, line 7b .	4a	
Other (Describe in Part XIII)	4b	
Add lines 4a and 4b		
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		

2a

2b

2a 2b

2c 2d

4a

4b

Explanation

es 2a through 2d	-						•	2
ct line 2e from line 1								:
its included on Form 990, Part VIII, line 12, but not on line 1								
ment expenses not included on Form 990, Part VIII, line 7b .	4 8	a				:	257,382	
(Describe in Part XIII)	4Ł	,				8,	919,290	1
es 4a and 4b	_	•						4
evenue Add lines $f 3$ and $f 4c.$ (This must equal Form 990, Part I, line $f 12$)								
Reconciliation of Expenses per Audited Financial Statem	ent	:s V	Vith	ı E>	фе	nse	s per F	₹et

22,139,647

76.237

76,237

1,271,508

2e

3

4c

5

3	
4c	
5	
turi	n.
1	

2e

Page 5		chedule D (Form 990) 2019	Schedule D (F
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

FIN: 73-1634145

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

Name: SAN ANGELO AREA FOUNDATION

Supplemental Information Return Reference Explanation

PART V, LINE 4

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

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

FOUNDATIO

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

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

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES INCLUDED IN REVENUE ON FORM 990 76,237

Sı

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS FOR AGENCY ENDOWMENT FUND ON AUDIT PER SFAS 136 8,919,290

Sı

Supplemental Information			
Return Reference	Explanation		
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES INCLUDED IN REVENUE ON FORM 990 76,237		

Supplemental Information Return Reference Explanation PART XII, LINE 4B - OTHER DISTR & EXP FOR AGENCY ENDOWMENT FUNDS REPORTED ON AUDIT PER SFAS 136 1,014,126 INVESTMENT EXPENSES 257,382 I ADJUSTMENTS

DLN: 93493252006510 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number SAN ANGELO AREA FOUNDATION 73-1634145 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 176 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2019

128 211,392 SONORA FLOOD RELIEF ASSISTANCE TO 40 (3) SAN ANGELO DISASTER RELIEF 75.400

Page 2

Schedule I (Form 990) 2019

(3) (4)

(5) (7)

(6)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Schedule I (Form 990) 2019

UNIVERSITIES

INDIVIDUALS

(2)

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

Return Reference Explanation

THE FOUNDATION REQUIRES GRANT RECIPIENTS OF DISCRETIONARY OR PROACTIVE GRANTS TO PROVIDE THEIR PLANS FOR EVALUATION AND IMPACT PRIOR TO ANY FUNDING IF A GRANT IS APPROVED, EACH EVALUATION AND MONITORING OF A GRANT IS AGREED UPON IN A GRANT AGREEMENT, WHICH PROVIDES FOR

PART I, LINE 2 FOLLOW-UP SITE VISITS, REPORTS, DOCUMENTATION AND SUBSEQUENT EVALUATION TO ENSURE PROCEEDS FROM THE GRANT WERE USED ACCORDING TO THE GRANT REOUEST

Additional Data

MCCULLOCH COUNTY HELPING

HANDS PO BOX 1144 BRADY, TX 76825 ABILENE CHRISTIAN

UNIVERSITY PRESS ACU BOX 29138 ABILENE, TX 79699

Software ID:

74-2345779

75-0851900

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation if applicable (book EMV appraisal organization grant cach

or garnization	п аррпсавіс	l alunc	Cusii	(book, inv, applaisal,	1
or government			assistance	other)	ı
					l
				1	1

501(C)(3)

501(C)(3)

17,491

10,000

(q) Description of

non-cash assistance

(h) Purpose of grant

or assistance

HUMAN SERVICES

EDUCATION

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

Name: SAN ANGELO AREA FOUNDATION

EIN: 73-1634145

Software Version:

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-2195119 501(C)(3) 13.934 ADULT LITERACY COUNCIL EDUCATION

PO BOX 2602
SAN ANGELO, TX 76902

ADVOCACY CENTER FOR THE CHILDREN OF EL PASO
1100 E CLIFF DRIVE

HUMAN SERVICES

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

EL PASO, TX 79902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ALCOHOL AND DRUG ABUSE 75-1609328 501(C)(3) 37.184 HUMAN SERVICES

COUNCIL FOR THE CONCHO		· ·		
VALLEY				
3553 W HOUSTON HARTE				
EXPY				
SAN ANGELO, TX 76901				

1700 N GARFIELD SAN ANGELO, TX 76901

501(C)(3) 6.873 ALTA LOMA ELEMENTARY 75-6002404 EDUCATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance AMBLECTDE CCHOOL OF CAN 47-0869323 501(C)(3) 23.729 EDUCATION

DISASTER RELIEF

10.200

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

501(C)(3)

ANDLESIDE SCHOOL OF SAN	47 0003323	
ANGELO		
511 W HARRIS AVE		
SAN ANGELO, TX 76903		

53-0196605

AMERICAN RED CROSS

2141 OFFICE PARK SAN ANGELO, TX 76904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance ANGELO CATHOLIC SCHOOL 75-1999991 501(C)(3) 99.311 FDUCATION

2315 S AM AVE SAN ANGELO, TX 76904	76 2333332	331(3)(3)	33,321		
ANGELO CATHOLIC SCHOOL SCHOLARSHIP ENDOWMENT	73-1634145	501(C)(3)	12,780		EDUCAT

SAN ANGELO, TX 76903

CATION 221 S IRVING ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-0888979 501(C)(3) 16.059 CULTURAL ARTS ANGELO CIVIC THEATRE 1936 SHERWOOD WAY SAN ANGELO, TX 76901

1936 SHERWOOD WAY
SAN ANGELO, TX 76901

ANGELO STATE UNIV- WEST 75-6002403 501(C)(3) 50,000
TEXAS COLLECTION

SOL(S/S)

FOUCATION

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

ASU STATION 11013 SAN ANGELO, TX 76909

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-6002403 501(C)(3) 18.089 EDUCATION ANGELO STATE UNIVERSITY ATHLETIC DEPARTMENT ASU STATION 10899

EDUCATION

1.980.802

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

501(C)(3)

SAN ANGELO, TX 76909

FOUNDATION ASU STATION 11009 SAN ANGELO, TX 76909

ANGELO STATE UNIVERSITY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 83-0507951 501(C)(3) 13.713 EDUCATION ANGELO STATE UNIVERSITY

MEAT & FOOD SCIENCE ASSOCIATION 2601 W AVENUE N

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

230 LANDMARK DRIVE MONTGOMERY, AL 36117

SAN ANGELO, TX 76909 APOLOGETICS PRESS 58-1406077 501(C)(3) 20,000 RELIGIOUS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 87-0777592 501(C)(3) 51.730 CULTURAL ARTS ART IN UNCOMMON PLACES 2612 CIRCLE J STREET

2612 CIRCLE J STREET
SAN ANGELO, TX 76901

ASOMBRO INSTITUTE FOR 85-0386047 501(C)(3) 32,500

SCIENCE

EDUCATION

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

PO BOX 891

LAS CRUCES, NM 88004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ASSISTANCE LEAGUE OF EL 23-7021166 501(C)(3) 40.000 HUMAN SERVICES PASO PO BOX 3735 EL PASO, TX 79923

RELIGIOUS

10.769

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

501(C)(3)

ASU CATHOLIC NEWMAN

2451 DENA DRIVE SAN ANGELO, TX 76903

CENTER

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ASU DEPT OF NATURAL & 75-1585285 501(C)(3) 5.556 EDUCATION

RELIGIOUS

20.000

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

BIOLOGICAL SCIENCES ASU STATION 11023 SAN ANGELO, TX 76909 AUSTIN AVENUE CHURCH OF 75-0908980 501(C)(3) CHRIST

1020 AUSTIN AVE BROWNWOOD, TX 76801

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

CULTURAL ARTS

AUSTIN ELEMENTARY 700 N VAN BUREN	75-6002404	501(C)(3)	5,169		EDUCATION
SAN ANGELO, TX 76901					

14,560

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

501(C)(3)

BALLET SAN ANGELO

SAN ANGELO, TX 76902

PO BOX 5092

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance BALLINGER MEMORIAL 27-5559128 501(C)(3) 50.000 HEALTH

HOCDITAL DICTRICT		(-)(-)			1
HOSPITAL DISTRICT					1
608 AVE B					
BALLINGER, TX 76821					
DALLINGLE, IA 70021					
DAMPERCER BANCH PRECERVE	20 0041245	E01(C)(3)	15 000		COMMUNITY

JOHNSON CITY, TX 78636

BAMBERGER RANCH PRESERVEL 30-0041245 501(C)(3) 15,000 ICOMMUNITY 2341 BLUE RIDGE DR DEVELOPMENT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-2755400 501(C)(3) 29.255 RELIGIOUS BAPTIST MEMORIALS

MINISTRIES 902 N MAIN ST SAN ANGELO, TX 76903		, , , ,	·		
BCS CHURCH OF CHRIST	32-0099879	501(C)(3)	10,000		RELIGIOUS

11914 SH 30

COLLEGE STATION, TX 77845

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 47-1890997 501(C)(3) 20.568 CULTURAL ARTS BE THEATRE 19 WEST BEAUGARD

SAN ANGELO, TX 76903 BONHAM FLEMENTARY 75-6002404 501(C)(3) 9.049 EDUCATION SCHOOL

4630 SOUTHLAND SAN ANGELO, TX 76904

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

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BOYS AND GIRLS CLUB OF 86-0986317 501(C)(3) 32.500 YOUTH DEVELOPMENT BISBEE

PO BOX 5205 BISBEE, AZ 85603 BOYS AND GIRLS CLUB OF LAS 85-0167102 32.500

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

330 W LAS CRUCES LAS CRUCES, NM 88005

501(C)(3) YOUTH DEVELOPMENT CRUCES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BOYS AND GIRLS CLUB OF 26-3174725 501(0)(3) 17 049 YOUTH DEVELOPMENT

MENARD PO BOX 1043 MENARD, TX 76859	20-3174723	301(0)(3)	17,049		TOOTH BEVELOPMENT
BOYS AND GIRLS CLUB OF	75-1216481	501(C)(3)	56,393		YOUTH DEVELOPMENT

SAN ANGELO INC PO BOX 107

SAN ANGELO, TX 76902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 86-0671818 501(C)(3) 32.500 YOUTH DEVELOPMENT

BOYS AND GIRLS CLUB OF SANTA CRUZ 590 N TYLER AVE NOGALES, AZ 85621 BOYS AND GIRLS CLUB OF 86-0172257 501(C)(3) 32.500 YOUTH DEVELOPMENT

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

TUCSON PO BOX 40217 TUCSON, AZ 85717

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 61-1429244 501(C)(3) 15.000 YOUTH DEVELOPMENT CAMP IDA CHRISTIAN YOUTH ENCAMPMENT 50 CR 1207 MAUD. TX 75567

RELIGIOUS

5.000

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

501(C)(3)

CAMPUS CRUSADE FOR

CHRIST PO BOX 628222 ORLANDO, FL 32862

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance CANDLELIGHTERS OF THE EL 74-2243283 501(C)(3) 40.000 HUMAN SERVICES PASO AREA

1400 HARDAWAY ST EL PASO, TX 79903

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

CASSIF'S PLACE

47-5533888 501(C)(3) 30.423 THUMAN DEVELOPMENT 622 ASHFORD DRIVE SAN ANGELO, TX 76901

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance CHILDREN'S ADVOCACY 75-2401001 501(C)(3) 1,534,686 COMMUNITY

CENTER OF TOM GREEN		, , , ,			DEVELOPMENT
COUNTY INC					
PO BOX 5195 SAN ANGELO, TX 76902					
JAN ANGLLO, IX 70902					
CHILDREN'S BED PROJECT	75-1170261	501(C)(3)	11,284		YOUTH DEVELOPMENT

4522 COLLEGE HILLS BLVD SAN ANGELO, TX 76904

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-1687645 501(C)(3) 9.000 RELIGIOUS CHRISTIAN CHURCH OF SAN ANGELO 4064 S BRYANT SAN ANGELO, TX 76903

PUBLIC SAFETY

10.738

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

501(C)(3)

CHRISTOVAL VOLUNTEER FIRE

CHRISTOVAL, TX 76935

DEPARTMENT PO BOX 193

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CITY OF SAN ANGELO PARKS 75-6000659 501(C)(3) 7.014 COMMUNITY 702 S CHADBOURNE DEVELOPMENT

ANA ANGELO, TX 76903

CIVIL AIR PATROL SAN 75-6037853 501(C)(3) 7,444

ANGELO COMPOSITE SQUADRON 11254 MOUNT NEBO

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

SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 64-0685258 501(C)(3) 5.000 RELIGIOUS COLDWATER CHURCH OF CHRIST

PO BOX 321 COLDWATER, MS 38618 CONCHO VALLEY BIBLICAL 75-1401716 501(C)(3) 13.923

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

SAN ANGELO, TX 76901

RELIGIOUS COUNSELING CENTER 2601 FREELAND AVE

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

CONCHO VALLEY HOME FOR GIRLS INC 412 PREUSSER	23-7102643	501(C)(3)	96,778		YOUTH DEVELOPMENT
SAN ANGELO, TX 76903					

CONCHO VALLEY PAWS 75-6030459 501(C)(3) 67.811 COMMUNITY 4001 SUNSET DR DEVELOPMENT

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

SAN ANGELO, TX 76904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CONCHO VALLEY REGIONAL 75-1897032 501(C)(3) 33,486 HUMAN SERVICES

SERVICES

FOOD BANK OF TEXAS INC BOX 1207 SAN ANGELO, TX 76902		, , , ,			
CONCHO VALLEY TURNING POINT	32-0292036	501(C)(3)	100,024		HUMAN S

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

PO BOX 60072 SAN ANGELO, TX 76906

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 75-2123230 501(C)(3) 287.720 CORNERSTONE CHRISTIAN EDUCATION SCHOOL 1502 N JEFFERSON

EDUCATION

40.000

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

501(C)(3)

SAN ANGELO. TX 76901

504 SAN FRANCISCO EL PASO, TX 79901

CREATIVE KIDS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance CRITTER SHACK RESCUE 41-2090330 501(C)(3) 33.045 ICOMMUNITY PO BOX 192 DEVELOPMENT

WALL, TX 76957

CROSSVILLE CHURCH OF 62-1235763 501(C)(3) 10,000

CHRIST

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

423 NORTH MAIN CROSSVILLE, TN 38557

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance DESK 42-1634891 501(C)(3) 7.253 EDUCATION

30 W BEAUREGARD SAN ANGELO, TX 76903		, , , ,	, i		
DR JAMES DOBSON'S FAMILY TALK 540 ELKTON DRIVE STE 201 COLORADO SPRINGS. CO	27-1394708	501(C)(3)	7,000		HUMAN DEVELOPMENT

80907

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance EL DACO BDIDGES ACADEMY 74-2046084 E01/C1/31 an nool EDUCATION

4320 N STANTON EL PASO, TX 79902	74-2040004	301(€)(3)	40,000		LDOCATION
EMMANUEL EPISCOPAL	75-0863849	501(C)(3)	11,000		RELIGIOUS

3 S RANDOLPH ST SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance EPISCOPAL RELIEF AND 73-1635264 501(C)(3) 18.900 RELIGIOUS

HUMAN SERVICES

DEVELOPMENT	(-)(-)	,		
815 2ND AVE				
NEW YORK, NY 10017				
NEW YORK, NY 10017				

275.000

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

501(C)(3)

FAMILY MATTERS

SCOTTSDALE, AZ 85254

SUITE A-120

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 44 004000 E04/63/33 C 350 EVELOPMENT

RELIGIOUS

FELLOWSHIP OF CHRISTIAN	44-0610626	501(C)(3)	6,259		YOUTH DEV
ATHLETES					
PO BOX 3711					
SAN ANGELO, TX 76902					

16.004

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

501(C)(3)

FIRST BAPTIST CHURCH PO BOX 2138

SAN ANGELO, TX 76903

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

1707 SAN JACINTO STREET DALLAS. TX 75201

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

MERTZON, TX 76941

FIRST CHRISTIAN CHURCH 75-1947631 501(C)(3) 51.837 RELIGIOUS PO BOX 791

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 75-0904033 501(C)(3) 272.500 RELIGIOUS FIRST PRESBYTERIAN CHURCH 32 NORTH IRVING SAN ANGELO, TX 76903

FIRST UNITED METHODIST 75-1723553 501(C)(3) 10,000 RELIGIOUS CHURCH

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

PO BOX 675 SONORA, TX 76950

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 75-6001559 501(C)(3) 6.898 RELIGIOUS FIRST UNITED METHODIST CHURCH

RELIGIOUS

5.000

37 F BEAUREGARD SAN ANGELO. TX 76903

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

501(C)(3)

84-1522811

FOCUS

PO BOX 18710 GOLDEN, CO 80402

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-2804188 501(C)(3) 13.001 HISTORIC FORT CHADBOURNE FOUNDATION PRESERVATION 651 FORT CHADBOURNE RD

EDUCATION

21.432

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

501(C)(3)

BRONTE, TX 76933
FORT CONCHO ELEMENTARY

310 E WASHINGTON SAN ANGELO, TX 76903

SCHOOL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FORT CONCHO FOUNDATION 75-1605975 501(C)(3) 45.445 HISTORIC 630 S OAKES ST PRESERVATION SAN ANGELO, TX 76903 47-5088082 501(C)(3) 5.000 EDUCATION

FOUNDATION FOR LIBERTY AND AMERICAN GREATNESS INC PO BOX 911

COLLEYVILLE, TX 76034

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FRESH START MINISTRIES OF 81-4528010 501(C)(3) 7.839 HUMAN SERVICES SAN ANGELO PO BOX 3653 SAN ANGELO, TX 76902

COMMUNITY

DEVELOPMENT

5.000

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

501(C)(3)

FRIENDS OF THE IRION

COUNTY LIBRARY

PO BOX 654 MERTZON, TX 76941

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-2865891 501(C)(3) 5,637 HOUSING/SHELTER GALILEE COMMUNITY

DEVELOPMENT CORPORATION 1404 S OAKES ST SAN ANGELO, TX 76903					
GIRL SCOUTS CENTRAL TEXAS COUNCIL- EL CAMINO PROGRAM CENTER	75-1162671	501(C)(3)	5,746		YOUTH DEVELOPMENT

304 W AVE A

SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-2404829 501(C)(3) 15.000 RELIGIOUS GLEN MEADOWS BAPTIST CHURCH

6002 KNICKERBOCKER SAN ANGELO. TX 76904 EDUCATION

GLENMORE FLEMENTARY 75-6002404 501(C)(3) 5.894 323 PENROSE

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

SAN ANGELO, TX 76903

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 06 4700040 E04/63/33 22 222 RELIGIOUS

DEVELOPMENT

NETWORK 901 N MAIN STREET SAN ANGELO, TX 76903	06-1/33210	501(C)(3)	22,000		RELIGIOUS
HABITAT FOR HUMANITY	75-2532858	501(C)(3)	25,174		COMMUNITY

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

SAN ANGELO, TX 76903

401 N CHADBOURNE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LIETEED DROJECT 25 1010477 E01/C1/31 10 000 HUMAN SERVICES

INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	33-10194//	501(C)(3)	10,500		HOMAN
HERITAGE PARK	73-1634145	501(C)(3)	13,361		COMMU

SAN ANGELO, TX 76903

YTINUN DEVELOPMENT 36 E TWOHIG AVENUE STE 110

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

HOUSING/SHELTER

					1	
HOUSE OF FAITH-SAN ANGELO	74-2694406	501(C)(3)	171,129			RELIGIOU
321 MONTECITO DR						
SAN ANGELO, TX 76903						

19.887

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

501(C)(3)

75-1584080

ICD BRIDGES

PO BOX 5018

SAN ANGELO, TX 76902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-2066135 501(C)(3) 8.870 COMMUNITY JAMES PHILLIPS WILLIAMS DEVELOPMENT

MEMORIAL FOUNDATION 403 W WASHINGTON DRIVE SAN ANGELO, TX 76903 JUNIOR LEAGUE OF SAN 75-0878540 501(C)(3) 16.716

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

SAN ANGELO, TX 76902

COMMUNITY ANGELO INC DEVELOPMENT PO BOX 3033

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-1783383 501(C)(3) 40.000 KIDS EXCEL EL PASO YOUTH DEVELOPMENT

PO BOX 920144 EL PASO, TX 79902 LARAMIE CHURCH OF CHRIST-83-0292495 501(C)(3) 10,000 CHRISTIAN STUDENT CENTER

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

RELIGIOUS 1314 IVINSON AVE LARAMIE, WY 82070

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LAURA W BUSH INSTITUTE 75-6002403 501(0)(3) 25 000 FOLICATION

5301 KNICKERBOCKER RD STE 200 SAN ANGELO, TX 76904	75 0002403	301(0)(3)	23,000		EDOCATION
LAURA W BUSH INSTITUTE FOR WOMEN'S HEALTH	75-1585285	501(C)(3)	26,743		EDUCATION

5301 KNICKERBOCKER RD STET 200 SAN ANGELO, TX 76904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LIFE OUTREACH 75-2684727 501(C)(3) 44.500 RELIGIOUS INTERNATIONAL PO BOX 982000 FORT WORTH, TX 76182

RELIGIOUS

6.000

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

501(C)(3)

FORT WORTH, TX 76182

LIVING CHURCH OF JESUS
CHRIST

PO BOX 422 PADUCAH, TX 79248

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 76-0241982 501(C)(3) 11.000 RELIGIOUS LONGMIRE CHURCH OF CHRIST 200 LONGMIRE RD

200 LONGMIRE RD CONROE, TX 77304

MABELVALE CHURCH OF C22-2150426 501(C)(3) 9,000
CHRIST 10820 MABELVALE

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

MABELVALE, AR 72103

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

MEALS FOR THE ELDERLY 310 E HOUSTON HARTE SAN ANGELO, TX 76903	51-0159134	501(C)(3)	68,256		HUMAN SERVI
MENARD COUNTY	75-6001066	501(C)(3)	8,570		EDUCATION

PO BOX 1038 MENARD, TX 76859

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 74-2097253 501(C)(3) 50.000 HEALTH SERVICES MENARD COUNTY HOSPITAL DISTRICT

PO BOX 608 MENARD. TX 76859 MENARD PIONEER CEMETERY 75-6377159 501(C)(3) 7.500

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

MENARD, TX 76859

COMMUNITY FUND DEVELOPMENT PO BOX 981

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

HISTORIC

PRESERVATION

MENARD PUBLIC LIBRARY PO BOX 404	75-6049150	501(C)(3)	5,000		HUMAN SERVICES
MENARD, TX 76859					

25,000

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

501(C)(3)

METCALFE- SPENCE CEMETERY

SAN ANGELO, TX 76903

221 S IRVING ST

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

MHMR SERVICES FOR THE CONCHO 1501 W BEAUREGARD SAN ANGELO, TX 76901	75-1251523	501(C)(3)	7,453		MENTAL HEALTH
MOSAIC	11-3666999	501(C)(3)	215,567		COMMUNITY

DEVELOPMENT

MOSAIC 5191 S BRYANT BLVD

SAN ANGELO, TX 76904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 501(C)(3) 26.808 MT CARMEL HERMITAGE 54-2134524 RELIGIOUS PO BOX 337 CHRISTOVAL, TX 76935 NEBRASKA CATTLEMEN 83-4013966 501(C)(3) 5.000 DISASTER RELIEF

DISASTER RELIEF 4611 CATTLE DRIVE LINCOLN, NE 68521

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-2785010 501(C)(3) 6.500 RELIGIOUS NEW LIFE MINISTRIES PO BOX 1029 LAKE FOREST, CA 92609

NEW MEXICO CHRISTIAN 85-6018576 501(C)(3) 5,000 EDUCATION CHILDREN'S HOME 1356 NEW MEXICO

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

PORTALES, NM 88130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1227807 501(C)(3) 8,631 RELIGIOUS OUMC LOAVES & FISHES

PO BOX 983 OZONA, TX 76943					
OZONA COMMUNITY CENTER INC	75-1897769	501(C)(3)	8,108		COMMUNITY DEVELOPMENT

PO BOX 471 OZONA, TX 76943

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 74-2602504 501(C)(3) 10.000 CONSERVATION PARKS AND WILDLIFE FOUNDATION OF TEXAS 2914 SWISS AVE DALLAS. TX 76904

EDUCATION

9.913

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

501(C)(3)

46-2690759

POTTER'S HAND CHRISTIAN

342 S CHADBOURNE SAN ANGELO, TX 76903

SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance PREGNANCY HELP CENTER OF 75-2381411 501(C)(3) 91.876 HUMAN SERVICES

THE CONCHO VALLEY 2525 SHERWOOD WAY SAN ANGELO, TX 76901					
RAINBOW ROOM	20-1429140	501(C)(3)	7,581		HUMAN SERVICES

622 S OAKS AVE SAN ANGELO, TX 76903

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

RED RAIDER CLUB PO BOX 456 LUBBOCK, TX 79408	75-6064579	501(C)(3)	10,000		EDUCATION
ROANOKE CHURCH OF CHRIST	75-1235819	501(C)(3)	40,000		RELIGIOUS

PO BOX 737 ROANOKE, TX 76262

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-2950303 501(C)(3) 49.759 RELIGIOUS RUST STREET MINISTRIES 803 RUST ST

RELIGIOUS

90.551

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

501(C)(3)

SAN ANGELO, TX 76903

SAINT JOHNS EPISCOPAL
CHURCH
PO BOX 1100

SONORA, TX 76950

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

CULTURAL ARTS

SAINT MARY'S SCHOOL	56-0532314	501(C)(3)	10,000		EDUCATION
900 HILLSBOROUGH					
RALEIGH, NC 27603					

41.653

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

501(C)(3)

SAN ANGELO ART CLUB

SAN ANGELO, TX 76903

119 W 1ST ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-1832775 501(C)(3) 8.315 CULTURAL ARTS SAN ANGELO BROADWAY ACADEMY YOUTH THEATER 10 N TAYLOR ST

EDUCATION

81.617

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

501(C)(3)

SAN ANGELO, TX 76901 SAN ANGELO CHRISTIAN

518 COUNTRY CLUB RD SAN ANGELO, TX 76904

ACADEMY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SAN ANGELO MUSEUM OF 75-1776765 501(C)(3) 212.382 CULTURAL ARTS FINE ARTS 1 LOVE STREET

CULTURAL ARTS

125.000

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

501(C)(3)

SAN ANGELO, TX 76903
SAN ANGELO PERFORMING

SAN ANGELO, TX 76903

ARTS CENTER 82 GILLIS ST

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 45-3031837 501(C)(3) 41,418 CULTURAL ARTS SAN ANGELO PERFORMING ADTO COALITION INC

221 S IRVING ST SAN ANGELO, TX 76903					
SAN ANGELO PROJECT GRADUATION - PARENT BOOSTER	30-0281785	501(C)(3)	11,549		HEALTH SERVICES

PO BOX 2855

SAN ANGELO, TX 76902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-2184551 501(C)(3) 10.909 EDUCATION SAN ANGELO SCHOOLS FOUNDATION

2129 VALLEYVIEW DRIVE SAN ANGELO, TX 76904 SAN ANGELO STOCK SHOW 75-0871755 501(C)(3) 12.514

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

SAN ANGELO, TX 76903

CULTURAL ARTS AND RODEO ASSOCIATION 200 W 43RD STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 501(C)(3) 6.000 SAN ANGELO SUPPORT FOR 46-1481116 HUMAN SERVICES

VETERANS INC	l
PO BOX 5291	
SAN ANGELO, TX 76902	
CAN ANGELO GVARDUONIV	

SAN ANGELO, TX 76902

501(C)(3) 21.073 CULTURAL ARTS 75-6003857 SAN ANGELO SYMPHONY PO BOX 5922

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance SAN ANTONIO 1000 CANCER 46-5020113 501(C)(3) 10.000 HUMAN SERVICES

GENOME PROJECT 601 CONTOUR DR SAN ANTONIO, TX 78212					
SANTA RITA ELEMENTARY	83-0371223	501(C)(3)	5,656		EDUCATION

615 S MADISON STREET SAN ANGELO, TX 76901

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 74-1934091 501(C)(3) 10.000 RELIGIOUS SHEPHERD OF THE HILLS LUTHERAN CHURCH 3525 BEE CAVE AUSTIN. TX 78746

RELIGIOUS

30.200

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

501(C)(3)

SIERRA VISTA UNITED

METHODIST CHURCH 4522 COLLEGE HILLS BLVD SAN ANGELO, TX 76904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-6002465 501(C)(3) 12.000 EDUCATION SONORA INDEPENDENT SCHOOL DISTRICT 807 S CONCHO AVENUE SONORA.TX 76950

HUMAN SERVICES

63.108

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

501(C)(3)

SONRISAS THERAPEUTIC

RIDING INC 5185 S BRYANT LANE SAN ANGELO, TX 76904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 78-0224428 501(C)(3) 10.000 RELIGIOUS SOUTHAVEN CHURCH OF CHRIST

1483 BROOKHAVEN DR SOUTHAVEN, MS 38671 SPECIAL OLYMPICS TEXAS INC 74-1998367 501(C)(3) 10.000

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

AUSTIN, TX 78754

HUMAN SERVICES - AREA 14 BIG COUNTRY 1804 RUTHERFORD LANE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 75-1495319 501(C)(3) 32.228 RELIGIOUS ST JOHN'S LUTHERAN CHURCH 1100 W PARSONAGE ST WINTERS, TX 79567

RELIGIOUS

19.748

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

501(C)(3)

ST PAUL PRESBYTERIAN

11 NORTH PARK ST SAN ANGELO, TX 76901

CHURCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance STERLING CITY FIRST UNITED 75-1529785 501(C)(3) 28.169 RELIGIOUS

METHODIST PRE-SCHOOL
PO BOX 311
STERLING CITY, TX 76951

STERLING CITY INDEPENDENT 75-6002522 501(C)(3) 186,977
SCHOOL DISTRICT

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

PO BOX 786

STERLING CITY, TX 76951

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 75-2961942 501(C)(3) 12.000 STERLING COUNTY EMS THEALTH SERVICES PO BOX 1036 STERLING CITY, TX 76951

HUMAN SERVICES

17.881

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

501(C)(3)

STERLING CITY, TX 76951
SUTTON COUNTY COMMUNITY
TRUST
PO BOX 798

SONORA, TX 76950

7 51-0188766

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-5446589 501(C)(3) 10,876 SUTTON COUNTY FOOD HUMAN SERVICES DANTEY AND DECOURCE

SUTTON COUNTY HEALTH	04-3642997	501(C)(3)	20,000		HUMAN SE
CENTER PO BOX 497 SONORA, TX 76950					

SONORA, TX 76950

SERVICES FOUNDATION PO BOX 18

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 74-1185725 501(C)(3) 10.000 EDUCATION TEXAS A&M UNIVERSITY 12TH MAN FOUNDATION

MAN FOUNDATION
PO DRAWER L-1
COLLEGE STATION, TX 77844

TEXAS A&M UNIVERSITY 74-2245072 501(C)(3) 20,000
FOUNDATION

EDUCATION

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

401 GEORGE BUSH DRIVE COLLEGE STATION, TX 77840

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

TEVAS EVES CAN ANGELO	74 4400640	504463403	7.440		ED. I GA TIGAL
MISSOURI SYNOD 7900 EAST HIGHWAY AUSTIN, TX 78724					
TEXAS DISTRICT OF THE LUTHERAN CHURCH-	74-1189681	501(C)(3)	25,000		RELIGIOUS

TEXAS EXES - SAN ANGELO 74-1109640 501(C)(3) 7,419 EDUCATION CHAPTER 314 W HARRIS AVE

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

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 37-1501938 501(C)(3) 5.000 TEXAS MASONIC CHARITIES HUMAN SERVICES FOUNDATION

1985 RANCH ROAD LLANO, TX 78643					
TEXAS SOUTHWEST COUNCIL - BOY SCOUTS OF AMERICA 104 VETERANS MEMORIAL DRIVE	75-0800617	501(C)(3)	98,562		YOUTH DEVELOPMENT

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

THE ARC OF SAN ANGELO INC PO BOX 1922 SAN ANGELO, TX 76902	75-1242148	501(C)(3)	10,022		HUMAN SERVICE
THE CHAPIN SCHOOL	13-1635257	501(C)(3)	8,333		EDUCATION

100 E END AVE NEW YORK, NY 10028

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 82-0668852 501(C)(3) 7.864 EDUCATION THE GARDEN KINGDOM MACTEDY ACADEMY

6400 SPY GLASS DR SAN ANGELO, TX 79604					
THE GOOD SAMARITAN CENTER OF SAN ANTONIO TEXAS	74-1117340	501(C)(3)	40,105		HUMAN SERVICES

1600 SALTILLO ST SAN ANTONIO, TX 78207

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance THE HOSPICE OF SAN ANGELO 75-2129019 501(C)(3) 64.245 HUMAN SERVICES FOUNDATION PO BOX 62211 SAN ANGELO, TX 76906

ENVIRONMENT

12.230

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

501(C)(3)

THE PEOPLEPLANT

CONNECTION PO BOX 62841 SAN ANGELO, TX 76906 30-0588582

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 90-0337669 501(C)(3) 60.420 THE SALVATION ARMY HUMAN SERVICES PO BOX 589 SAN ANGELO, TX 76902

HUMAN SERVICES

32,500

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

501(C)(3)

SAN ANGELO, TX 76902
THERAPEUTIC RIDING OF TUCSON
8920 E WOODLAND

TUCSON, AZ 85749

86-0329294

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance THROUGH GOD COMES 75-2778164 501(C)(3) 5.676 RELIGIOUS JUSTICE MINISTRY

PO BOX 3126 SAN ANGELO, TX 76902 TOM GREEN 4-H 82-3813942 501(C)(3) 27.535

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

SAN ANGELO, TX 76903

YOUTH DEVELOPMENT SCHOLARSHIP 113 WEST

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

TOM GREEN COUNTY LIBRARY 113 W BEAUREGARD SAN ANGELO, TX 76903	75-6001184	501(C)(3)	120,200		COMMU DEVELO

SAN ANGELO, TX 76904

OPMENT TRINITY LUTHERAN CHURCH 75-6003634 501(C)(3) 31,907 RELIGIOUS 3536 YMCA DRIVE

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance TRINITY LUTHERAN SCHOOL 75-6003634 501(C)(3) 18,102 YOUTH DEVELOPMENT

AND EARLY CHILDHOOD CENTER 3516 LUTHERAN WAY SAN ANGELO, TX 76904					
UNITED WAY OF THE CONCHO	75-0859662	501(C)(3)	296,754		HUMAN SERVICES

VALLEY PO BOX 3710

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 75-6439603 501(C)(3) 8.743 RELIGIOUS UNITY CHURCH OF SAN ANGELO 5237 S BRYANT BLVD

SAN ANGELO, TX 76904 WALL EDUCATION 32-0069326 501(C)(3) 10.878 EDUCATION

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

FOUNDATION PO BOX 259 WALL, TX 76957

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance WESTEV TIME DATIVEDEAD 56-2562807 E01/C1/31 24 055 DELICIOUS

YOUTH DEVELOPMENT

PROGRAM 301 W 18TH STREET	30-2303607	301(0)(3)	34,033		RELIGIOUS
SAN ANGELO, TX 76903					

78.910

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

501(C)(3)

WEST TEXAS BOYS RANCH

10223 BOYS RANCH ROAD SAN ANGELO, TX 76904 75-0954831

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance WEST TEXAS COUNSELING & 75-1561599 501(C)(3) 123.794 YOUTH DEVELOPMENT

GUIDANCE 242 N MAGDALEN ST SAN ANGELO, TX 76903					
WEST TEXAS REHABILITATION	75-0868320	501(C)(3)	103,739		HUMAN SERVICES

CENTER 3001 S JACKSON

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 74-2452538 501(C)(3) 10.000 WORLD VIDEO BIBLE SCHOOL RELIGIOUS

25 LANTANA LANE MAXWELL, TX 78656 YOUNG LIFE - SAN ANGELO 84-0385934 501(C)(3) 20.923

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

YOUTH DEVELOPMENT ARFA # TX-102 PO BOX 61816 SAN ANGELO, TX 76906

(a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 75-0800698 19.476 YOUNG MEN'S CHRISTIAN YOUTH DEVELOPMENT

YOUNG MEN'S CHRISTIAN 75-0800698 501(C)(3) 19,476
ASSOCIATION OF SAN
ANGELO
353 S RANDOLPH ST

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

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Dat	a -	DLN: 934	9325	2006	510	
Sch	nedule J	Com	pensat	ion Information	MO	IB No	1545-(0047	
(For	m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest							
		Complete if the organiz	Compensa zation answ	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	2019			
	o 1		▶ Attach	to Form 990.			to Pul		
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/ F</u>	<u>огтээо</u> тог	instructions and the latest inform	iation.		ectio		
	me of the organiza I ANGELO AREA FOU				Employer identificat	ion nu	ımber		
SAN	ANGELO AREA FOU	NDATION			73-1634145				
Pa	rt I Questi	ons Regarding Compensation	า	·					
							Yes	No	
1a				the following to or for a person listed y relevant information regarding thes					
		s or charter travel		Housing allowance or residence for p					
	_	companions		Payments for business use of persor					
		nification and gross-up payments	✓	Health or social club dues or initiation Personal services (e.g., maid, chaufi					
	LI Discretion	ary spending account	ш	Personal services (e g , maid, chaun	eur, cher)				
b				follow a written policy regarding payr ve? If "No," complete Part III to expla		1 b	Yes		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?		- 1-3	2	Yes				
	directors, truste	es, officers, including the CEO/Exect	utive Directo	r, regarding the items checked on Lin	e Ia'				
3				ed to establish the compensation of th	e				
		EO/Executive Director Check all that d organization to establish compens		not check any boxes for methods CEO/Executive Director, but explain it	n Part III				
	Compans:	ation committee	П	Written employment contract					
		ent compensation consultant	✓	Compensation survey or study					
		of other organizations	<u></u>	Approval by the board or compensat	ion committee				
4			Part VII, Se	ction A, line 1a, with respect to the fil	ing organization or a				
	related organiza								
a		ance payment or change-of-control				4a		No	
b c	•	r receive payment from, a suppleme r receive payment from, an equity-b	•	•		4b 4c	Yes	No	
·	•		•	blicable amounts for each item in Part	III	40		NO	
), 501(c)(4), and 501(c)(29) org	-	-					
5		ed on Form 990, Part VII, Section A, ontingent on the revenues of	line 1a, did	the organization pay or accrue any					
а	The organization	1 [?]				5a		No	
b	Any related orga	anızatıon? 5a or 5b, describe in Part III				5b		No	
_	•	·	locate de de	All and the second seco					
6		ed on Form 990, Part VII, Section A, ontingent on the net earnings of	line 1a, did	the organization pay or accrue any					
a	The organization					6a		No	
b	Any related orga	anization? 6a or 6b, describe in Part III				6b		No	
7	•	•	line 15 did	the organization provide any nonfixed	ı				
•		escribed in lines 5 and 6? If "Yes," d			•	7		No	
8		nts reported on Form 990, Part VII, nitial contract exception described in		red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	scribe	8		No	
9	If "Yes" on line 3 53 4958-6(c)?	8, did the organization also follow th	e rebuttable	presumption procedure described in l	Regulations section	9			
For I	Danarwork Body	iction Act Notice, see the Instruc	tions for Ec	orm 990 Cat No. 5	0053T Schedule 1	/Earn	2001	2010	

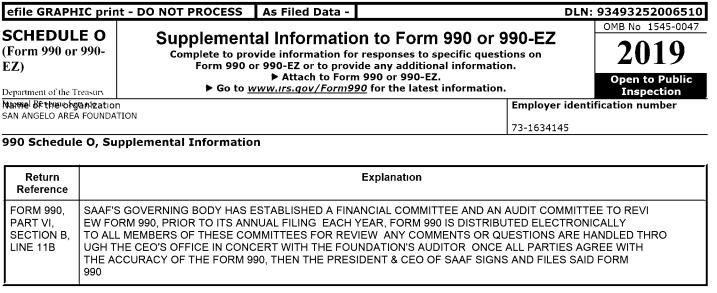
Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 MATT LEWIS 187,500 (i) n 55.185 4.800 247,485 O PRESIDENT & CEO 0 (ii)

Schedule J (Form 990) 2019	Page 3					
Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation					
SCHEDULE J, LINE I, COLUMN C	SCHEDULE J PART I QUESTION 4(B) SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN MATT LEWIS, \$43,935 INCREASED VALUE					
	Schedule 1 (Form 990) 2019					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493252006510 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number SAN ANGELO AREA FOUNDATION 73-1634145 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 6,967,056 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (_____ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

hedule M (i	Form 990) (2019)	F	Page 2
Part II		tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization	
	is reporting in Part I, colu complete this part for an	umn (b), the number of contributions, the number of items received, or a combination of both. Also y additional information	
Re	eturn Reference	Explanation	
		Schedule M (Form 990) (2	2019)



990 Schedule O, Supplemental Information Return Explanation

Reference

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

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

Return Explanation
Reference

FORM 990,	SAAF MAKES AVAILABLE, UPON REQUEST, ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY,
PART VI,	TIS AUDITED FINANCIAL STATEMENTS AND FILED FORM 990, TO THE PUBLIC THE PUBLIC MAY REQUES
SECTION C,	T THIS INFORMATION VIA THE SAAF WEBSITE, OR BY PHONE OR IN WRITING
LINE 19	

Return Explanation

Reference

Kelefellee	
FORM 990,	REVENUE(LOSS) FOR AGENCY ENDOWMENT FUNDS PER SFAS #136 -8,919,290 GRANTS & EXPENSES MADE
PART XI,	FROM AGENCY ENDOWMENT FUNDS PER SFAS #136 1,014,126 CHANGE IN VALUE OF SPLIT INTEREST AGR
LINE 9	EEMENT 1,796,967

Return Explanation

PART XI,
LINE 2C

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

Return Explanation

BOARD MEMBERS AND 30 GRANT APPLICATION COMMITTEE MEMBERS AND 20 ADDITIONAL VOLUNTEERS
во