Return of Private Foundation

ヽヮ に òr Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For calendar year 2019 or tax year-beginning 2019, and ending A Employer identification number Name of foundation ASTROS FOUNDATION 74-2793078 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 501 CRAWFORD STREET City or town, state or province, country, and ZIP or foreign postal code G Check all that apply: If exemption application is pending, check here. 77002 Initial return Initial return of a former public charity 1. Foreign organizations, check here . Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation Check type of organization: X Section 501(c)(3) exempt private foundation If private foundation status was terminate Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at J Accounting method: X | Cash If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col (c), line under section 507(b)(1)(B), check here 1,055,070 (Part I, column (d), must be on cash basis) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per income income purposes may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions)) 2,678,247 1 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to 2 Check > 3 Interest on savings and temporary cash investments. Dividends and interest from securities 259,145 259,145 Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gain. . Income modifications . Gross sales less returns and allowances . . . 10 a b Less Cost of goods sold . Gross profit or (loss) (attach schedule) 2,700,732 Other income (attach schedule) 11 Ś Total. Add lines 1 through 11 5,638,124 259,145 12 SCANNED 13 Compensation of officers, directors, trustees, etc. Expenses 15 16 16 342,210 Other employee salaries and wages Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) b Administrative Other professional fees (attach schedule). . . 17 18 Taxes (attach schedule) (see instructions). . . Depreciation (attach schedule) and depletion. 19 20 and 21 Travel, conferences, and meetings 22 Printing and publications Operating 23 Other expenses (attach schedule) 169,408 106,626 24 Total operating and administrative expenses. 511,618 106,626 Add lines 13 through 23. 773,802 11,773,802 25 Contributions, gifts, grants paid 12,285,420 106,626 11,773,802 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 -6,647,295 a Excess of revenue over expenses and disbursements 152,519 b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). .

	art II	Balance Sheets	Attached schedules and amounts in the	Beginning of year	End	of year
•	a. (description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	1,572,802	1,055,070	1,055,070
			cash investments			
١				·	·	
		Less allowance for dou	ıbtful accounts ▶			
	4	Pledges receivable ▶_				
		Less allowance for dou	ubtful accounts ▶			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	ttach schedule) (see instructions)			
ļ	7	Other notes and loans	receivable (attach schedule) 🕨		······································	
-		Less allowance for dou	ıbtful accounts ▶			
ets	8	Inventories for sale or us	se			
SS	9	Prepaid expenses and o	deferred charges			
۲	10a	Investments - US and sta	te government obligations (attach schedule)			
	b	Investments - corporate	e stock (attach schedule)			
			e bonds (attach schedule)			
		Investments - land, building and equipment basis	2,009,1311			
		(attach schooling)	ation ▶ 30,991	26,833		·
	12	Investments - mortgage	loans	14,877,313	8,832,800	
-	13 14	Investments - other (att Land, buildings, and	ach schedule)			
		equipment basis Less accumulated depreci	otion >			
		(attach schedule)	·			
			>)			
			completed by all filers - see the		11 046 020	1 055 070
┥			page 1, item I)	16,476,948	322,388	1,055,070
			accrued expenses		322,388	
ام						<u> </u>
Ties						
≣		·	ors, trustees, and other disqualified persons			i
삠			otes payable (attach schedule) e ▶)			i i
	22	Other habilities (describ				
1	23	Total liabilities (add line	es 17 through 22)		322,388	. }
┪		-	w FASB ASC 958, check here			1
ces		and complete lines 24				
ē	24	Net assets without don	or restrictions			
g	25	Net assets with donor r				(
힏		Foundations that do not	follow FASB ASC 958, check here 🕨 🔙		•	
힐		and complete lines 26 thr	•			!
5	24 25 26	Capital stock, trust prin	icipal, or current funds			}
2	27		or land, bldg , and equipment fund			
š	27 28	Retained earnings, accum	ulated income, endowment, or other funds	16,476,948	11,623,641	
٤	29 30	Total net assets or fun	d balances (see instructions)	16,476,948	11,623,641	
텕	30	Total liabilities and	net assets/fund balances (see			
Z			<u> </u>	16,476,948	11,946,029	<u> </u>
			inges in Net Assets or Fund Bala			
1			balances at beginning of year - Part		_	16 476 040
_			ed on prior year's return)			16,476,948
			, line 27a		2	-6,647,295
			ded in line 2 (itemize) ► <u>UNREALIZ</u>			1,793,988
			n lino 2 (stamiza) N		4	11,623,641
		reases not included i	balances at end of year (line 4 minus	line 5) - Part II column /		11,623,641
0	10(2	ii net assets or jund t	Dalances at end of year time 4 minus	ine oj - Fait II, Widiffi (t	<i>.,</i> , 0	Form 990-PF (2019)

Par	t IV Capital Gains	and Losses for Tax on Inve	stment Income			
	• •	scribe the kind(s) of property sold (for excick warehouse, or common stock, 200 s	• •	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a :	RAYMON JAMES 5742	2 TWV Z10G		P	VARIOUS	VARIOUS
b_	RAYMOND JAMES 611	N1 K8N 1V3A				
c_						
<u>d</u>						
<u>e</u>	~		···			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
<u>a</u>	3,680,472		3,656,049		-	24,423
<u>b</u>	9,414,029		9,669,999			<u>-255,970</u>
<u> </u>					-	
<u>d</u>						
<u>е</u>	Complete anti-fee coasts of	have a series of the sed award to	by the ferradation on 12/21/60		_	
	Complete only for assets si	howing gain in column (h) and owned I	··· ··· · · · · · · · · · · · · · · ·		Gains (Col (h) ga (k), but not less t	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	l (h))
<u>a</u>						24,423
<u> </u>						-255,970
<u> </u>						
<u>d</u>				-		
<u>e</u>		, If an	in also estes in Boot I line 7			
2	Capital gain net income	or (not canital loce)	in, also enter in Part I, line 7 ss), enter -0- in Part I, line 7	2		-231,547
3	Net short-term canital de	ain or (loss) as defined in sections :	•			-231,347
5		art I, line 8, column (c) See inst				
	•			3		0
Par		Inder Section 4940(e) for Red		ncome		
		the section 4942 tax on the distribu		ase perio	d?	Yes X No
		i't qualify under section 4940(e). Do nount in each column for each yea		na any er	ntries	
1	(a)		·	ng any er	(d)	
Cale	Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	col (c))
	2018	3,200,525	14,877,313			0.2151
	2017	2,137,419				0.1531
	2016	518,159				0.0498
	2015	356,589		T		0.0491
	2014	434,992	5,349,450			0.0813
•	Total of line 1 column /	٠,		2		0.5484
2		d) o for the 5-year base period - divide				0.5464
3	•	foundation has been in existence if	•	3		0.1097
	the number of years the	Touridation has been in existence in	i less tilali 5 years	 		0.1037
4	Enter the net value of no	oncharitable-use assets for 2019 fr	om Part X, line 5	4	1:	2,971,457
5	Multiply line 4 by line 3.			5		1,422,969
6		ent income (1% of Part I, line 27b).				1,525
7						1,424,494
8	Enter qualifying distribut If line 8 is equal to or g Part VI instructions.	nons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete	8 that part		1,773,802 x rate See the

	3		_	laes i
	990-PF (2019) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	instru		ege (s)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	•		_,
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,	525
	here and enter 1% of Part I, line 27b			٠
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of			·
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2		1,	525
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1,	525
6	Credits/Payments			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld	~		
7	Total credits and payments Add lines 6a through 6d		2,	100
3	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
)	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			575
	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11			<u> 575</u>
	t VII-A Statements Regarding Activities			r
a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation > \$ (2) On foundation managers > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a_	X	-
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b_	Х	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	_	X
	If "Yes," attach the statement required by General Instruction T			
5	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	v	Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
	Enter the states to which the foundation reports or with which it is registered. See instructions TEXAS			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
)	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"			
	complete Part XIV	9		Х
)	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X

Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► HOUSTON ASTROS.MLB.COM/HOU/FOUNDATION			
14	The books are in care of ▶ DOUG SECKEL Telephone no ▶ 713-259-	8000)	
	Located at ▶ 501 CRAWFORD STREET ZIP+4 ▶ 77002			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			0
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			ļ
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(b) Furnish goods, services, or facilities to (or decept them from) a disqualified person			
	(1,7) - 6,9 - 6 - 6 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7			l
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			j
				İ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			:
	termination of government service, if terminating within 90 days)			
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
D	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	X	!
	Organizations relying on a current notice regarding disaster assistance, check here			
r	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			- 1
·	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			1
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			ł
	6d and 6e) for tax year(s) beginning before 2019?			1
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			!
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		<u>X</u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			!
	-			İ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
	at any time during the year?			,
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			{
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			, ,
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			!
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	45		1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	Λ DE	<u>X</u>

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Total number of other employees paid over \$50,000................

Pai	t VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	/ees,
3	Five I	nighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NC	NE		
			,
	l numbe	or of others recovering over \$50,000 for professional convices	
	t IX-A	er of others receiving over \$50,000 for professional services	
Li	st the four	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 :	THE A	STROS FOUNDATION COMMUNITY LEADER PROGRAM	
_			600 001
2 I	IRRAN	YOUTH ACADEMY	698,091
	<u>JINDIIII</u>	TOOTH HONDEN	
_			619,632
3 _			
-			
4			
-			
Par	t IX-B	Summary of Program-Related Investments (see instructions)	
D	escribe th	e two largest program-related investments made by the foundation duning the tax year on lines 1 and 2	Amount
1_			
-			
2			
-			
A	l other pro	ogram-related investments. See instructions	
3 _			
-			
		and though 2	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	11,855,056
	Average of monthly cash balances	1b	1,313,936
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	13,168,992
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	13,168,992
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		······································
	instructions)	4	197,535
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	12,971,457
6	Minimum investment return. Enter 5% of line 5	6	648,573
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	648,573
2 a	Tax on investment income for 2019 from Part VI, line 5 2a 1,525		
b	Income tax for 2019 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	1,525
3	Distributable amount before adjustments Subtract line 2c from line 1	3	647,048
4	Recoveries of amounts treated as qualifying distributions		·
5	Add lines 3 and 4		647,048
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	647,048
Pa	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	11,773,802
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	11,773,802
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,773,802
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when ca	alculating	whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

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Pa	rt XIII Undistributed Income (see instru	<u>ıctions) </u>			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				647,048
2	Undistributed income, if any, as of the end of 2019				
а	Enter amount for 2018 only				
b	Total for pnor years 20,20,20]
3	Excess distributions carryover, if any, to 2019]
а	From 2014 167,597				
	From 2015 1,251,956				
C	From 2016 996, 367				
	From 2017 1,442,933				
е	From 2018 2,375,805				
f	Total of lines 3a through e	6,234,658			
4	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$ <u>11,773,802</u>				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2019 distributable amount				647,048
	Remaining amount distributed out of corpus	11,126,754			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	17,361,412			<u> </u>
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				<u> </u>
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				<u> </u>
E	4a from line 2a Taxable amount - see				
	instructions				<u>. </u>
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2020				1
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required - see instructions)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)				
^					1
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	17,361,412			
10	Analysis of line 9		.		I
	Excess from 2015				}
	Excess from 2016				
	Excess from 2017 1,442,933				
	Excess from 2018 2,375,805				
	Excess from 2019 11,126,754				,
				·	

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			-	and Part VII-A, quest		<u>-</u>	
1 a	If the foundation has i	-			rating		
	foundation, and the ruling			=	▶∟		1 40 40 11/45
	Check box to indicate v		is a private operating		n section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	1	 (e) Total
	justed net income from Part I or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(d) 20	16	
	return from Part X for each						
	year listed					/	
b	85% of line 2a			ļ		/	
C	Qualifying distributions from Part						
	XII, line 4, for each year listed .				 		
ū	Amounts included in line 2c not used directly for active conduct						
	of exempt activities						
е	Qualifying distributions made directly for active conduct of						
	exempt activities. Subtract line						
3	2d from line 2c		 	+/-	+		
•	alternative test relied upon						
а	"Assets" alternative test - enter						
	(1) Value of all assets (2) Value of assets qualifying		<u> </u>		-	-	
	under section						
b	4942(j)(3)(B)(i) "Endowment" alternative test-						
-	enter 2/3 of minimum invest-						
	ment return shown in Part X,						
c	"Support" alternative test - enter						
•	(1) Total support other than						
	gross investment income (interest, dividends, rents,						
	payments on securities						
	loans (section 512(a)(5)), or royalties)						
	(2) Support from general						
	public and 5 or more exempt organizations as						
	provided in section 4942 (j)(3)(B)(iii)						
	(3) Largest amount of sup-						
	port from an exempt organization			_			
	(4) Gross investment income .						
Pa	rt XV Supplemer	ntary Information (Complete this par	t only if the found	ation had \$	5,000 or more	in assets at
		uring the year - see					
1	Information Regarding List any managers of			ro than 20% of the tot	al contributio	ne received by the	no foundation
a	before the close of any	tax vear (but only if th	nev have contributed	more than \$5,000). (\$	See section 50	7(d)(2).)	ic roundation
	_	tax your (but only in a	,			- (-/(-/-/	
NOI	NE List any managers of	the foundation who	own 10% or more	of the stock of a cor	noration (or a	n equally large r	ortion of the
U	ownership of a partner					in equally large ,	, , , , , , , , , , , , , , , , , , , ,
	,			-			
NOI	NF.						
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:			
	Check here ▶ if t	he foundation only	makes contributions	to preselected cha	ritable organi	zations and doe	s not accept
	unsolicited requests for	or funds. If the found	ation makes gifts, gi	ants, etc., to individu	als or organiz	ations under oth	er conditions,
	complete items 2a, b, c				_		
а	The name, address, a	nd telephone number	or email address of	the person to whom ap	plications shou	ıld be addressed	
				· · · · · · · · · · · · · · · · · · ·			
b	The form in which appl	lications should be sul	omitted and informat	ion and materials they	should includ	e	
	Any submission deadli	nes:	<u> </u>		<u>. </u>		
·	, ary oddiniosion doddin						
				<u>_</u>			
d	Any restrictions or li	mitations on awards	, such as by geog	raphical areas, charit	able fields, k	unds of institution	ons, or other
	factors						

3 Grants and Contributions Paid Dur	ing the Year or App	roved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ASTROS GOLF FOUNDATION				
	•			
	<u> </u>		<u> </u>	
Total	<u> </u>	<u></u>	№ 3a	
b Approved for future payment				
			t t	
			l	
Total			<u>►</u> 3b	

Part XV	/I-A Analysis of Income-Prod	ucing Act	ivities			
Enter gros	s amounts unless otherwise indicated	—	ated business income		y section 512, 513, or 514	(e) Related or exempt
1 Progra	ım service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a						
			-			
		<u> </u>	· · · · · · · · · · · · · · · · · · ·			
f —						
	s and contracts from government agencies					
	ership dues and assessments					
	t on savings and temporary cash investments					
	nds and interest from securities				259,145	
	ntal income or (loss) from real estate					
	bt-financed property					
	t debt-financed property					
	ital income or (loss) from personal property					
	investment income					
8 Gain or	(loss) from sales of assets other than inventory					
9 Net inc	come or (loss) from special events					
	profit or (loss) from sales of inventory					
11 Other r	revenue a					
c						
d	<u></u>					· — — —
е						
	al Add columns (b), (d), and (e)				259,145	
	Add line 12, columns (b), (d), and (e)				13	259,145
	sheet in line 13 instructions to verify calcillable Relationship of Activities		liabment of F	Everent Breez		
Part XV						
Line No. ▼	Explain below how each activity accomplishment of the foundation	-		-	•	•
	SEE COMMUNITY REPORT E	FOR 2018	B ATTACHED.	-		
	<u> </u>			<u> </u>		
						_
						
				_		
						
	-				·	
						
	 					
						
	 				 	_ _
	<u> </u>					
	<u> </u>					
	 					
						

Part XVII

Part [*]	ΧÝII	Information Re Organizations	egarding Tra	nsfers to and	d Transaction	ns and	Relationship	s With	Noncha	ritabl	e Exc	∍mpt
ır	n sect rganız	organization directi tion 501(c) (other ations? trs from the reportin	than section	501(c)(3) org	ganizations) or	in sect	ion 527, rel				Yes	No
		h								1a(1)		\overline{x}
		er assets										X
•	•	ransactions										
(1) Sale	es of assets to a no	ncharitable exe	mpt organizatioi	n					1b(1)		<u> </u>
(:	2) Pur	chases of assets fro	om a noncharit	able exempt org	anızatıon					1b(2)		<u>X</u>
		ital of facilities, equi									1 1	X
		mbursement arrange										<u>X</u>
		ns or loan guarantee										X
		formance of service of facilities, equipm										X
		inswer to any of th									faır m	
		f the goods, other										
V	alue ir	any transaction or	sharing arran	gement, show	ın column (d)	the value	of the goods	s, other a	ssets, or	service	s rece	eived
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable exem	pt organization	(d) De	scription of transf	fers, transac	tions, and sh	anng am	ingeme	nts
						-						
						 						
								_				
					-	<u> </u>	· · · · · · · · · · · · · · · · · · ·					
						i ·						
										_		
						<u> </u>						
			-									—
		<u> </u>										
	-									-		
		 		•								
		oundation directly	•					t organız	ations		_	7
		ed in section 501(c)	•	ction 501(c)(3)) or in section 5	527?	• • • • • • •			Y	es	No
_b !	"Yes,	" complete the follow		/b) T:	no of omenination	Т		(a) Deserve	tion of relatio	nehir		
		(a) Name of organization	<u> </u>	(6) 19	oe of organization			(c) Descript	ilon or relatio	чэнр		
						+		_				
_							· · · · · · · · · · · · · · · · · · ·				_	
								-				
	Under	penalties of perjury, I decla , and opplete Declaration of	are that I have exam f preparer (other than	ined this return, inclu taxpayer) is based on a	uding accompanying ill information of which	schedules and n preparer has	d statements, and t any knowledge	to the best of	of my knowle	dge and I	oelief, it	ıs true,
Sign	 	Maria Ilan		م دا	D. D.	500	Las		May the I	RS discus	s this	return
Here		[wuntays			-2020	Title	rary		with the p See instruction	reparer	Yes	below?
	Sign	ature of officer or tructee		Date		Title			Joe mstructi	,"°	Ր	No
	1	Print/Type preparer's na	me	Preparer's sig	nature		Date	Chi	eck If	PTIN	_	
Paid		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							f-employed			
Prepa	arer	Firm's name						Firm's EIN	>			
Use (Only	Firm's address										
								Phone no				
									_	00		

Schedule B (Form 990, 990-EZ,

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2019

Name of the organization Employer identification number ASTROS FOUNDATION 74-2793078 Organization type (check one) Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 74-2793078

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHEVRON 1400 SMITH STREET HOUSTON, TX 77002	\$278,500	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CALPINE CORPORATION 717 TEXAS AVENEUE HOUSTON, TX 77002	\$250,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CONOCO PHILLIPS 925 N ELDRIDGE HOUSTON, TX 77079	\$250,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		(c) Total contributions \$250,000	
No.	Name, address, and ZIP + 4 HALLIBURTON CHARITABLE FOUNDATION 3000 N SAM HOUSTON PARKWAY	Total contributions	Person X Payroll Noncash (Complete Part II for
No. 4	Name, address, and ZIP + 4 HALLIBURTON CHARITABLE FOUNDATION 3000 N SAM HOUSTON PARKWAY HOUSTON, TX 77032 (b)	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	Name, address, and ZIP + 4 HALLIBURTON CHARITABLE FOUNDATION 3000 N SAM HOUSTON PARKWAY HOUSTON, TX 77032 (b) Name, address, and ZIP + 4 QUANTA SERVICES INC. 2800POST OAK BLVD #2600	\$	Person X Payroll Noncash (Complete Part II for noncash contributions) (d) Type of contribution Person X Payroll Noncash (Complete Part II for

Employer identification number 74-2793078

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HOUSTON ASTROS (COLLEGE CLASSIC) 501 CRAWFORD STREET HOSUTON, TX 77002	\$224,879	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	THE FRIEDKIN GROUP P.O. BOX 441887 HOUSTON, TX 77244-1877	\$175,000	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	OCCIDENTAL PETROLEUM 5 GREENWAY PLAZA HOUSTON, TX 77046	\$125,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	COCA COLA 2150 TOWN SQUARE SUITE 400 SUGAR LAND, TX 77478	\$100,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		1	
	LYONDELL BASELL 1200 MCKINNEY SUITE 300 HOUSTON, TX 77002	\$100,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	1200 MCKINNEY SUITE 300	\$ 100,000 (c) Total contributions	Payroll Noncash (Complete Part II for

Employer identification number 74-2793078

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	KARBACH BREWING 2023 KARBACH STREET HOUSTON, TX 77092	\$61,555	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	MLB CHARITIES 75 NINTH AVENUE 5TH FLOOR NEW YORK, NY 1011	\$55,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>15</u>	BEYOND LIMITS 400 N BRAND BLVD SUITE 700 GLENDALE, CA 91203	\$12,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
		1	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			(d) Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions)
No.	Name, address, and ZIP + 4 AEVEX 4400 STEVENS AVE	Total contributions	Person X Payroll Noncash (Complete Part II for
No. 16	AEVEX 4400 STEVENS AVE SOLANA BEACH, CA 92075 (b)	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
No. 16 (a) No.	Name, address, and ZIP + 4 AEVEX 4400 STEVENS AVE SOLANA BEACH, CA 92075 (b) Name, address, and ZIP + 4 ASUS 800 CORPROATE WAY	\$ 10,000 (c) Total contributions	Person X Payroll Noncash (Complete Part II for noncash contributions) (d) Type of contribution Person X Payroll Noncash (Complete Part II for

Employer identification number 74-2793078

			<u>,</u>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	DARTMOUTH COLLEGE HANNOVER, NH 03755	\$5,000 	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _ \$	Person Payroll Noncash (Complete Part II for noncash contributions)

ASTROS FOUNDATION

Employer identification number

74-2793078

Part II	Noncash Property	(see instructions). Use duplicate co	pies of Part II if additiona	space is needed.
---------	------------------	-------------------	---------------------	------------------------------	------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	-	- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - \$	

Employer identification number Name of organization 74-2793078 ASTROS FOUNDATION Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee