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. | |
|---|---|---|
| _ | Information about Form 990 and its instructions is at www.irs.gov/form990 | 1 |

OMB No 1545-0047

Open to Public

Form **990** (2016)

| | ent of the Treasury Revenue Service | ► Information about Form 99 | 0 and its instructions | is at www.ir. | s.gov/form990. | 08 | Inspection |
|---------------|---|--|-------------------------------|--------------------|-----------------------------|-------------|-------------------------|
| | | lendar year, or tax year beginning | 9/1/2016 | , and e | | 1/2017 | |
| _ | eck if applicable | | t College Foundation, I | nc | D Employe | r identific | ation number |
| Add | iress change | Doing business as | | T | | _ | |
| Nan | ne change | Number and street (or P O box if mail is not deli | ivered to street address) | Room/suite | 74-233856 | | <u> </u> |
| = | - | 80 Fort Brown | <u> </u> | | E Telephon | e number | |
| | al retum | City or town Brownsville | State TX | ZIP code 78520 | (956) 882- | 7306 | |
| Final | I return/terminated | | vince/state/county | Foreign postal | code | | |
| Ame | ended retum | , croigh country name | , | . o.o.g., posta. | G Gross red | eipts \$ | 2,083,0 |
| = | | F Name and address of principal officer | | | | | |
| App | dication pending | ' ' | V 70500 | | H(a) is this a group return | | _ = = |
| | -· | Tara Rios 80 Fort Brown, Brownsville, T | X 78520 | - A | H(b) Are all subordinat | | |
| Tax- | exempt status | X 501(c)(3) 501(c) () ◀ (in | sert no) 4947(a)(1) | or <u>\$52</u> /1 | If "No," attach a li | st (see ins | structions) |
| J Wel | bsite: 🕨 ww | w tsc edu | | • | H(c) Group exemption | number 🕨 | <u> </u> |
| K Form | n of organization | X Corporation Trust Association | Other ▶ | L Yea | ar of formation 1984 | M Sta | nte of legal domicile Ţ |
| Par | | mmary | | 1 | 1304 | | |
| r ai | | escribe the organization's mission or mo | et cianificant activitie | s To a | ssist Texas Southn | nost Col | lege in |
| œ l | _ | g higher education to increase numbers of | _ | | · | iosi coi | lege III |
| Governance | | ole students | or area residents by i | unding scrio | iaisiips | | |
| [교 | | | | | | | |
| <u>Š</u> | | nis box ▶ if the organization discon | | or disposed | of more than 25% | 1 . 1 | t assets |
| 5 8 | | of voting members of the governing bod | | | | 3 | |
| ğ | | of independent voting members of the g | | | | 4 | |
| [| | mber of individuals employed in calendar | | ine 2a) | • | 5 | |
| ACTIVITIES | | mber of volunteers (estimate if necessary | | | • | 6 | |
| ۲ | | related business revenue from Part VIII, | | | | 7a | . |
| | b Net unr | elated business taxable income from Forr | m 990-T, line 34 | | | 7b | |
| - 1 | | | | | Prior Year | | Current Year |
| စ္ | | itions and grants (Part VIII, line 1h) | | • | | | |
| Revenue 1 | _ | service revenue (Part VIII, line 2g) . | | - | | | |
| <u></u> | | ent income (Part VIII, colum <u>n (</u> A),-l <u>in</u> es:3 | | • | | 8,058 | 548,9 |
| " 1 | 11 Other re | venue (Part VIII, colum n (A) Jines 5,<u>6</u>q (| 80 9c, 10e, and 10e |) . | 25 | 2,056 | 386,5 |
| _ | | enue—add lines 8 through 11 ได้เรา equal E | | ne 12). | 57 | 0,114 | 935,4 |
| 1 | | ınd sımılar amounts paıd ∤Part IX, columr | | | | | |
| 1 | | paid to or for member APart IX, columb | | | | | |
| ဖ္ထ 1 | ı 5 Salaries | other compensation, employee benefits (Pa | art TX, column (Á), lines | ∮ 5–10) . ∣ | | | |
| <u> </u> | 6a Profess | onal fundraising fees (Par <mark>t IX, column (A</mark> |)-line-11e) 📛 📗 | ا | | | |
| Sesuedx= | b Total fu | ndraising expenses (Part IX, வுருந்நி | line (25) | 0 | 4 4 4 | 6 | |
| ii 1 | | penses (Part IX, column (A), lines 11a-1 | | | 3 | 3,328 | 153,5 |
| 1 | 8 Total ex | penses Add lines 13–17 (must equal Pa | rt IX, column (A), line | 25) | | 3,328 | 153,5 |
| _] 1 | | e less expenses Subtract line 18 from lin | | | 53 | 6,786 | 781,9 |
| 8 | | | | | Beginning of Current | | End of Year |
| Balances 5 | 20 Total as | sets (Part X, line 16) . | | | 8,42 | 3,921 | 9,249,8 |
| <u>n</u> 2 | 1 Total lia | oilities (Part X, line 26) | | | 6 | 5,000 | 109,0 |
| 면 2 | 2 Net ass | ets or fund balances Subtract line 21 from | m line 20 . | | 8,35 | 8,921 | 9,140,8 |
| art | II Sid | nature Block | | | | | |
| nder p | | , I declare that I have examined this return, including | accompanying schedules | and statements, | , and to the best of my ki | nowledge | |
| nd belie | ef, it is true, corre | ct, and complete Declaration of prepares (other than | officer) is based on all info | rmation of which | preparer has any know | ledge | |
| ign | | Jan Levr | | | | | |
| lere | | Signature of officer | | | Date | Λ. I | 1 . |
| . C. C | \ | Jara Kic | 25 | | | 06/26 | 0/18 |
| | <u> </u> | Type or print name and title | | | | | |
| | Pnn | /Type preparer's name Pre | parer's signature | | Date | | PTIN |
| Paid | | 22 11 02222 | Ousl-CA | Å | 1 1 | heck |] f |
| repa | arer Car | os H Cascos | CNOC - CP | ~ | | elf-employ | 1. 0.00 |
| Jse C | 1 = | 's name ► Pattillo, Brown & Hill, LLP | | | Firm's EIN ▶ | 74-275 | 1720 |
| | | s address > 765 East 7th Street, Brownsv | ılle, TX 78520 | | Phone no | (956) 5 | 44-7778 |
| av th | - | s this return with the preparer shown abo | | :) | | | X Yes |
| - y 111 | , o ii to discus | and retain with the preparer anown abo | rec (ace manachons | •, | | | |

| Form 9 | 90 (2016) | Texas Southmost College Foundation, Inc | 74-2338565 | Page 2 |
|--------|------------|--|--------------------|---------------|
| Pa | rt III | Statement of Program Service Accomplishments | | - |
| | | Check if Schedule O contains a response or note to any line in this Part III | <u> </u> | |
| 1 | Briefly d | escribe the organization's mission | | |
| | | t Toyan Courtment College in projection by both a discretion to increase numbers of cree | | |
| | | by funding scholarships for eligible students | | |
| | | | | |
| | | | | |
| 2 | Did the | organization undertake any significant program services during the year which were not listed on | | |
| | | Form 990 or 990-EZ? | Yes | X No |
| | If "Yes," | describe these new services on Schedule O | | |
| 3 | | organization cease conducting, or make significant changes in how it conducts, any program | | |
| | services | | . Yes | X No |
| | If "Yes," | describe these changes on Schedule O | _ | |
| 4 | | the organization's program service accomplishments for each of its three largest program service | es, as measured by | |
| | | s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and | | |
| | | expenses, and revenue, if any, for each program service reported | | |
| | | | | |
| 4a | (Code |) (Expenses \$ including grants of \$) (Rever | nue \$ |) |
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| | 0" | | | |
| 4d | | ogram services (Describe in Schedule O) | 5 \ | |
| | (Expense | | 0) | |
| 4e | I otal pro | gram service expenses 0 | | |

| 1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule in Continuors (see instructions)? 3 Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule in C. Part II is the organization. Sold the organization. Did the organization is action 501(c)(4) or 501(c)(5) or 501(c)(6) or | G C | One chilate of regained concaules | | —-т | |
|--|-----|---|-----|-----------------|--------------|
| 2 Is the organization required to complete Schedule B, Schedule of Contributions (see instructions)? 3 Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tay year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), o | 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes " | | Yes | No |
| 3 Dut the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule D, Part I I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(c)(4), 501(c)(6), 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 II I 5 Is the organization assection 501(c)(4), 501(c)(6), 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 I 6 Did the organization meanum y donor advised funds or any similar funds or accounts for which donors have the ingrit to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II I Did the organization meanum collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II I Did the organization meanum tin Part X, line 21, for ecorou or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorou or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorou or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorou or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorous or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorous or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorous or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorous or custodial account habitity, serve as a custodian for amounts not listed in Part X, inc 21, for ecorous electrosis and accounts of the ecorous | • | | 1 | х | |
| section 501(k3) organizations. Did the organization agains and between the control of the complete Schedule C, Part II Section 501(k3) organizations. Did the organization agains and between the complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, seasessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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, in provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VIII Did the organization, directly or through a related organization, hold assets in temporally restricted endownents, or quasi-endownents? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X XIII Did the organization report an amount for investments—other securities in Part X, line 10? If Yes," complete Schedule D, Part X XIII Did the organization report an amount for investments—other securities in Part X, line 10? If Yes," complete Schedule D, Part | 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | X |
| 4 Section 501(x/3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "ves," complete Schedule C, Part II | 3 | | 3 | | |
| election in effect during the tax year" If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(| 4 | | | | |
| assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account hability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotations report an amount in Part X, line 21, for escrow or custodial account hability, serve as a custodian for amounts not listed in Part X, line 12 the time organization report an amount or part and part III Did the organization report any of the following questions is "Yes," templete Schedule D, Part V, III III the organization report an amount for investments—other securities in Part X, line 12? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12? If "Yes," complete Schedule D, Part XI Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI Did the organization report an amount for investments—other securities in Part X, line 12? If "Yes," complete Schedule D, Part XI Did the organization report an amount for investm | | | 4 | | _x_ |
| Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization recover or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part III Did the organization report an amount or maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount or maintain and part X, increasing, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization is listed in Part X, increasing and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V, IVII, VIII, X, or X as applicable. Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments—other securities in Part X, line 12? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part XIII Did the organization or amount for other assets in Part X, line 15? If Yes," complete Schedule D, Part XIII Did the organization and amount for other assets in Part X, line 15? If Yes," complete Schedule D, Part XIII Did the organization and amount for other assets in Part X, line 15? If Yes," complete Schedule D, Part XIII Did the organization and amount for other asse | 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | ì | |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I I 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 Did the organization report an amount in Part X, Ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, Ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts on the service reported in services? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for quasi-endownments? If "Yes," complete Schedule D, Part V 12 Did the organization report an amount for investments—other securities in Part X, line 12? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V 11 Did the organization is lability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11 Did the organization shalp and part and part A 11 Did the organization shalp and part and part A 12, line 15 that is 5% or more | | | 5 | | Х |
| have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 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 service?" If "Yes," complete Schedule D, Part IV Did the organization into a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part V. If the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other lashities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other lashities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization other amount for other lashities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization of the secretion in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization of shallify for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization have aggregate revenues or expen | 6 | | | | |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization amount in Part X, line 21, for escrow or custodial account hability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization (recity or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V, If If the organization report an endownthents, or quasi-endowments? If "Yes," complete Schedule D, Part V, If If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 10 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for other lastities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 12 Did the organization and in section 1700(b)(I)(I)(I)(I) If "Yes," complete Schedule D, Part X 13 X. 14 Did the organization have aggregate revenues o | | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | 6 | | х |
| the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 | 7 | | | | |
| b Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account hability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. If the organization report any of the following questions is "Yes," then complete Schedule D, Part V. If the organization report an amount for linvestments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI If Le X The did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI If Did the organization included in consolidated, in | | | 7 | | Х |
| complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporantly restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 16 Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 17 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 18 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional 18 List the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and progra | 8 | · · · · · · · · · · · · · · · · · · · | | | _ |
| custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V. 12 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 13 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 16 Did the organization report an amount for other assets in Part X, line 15 Part VIII 17 Did the organization report an amount for other liabilities in Part X, line 15 Part VIII State of the tax year include a lootnote that addresses the organization's lability for uncertain tax positions under FIN 48 (BCS 740)? If "Yes," complete Schedule D, Part X and X is the organization batain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and X is optional is the organization asshool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E and the organization asshool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E and IV Yes," complete Schedule E and IV Yes, Italian IV Yes, | | - | _8_ | | <u>X</u> |
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| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X Ida Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 18 X | | | 12a | X | |
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| Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | | , , , | } | J | V |
| for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | | | 14b | | _ <u>X</u> _ |
| Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 15 | | 45 | l | v |
| assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 16 | | 15 | | |
| 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) | 10 | taran da antara da a | 16 | ĺ | X |
| on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | -10 | | |
| Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | | · · · · · · · · · · · · · · · · · · · | 17 | ŀ | Х |
| Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | · · · · · · · · · · · · · · · · · · · | | | |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | - | i i i i i i i i i i i i i i i i i i i | 18 | j | Х |
| | 19 | · · · · · · · · · · · · · · · · · · · | | $\neg \uparrow$ | |
| | | · · · · · · · · · · · · · · · · | 19 | | Χ |

Page 4

| Par | t IV Checklist of Required Schedules (continued) | | | |
|-----|--|--------------|-------|---------|
| | | | Yes | No |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | 1 | х |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . | 22 | | х |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | | | |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | |
| | employees? If "Yes," complete Schedule J | 23 | | Х |
| 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 | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| _ | to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| h | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a | | | |
| - | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or | | | |
| | 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | Х |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any | | | |
| | current or former officers, directors, trustees, key employees, highest compensated employees, or | | | |
| | disqualified persons? If "Yes," complete Schedule L, Part II | 26 | | Х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | |
| ~- | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | J | |
| | entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | Х |
| 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) | * 52.2, 1. | 2 9 × | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | 200 | | |
| | Schedule L, Part IV | 28b | | Х |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | | | _::_ |
| · | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | Х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | <u> </u> | | |
| - | conservation contributions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N</i> , | <u> </u> | | |
| 01 | Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? | ا | | |
| - | If "Yes," complete Schedule N, Part II. | 32 | ľ | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | <u> </u> | | |
| 00 | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | ł | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, | <u> </u> | | |
| 04 | Ill, or IV, and Part V, line 1 | 34 | | X |
| 352 | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled | | | |
| b | 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 | | | |
| -00 | organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | ļ | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | ••• | | _^_ |
| 0, | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part | | | |
| • | VI | 37 | ĺ | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and | - | | |
| JO | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | x | |
| | 13. Note: All 1 offit 330 liters are required to complete Schedule O | _ | 990 | (20.40) |

| | Check if Schedule O contains a response or note to any line in this Part V | | | | |
|------------|--|--------------|-------------|---------------------------------------|-------------|
| | | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . | 1a | 0 | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | 1b | 0 | | l |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and | reportable | | <u> </u> | |
| | gaming (gambling) winnings to prize winners? | | 1c | | X |
| 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 | 2a | 0 | | <u> </u> |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax re | turns? . | 2b | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction | ons) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | 3a | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu | ıle O , | 3b | L | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other | er authority | | 1 | ľ |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other | financial | ļ | , |] |
| | account)? | | 4a | | X |
| b | If "Yes," enter the name of the foreign country | | ,. | 1 . | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia | al Accounts | ъ, | 4 43 | |
| | (FBAR) | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? |) | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans | saction? . | 5b | | X |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | 5c | | <u> </u> |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did | I the | ļ | | l |
| | organization solicit any contributions that were not tax deductible as charitable contributions? . | | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contribu | itions or | | | |
| | gifts were not tax deductible? | | 6b_ | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | Landy . | c 4. | js. |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for | or goods | | | |
| | and services provided to the payor? | | 7a | | Х |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided?. | | 7b | L | <u> </u> |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it | was | |] | 1 |
| | required to file Form 8282? | | 7c | ļ | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | , | ļ |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit | | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co | | 7f | ! | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8 | | 7 <u>g</u> | . | X |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization for | | 7h | ļ | X |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain | ned by the | ļ | ļ | ļ |
| _ | sponsoring organization have excess business holdings at any time during the year? | • | 8 | | X |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | ├ | <u> </u> |
| a | Did the sponsoring organization make any taxable distributions under section 4966? . | • • | . <u>9a</u> | | X |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | . 9b | , , | X |
| 10 | Section 501(c)(7) organizations. Enter | اما | 1 0 | 1.25 | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | - |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . | 10b | | Çeşi. | |
| 11 | Section 501(c)(12) organizations. Enter | laast | | to and | 15/2 |
| a | Gross income from members or shareholders | 11a | | | ATA Mar |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | 146 | | | , , |
| 40- | against amounts due or received from them) | 11b | 430 | 1 4 | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo | | 12a | 3 41 11 | 3; |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | i je je je | the |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | Lug M | 3.5,53 | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | | 13a | \$5.55 | ļ |
| L | Note. See the instructions for additional information the organization must report on Schedule O | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | , 5,p |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | 1426 | 100% | | ., |
| _ | the organization is licensed to issue qualified health plans | 13b | - | 野松 | * * |
| C 1/1-2 | Enter the amount of reserves on hand | 1001 | 14a | 77 | X |
| 14a b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sched | ule O | 14a | | ├^ |
| | " 100, not it med a real report these payments. If two, provide an explanation in sched | | 170 | | |

| Form 9 | 90 (2016) Texas Southmost College Foundation, Inc. 74-233 | | P | age O |
|-------------|--|-----------------|---------------------|--|
| <u>Pa</u> r | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se | a "No ee ins | " tructi | ons. |
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
| Sect | ion A. Governing Body and Management | | | |
| | , | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year . 11 | | | |
| | If there are material differences in voting rights among members of the governing body, or | İ | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | |
| | committee, explain in Schedule O | | İ | |
| b | Enter the number of voting members included in line 1a, above, who are independent . [1b] 0 | } | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | - - | | ^- |
| • | supervision of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | Х |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | |
| | one or more members of the governing body? | 7a | | _X_ |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | |
| | stockholders, or persons other than the governing body? | 7b | ļ | X, |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | , | |
| _ | the year by the following | 8a | X | |
| a b | The governing body? | 8b | $\frac{\hat{x}}{x}$ | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached | 55 | <u> </u> | |
| · | at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | х |
| Sect | ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C | ode |) | |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | ĺ | 1 |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | ├ |
| 11a | | 11a | X | } |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | 12a | | X |
| 12a b | Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | | ^- |
| C | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | 125 | | \vdash |
| · | describe in Schedule O how this was done | 12c | j | j |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | ļ | X |
| b | Other officers or key employees of the organization | 15b | | X |
| 4.5 | 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 | 400 | <u> </u> | 1—— |
| L | with a taxable entity during the year? | 16a | | -×-, |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard | | | 1 1 |
| | the organization's exempt status with respect to such arrangements? | 16b | | <u> </u> |
| Sect | ion C. Disclosure | 100 | L | <u> </u> |
| 17 | List the states with which a copy of this Form 990 is required to be filed | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3) | s only | /) | |
| | available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | Own website Another's website X Upon request Other (explain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest poli | cy, ar | ıd | |
| 00 | financial statements available to the public during the tax year | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records | • | | |
| | Carlos Pecero (956) 295-3416 80 Fort Brown, Brownsville, TX 78520 | | | |

| • | | | | | | | | | | | |
|----------------------------------|---|-------------------------------|--------------------------------|----------------|----------------|--|---------------------------------|--|--|----------------------------|-----------------------------|
| Form 990 (2016) | Texas Southmost College Foundar | tion, Inc | | | | | | | | 74-23385 | 65 Page 7 |
| Part VII | Compensation of Officers, Dire | ctors, Truste | es, K | (ey | En | nplo | oyee | s, ł | lighest Comp | ensated | |
| • | Employees, and Independent C Check if Schedule O contains a r | | te to | an | v lir | ne li | n this | Pa | art VII | | |
| Section A. | Officers, Directors, Trustees, Key E | | | | | | | | | | <u> </u> |
| | his table for all persons required to be | | | | | | | | | with or within the | |
| organization's | • | iisted ikepoit co | mper | ısaı | 011 | ioi t | iie ca | iei i | dai year ending v | with or within the | |
| _ | of the organization's current officers, di | roctore truetoos | · /who | atho | r inc | divac | . عاديا | or o | raanizatione) re | nardless of amo | unt |
| | on Enter -0- in columns (D), (E), and (| | | | | | iuais | 01 0 | irganizations), re | gardiess of arrio | unt |
| • | of the organization's current key emplo | | | | - | | defin | itior | of "key employe | ee " | |
| List the | organization's five current highest con | npensated emplo | oyees | ot (ot | her | thai | n an c | offic | er, director, trust | ee, or key emplo | yee) |
| | reportable compensation (Box 5 of For | m W-2 and/or Bo | ox 7 c | of Fo | orm | 109 | 9-MIS | SC) | of more than \$1 | 00,000 from the | |
| | nd any related organizations | | | | | | | | | | |
| | of the organization's former officers, ke eportable compensation from the organ | | | | | | | ed e | employees who r | eceived more th | an |
| • List all o | of the organization's former directors | or trustees that | recen | ved, | ın t | he d | capac | aty a | as a former direc | tor or trustee of | the |
| organization, r | nore than \$10,000 of reportable compe | ensation from the | e orga | nız | atıoı | n an | id any | rel | ated organizatio | ns | |
| • | the following order individual trustees employees, and former such persons | or directors, ins | titutio | nal | trus | stee | s, offi | cers | s, key employees | s, highest | |
| | s box if neither the organization nor any | v related organiz | ation | cor | npei | nsa | ted ar | nv c | urrent officer, dir | ector, or trustee | |
| = | | 1 | Ī | | | C) | | <u></u> - | | <u> </u> | |
| | |) |) | | | iition | | | j | | 1 |
| | (A) Name and Title | (B) Average | | | | | than o | | (D) Reportable | (E) Reportable | (F) Estimated |
| | Name and Title | hours per | | | | | or/trust | ee) | compensation | compensation | amount of |
| | | week (list any hours for | 의 | 쿭 | Officer | <u>6</u> | en Hg | Former | from the | from related organizations | other compensation |
| | | related | Individual tor director | Ē | 8 | em | Highest co | [₫ | organization | (W-2/1099-MISC) | from the |
| | | organizations below dotted | 학학 | Institutional | | Key employee | 88 | ĺ | (W-2/1099-MISC) | | organization and related |
| | | line) | Individual trustee or director | trustee | | 8 | pen | ļ | , | | organizations |
| | | | | 8 | | l | Highest compensated employee | ŀ | } | | |
| (1) Adela G | | 0 00 | | ├ | ├ | | | ┝ | | | |
| (1) Adela G Member | laiza | 0 00 | | 1 | | 1 | ĺ | Ì | İ | · | , |
| (2) Trey Me | endez | 0 00 | _ | | _ | | | | | | |
| Member | | 0 00 | l | | } | | | Į | | | |
| (3) Eduardo | Campirano | 0 00 | | | | | | | | | |
| Member | | 0 00 | l | l | ł | 1 | { | l | { | | |
| (4) Clayton | Brashear | 0 00 | | | Π | | | | | | |
| Member | | 0.00 | X | Ĺ., | | Ĺ. | İ., | | · | | |
| (5) Cesar N | lunoz | 0 00 | - | Ţ - | - I | , | | | | | |
| Member | | 0 00 | X | | | | L | | | | |
| (6) Mike Sh | annon | 0 00 | } | ļ | | l |) | } |) | | |
| Member | | 0 00 | X | L. | | _ | L | <u> </u> | | | |
| (7) Nikhil S | hah | 0 00 | | 1 | | 1 | { | ì | } | | |
| Member | | 0 00 | | _ | <u> </u> | _ | | <u> </u> | | | |
| (8) Tara Ric | os, D D S | 0 00 | | 1 | ' | 1 | (| Ì | | | |
| Chair | | 0 00 | _ | | X | _ | <u> </u> | <u> </u> | | | |
| (9) Gus Ste | rn, M D | 0 00 | , | 1 | | | } | l | Į | | I |
| Vice Chair | | 0 00 | _ | - | Х | - | | <u> </u> | | | L |
| (10) Art Garz | za | 0 00 | ſ | l | | l | } | 1 | { | | |
| Secretary (11) Manny (| Casanova | 0 00 | _ | - | X | \vdash | <u> </u> | ├ | | | |
| (11) Manny (Treasurer | Jasanova | 0 00 | | (| х | (| [| 1 | (| | |
| (12) | | 0.00 | | | ^ | - | | - | | | |
| | | | | | | | | | | | |

more than \$100,000 of compensation from the organization

| | Section A. Officers, Directors, 171 | istees, Key Em | ριογε | es, | and | וח ני | gnes | I C | ompensated En | ipioyees (contil | iuea) | | |
|---------|---|--|-----------------------------------|-----------------------|-------------------------------|--------------|---|--------------|--|--|-----------------|---|-----------|
| | (A) Name and title | (B) Average hours per | box, | unles er an | Pos neck ss pe d a d | rson | than on the than of the than the than the than the the than the the the the the the the the the the | n an lee) | (D) Reportable compensation | (E) Reportable compensation | _ | (F) stimate | _ |
| | | week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | fi org an | other opensate opensate opensate anizate d relate anizate | on ed |
| (15) | | | | | | | | | | | | | |
| (16) | | | | | | | | | | | | | |
| (17) | | | | - | | - | | | | | | | |
| (18) | | | | - | | - | - | - | | | | | |
| | | | | - | | | | - | | | | | |
| | | <u> </u> | - | | - | | - | - | | | | | |
| | | | - | - | | - | | - | | | | | |
| | | | | | | - | _ | - | | | | | |
| | | | | | | | | - | | | } | | |
| | | | - | - | | - | | - | | | | | |
| (25) | | | - | | - | - | } | - | | | - | | |
| | Sub-total | | <u> </u> | | _ | L_ | <u> </u> | | 0 | 0 | | | |
| 1b c | Total from continuation sheets to Part VII, S | ection A . | • | • | | • | | • | 0 | 0 | | | 0 |
| _q_ | Total (add lines 1b and 1c) Total number of individuals (including but not lii | | | <u></u> | \ . | | | <u> </u> | 0 | 000 of | L | | 0 |
| 2 | reportable compensation from the organization | | | | 0 | v110 | recei | | | | | | |
| 3 | Did the organization list any former officer, dire | | - | | loye | e, c | or higi | hes | t compensated | | | Yes | No |
| 4 | employee on line 1a? If "Yes," complete Sched For any individual listed on line 1a, is the sum of | | | | n a | nd d | other | con | npensation from | | 3 | | _X_ |
| | the organization and related organizations great individual. | iter than \$150,00 | 00? I I | ''Υ <i>ϵ</i> | es, " | con | nplete | . Sc | hedule J for suc | h | 4 | | X |
| 5 | Did any person listed on line 1a receive or accr for services rendered to the organization? If "Yo | | | | | | | | | vidual | 5 | | X |
| Sac | tion B. Independent Contractors | es, complete sc | neau | ile J | 101 | Suc | n per | 201 | <u>'</u> | | _ 5] | 1 | |
| 1 | Complete this table for your five highest compecompensation from the organization. Report co | | | | | | | | | | tax | | |
| | (A) Name and business add | ress | | | | | | | (B) Description of sen | vices | (C Compen | | |
| | | | | | | | | | | | | | 0 |
| | | | | | | | | 匚 | | | | | 0 |
| | · | | | | | | | <u> </u> | | | | | 0 |
| | | | | | | | | - | | | | | 0 |
| | Total number of independent contractors (inclu- | ding but not limit | od to | the | | icto | d abo | | who recound | | | h | <u></u> c |

| Par | : VIII | Statement of Revenue Check if Schedule O contains | a response or | note to any line ii | n this Part VIII | | | |
|--|--------|--|-----------------|---------------------|---|--|--|--|
| | | Crical II Gariegale & Gariegale | a response of | note to uny mio n | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| 6 6 | 1a | Federated campaigns . | . 1a | 0 | | | | |
| in a | b | Membership dues | . 1t | 0 | <u> </u> | 1 | , , , | |
| وَ فِي | С | Fundraising events | 10 | 0 | <u>}</u> | ł | , | |
| a F | ď | Related organizations. | . 10 | 1 0 | <u>}</u> | | 1 . 1 | ł |
| 3, E | е | Government grants (contributions | s) . 1 6 | 0 | | , , , , , | | |
| ar S | f | All other contributions, gifts, gran | ts, and | | -' | 1 | | , |
| 효환 | | similar amounts not included abo | ve <u>1</u> 1 | f <u>0</u> | . ' | | la Leonologico | 10 1 |
| Contributions, Gifts, Grants and Other Similar Amounts | g | Noncash contributions included in li | nes 1a-1f. \$ | 0 | | 1 | | ., , , , |
| | h | Total. Add lines 1a-1f | <u> </u> | | 0 | * A 2 * 5 5 | | × 1 & 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + |
| enu | | | | Business Code | 0 | · | | |
| Program Service Revenue | 2a | | | | 0 | | | |
| e e | b | | | | 1 | | - | |
| 뒫 | C | | | | 1 | | | |
| s l | d | | | | 1 0 | | | |
| Тап | e | All other program service revenu | | | † | | | |
| Ď. | q | Total. Add lines 2a–2f | e | | 1 0 | | 3 1 16 | |
| - | 3 | Investment income (including div | idends interest | | | | | |
| | | other similar amounts). | | ., unu | 158,001 | 158,001 | Ì | } |
| | 4 | Income from investment of tax-ex | kempt bond pro | ceeds | 0 | | | |
| | 5 | Royalties | | | 0 | | | |
| | | • | (ı) Real | (II) Personal | | | The same of the sa | talent to a set |
| | 6a | Gross rents . | | | | | | |
| | b | Less rental expenses . | | | | | | The Market State of the State o |
| | С | Rental income or (loss) . | | 0 0 | J *** | hat had | the state of the state of | 100 |
| | d | Net rental income or (loss) | | <u> </u> | 0 | <u> </u> | | |
| | 7a | Gross amount from sales of | (i) Securities | (II) Other | | | | |
| | | assets other than inventory . | | 0 1,538,573 | الإربياء واليهومانية الساد ال | و الله الله الله الله الله الله الله الل | 一张 经 | |
| | b | Less cost or other basis |] | ŀ | 1 | | | |
| | | and sales expenses . | | 0 1,147,668 | T ** T #85 * | of the Asset State | | 4 |
| | C | Gain or (loss) . | <u> </u> | 0 390,905 | | 000 005 | | |
| | d | Net gain or (loss) . | • | | 390,905 | 390,905 | # 131 50 FO ME # | F., |
| • | | O | | 1 | | The second secon | With the religion | la i |
| Ę. | 8a | Gross income from fundraising | 0 | Ì | The Control of | | | |
| Other Revenu | | events (not including \$ | 0 | 1 | With the second | | | 17. |
| 8 | | of contributions reported on line See Part IV, line 18 | • | 1 | | | | |
| her | ь | Less direct expenses . | . a b | | | | | , * |
| ᅗ | c | Net income or (loss) from fundra | | | 1 | | <u> </u> | |
| | | Gross income from gaming activ | - | | राष्ट्रहर र द्या | The state of the s | I si'r y ye. | N 1 3p |
| | "" | See Part IV, line 19 | а |) . | The state of the state of the | The first the first on the | | |
| | ь | Less direct expenses | . b | | | | | in the second |
| | c | Net income or (loss) from gaming | | > | 0 | | 1 | |
| | | Gross sales of inventory, less | , | | 大学 · 中の | 18 4 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | |
| | 1 | returns and allowances | а | | | | La Harris | |
| | b | Less cost of goods sold. | b | | 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | · · · · · · · · · · · · · · · · · · · | | (1) |
| i | _ c | Net income or (loss) from sales of | of inventory . | > | 0 | | l | |
| | | Miscellaneous Revenue | | Business Code | 25 25 d | A | 51 , , , | 4 1 |
| 1 | 11a | Other Income | | | 65,000 | | | L |
| 1 | b | Unrealized Gain on Investment | | | 321,523 | 321,523 | | |
| 1 | С | | | | 0 | | | |
| I | d | All other revenue | • | L | 0 | <u> </u> | | 190 |
| | е | Total. Add lines 11a-11d | • | | 386,523 | | | |
| | 12 | Total revenue. See instructions. | | > _ | 935,429 | 935,429 | 0 | <u> </u> |

Form 990 (2016) Texas Southmost College Foundation, Inc. 74-2338565 Page 10 Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (D) (A) (C) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations domestic governments See Part IV, line 21 2 Grants and other assistance to domestic individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . Other salaries and wages 0 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 9 Other employee benefits 0 10 Payroll taxes 0 11 Fees for services (non-employees) а Management . . b Legal 0 c Accounting. 40,122 40,122 ď Lobbying 0 Professional fundraising services. See Part IV, line 17 0 е Investment management fees f 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 0 13 Office expenses. 0 Information technology. 14 0 Royalties 15 0 Occupancy 16 0 17 Travel. 0 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings. 0 20 Interest . 0 . . 21 Payments to affiliates . 0 22 Depreciation, depletion, and amortization 23 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) Bank Fees 4,400 4,400 b 109,000 109,000 d 0 e All other expenses 0 Total functional expenses. Add lines 1 through 24e 153,522 153,522 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here

following SOP 98-2 (ASC 958-720)

| - | 41 t / | - Halance Sheet | | | | - |
|------------------|----------|---|--|---|----------|---------------------------------------|
| | | Check if Schedule O contains a response o | r note to any line in this Part X | • | | |
| | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest-bearing | | 280,358 | 1 | 381,699 |
| | 2 | Savings and temporary cash investments . | · · · · | 200,000 | 2 | 001,000 |
| | 3 | Pledges and grants receivable, net | | 2 | 3 | 0 |
| | 4 | Accounts receivable, net | · · · | 63 | 4 | 203 |
| | 5 | Loans and other receivables from current and f | ormer officers directors | | | 200 |
| | | trustees, key employees, and highest compens | the state of the s | | | |
| | | Complete Part II of Schedule L . | | ************************************** | 5 | |
| | 6 | Loans and other receivables from other disqualified pers | ons (as defined under section | · · · · · · · · · · · · · · · · · · · | | |
| | | 4958(f)(1)), persons described in section 4958(c)(3)(B), | · · | | , (| |
| | | sponsoring organizations of section 501(c)(9) voluntary | | , | | |
| য | | organizations (see instructions) Complete Part II of Sch- | | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 0 | 7 | 0 |
| Ä | 8 | Inventories for sale or use | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | . Г | | 9 | |
| | 10a | Land, buildings, and equipment cost or | 1 1 | | | |
| | ŀ | other basis Complete Part VI of Schedule D | 10a0 | | | · · · · · · · · · · · · · · · · · · · |
| | b | Less accumulated depreciation . | 10b 0 | 0 | 10c | 0 |
| | 11 | Investments—publicly traded securities . | | 8,143,498 | 11 | 8,867,926 |
| | 12 | Investments—other securities See Part IV, line | :11 [| 0 | 12 | 0 |
| | 13 | Investments-program-related See Part IV, lin | e 11 | 0 | 13 | 0 |
| | 14 | Intangible assets . | [| 0 | 14 | 0 |
| | 15 | Other assets See Part IV, line 11 | . [| 0 | 15 | 0 |
| | 16 | Total assets. Add lines 1 through 15 (must equ | ıal lıne 34) | 8,423,921 | 16 | 9,249,828 |
| | 17 | Accounts payable and accrued expenses . | <u> </u> | 65,000 | 17 | 109,000 |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | | 19 | |
| | 20 | Tax-exempt bond liabilities . | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete | Part IV of Schedule D | | 21 | <u>.</u> |
| les | 22 | Loans and other payables to current and forme | | * | | |
| Liabilities | l | trustees, key employees, highest compensated | · · · | | | |
| lab | | disqualified persons Complete Part II of Sched | _ | | 22 | |
| -1 | 23 | Secured mortgages and notes payable to unrel | | 0 | 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelate | · | 0 | 24 | 0 |
| | 25 | Other liabilities (including federal income tax, pa | • | | | |
| | | parties, and other liabilities not included on line. | s 17-24) Complete | | ٠ | 0 |
| | 26 | Part X of Schedule D | · · · · - | 0 | 25 | 100,000 |
| _ | 20 | Total liabilities. Add lines 17 through 25 | | 65,000 | 26 | 109,000 |
| g | | Organizations that follow SFAS 117 (ASC 95 complete lines 27 through 29, and lines 33 a. | | | 1. | |
| ž | 27 | | (| 0.050.004 | | 0.440.000 |
| ala | 27 28 | Unrestricted net assets . | · · - | 8,358,921 | 27 28 | 9,140,828 |
| 18 | 29 | Temporarily restricted net assets | · · - | | 29 | |
| nuc | 25 | | · · · · · | 1 | 29 | |
| or Fund Balances | | Organizations that do not follow SFAS 117 (ASC958), complete lines 30 through 34. | check here and | | 4 | |
| S | 20 | | | | | · · · · · · · · · · · · · · · · · · · |
| Net Assets | 30 31 | Capital stock or trust principal, or current funds | P | | 30 | |
| As | 32 | Paid-in or capital surplus, or land, building, or e Retained earnings, endowment, accumulated in | · · | | 31 32 | |
| let | 33 | Total net assets or fund balances | come, or other funds . | 9 250 024 | 33 | 0.440.000 |
| ~ | 33 34 | Total liabilities and net assets/fund balances | | 8,358,921 8 423 921 | | 9,140,828 |

| Par | 990 (2016) Texas Southmost College Foundation, Inc t XI Reconciliation of Net Assets | | <u>4-23385</u> | | Page 12 |
|---------|---|-----|----------------|----------|---------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 9 | 35,429 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 1 | 53,522 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 7 | 81,907 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). | 4 | | 8,3 | 58,921 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | |
| 0 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) XII Financial Statements and Reporting | 10 | | 9,1 | 40,828 |
| | | | | | s No |
| - | Accounting method used to prepare the Form 990 | | 2 | a Ye | X |
| 2a | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis | | 1 | a | X |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both | | 2 | a | X |
| 2a | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | 1 | a | X |
| 2a b | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis | · · | 1 | a X | X |
| 2a b | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | f | . 2 | a X | X |
| 2a b | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in | · | . 2 | a X | X |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | · | 2 | a X | X |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

| | O | | | | | | |
|------------|--|---|---|-----------------------------|--|---|---|
| Part | Southmost College Foundation, In Reason for Public Char | | ganizations must co | molete t | hie nart) | | 38565 |
| | ganization is not a private foundate | | | | | | |
| 1 | A church, convention of church | • | | | | • | |
| 2 | A school described in section | • | | | | | 1 |
| 3 | A hospital or a cooperative hos | | | | | i). • | |
| 4 | A medical research organization hospital's name, city, and state | n operated in conju | | | | | nter the |
| 5 | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) | | | | | | |
| 6 F | A federal, state, or local govern | • | ntal unit described in s e | ection 17 |)(b)(1)(A)(| 'v). | |
| 7 | An organization that normally r | | | | | | eral nublic |
| , r | described in section 170(b)(1) | | | m a gove | · · · · · · · · · · · · · · · · · · · | and or nom the gone | nai publio |
| 8 | A community trust described in | section 170(b)(1)(| A)(vi). (Complete Part | II) | | | |
| 9 | An agricultural research organi or university or a non-land-gran university | | | | | | |
| 10 | An organization that normally r receipts from activities related support from gross investment acquired by the organization at | to its exempt function income and unrelated | ons—subject to certain led business taxable in | exception come (les | s, and (2) s section | no more than 33 1/3 511 tax) from busine | 3% of its |
| 11 | An organization organized and | operated exclusive | ly to test for public safe | ety. See s e | ection 509 | 9(a)(4). | |
| 12 | An organization organized and of one or more publicly support Check the box in lines 12a thro | ed organizations de | escribed in section 509 | 9(a)(1) or | section 5 | 09(a)(2). See section | n 509(a)(3). |
| а | Type I. A supporting organization organization. You must cor | cation operated, sup s) the power to regu | pervised, or controlled l | by its supp | orted org | anization(s), typically | y by giving |
| b | X Type II. A supporting organic control or management of the organization(s). You must o | zation supervised on supporting organ complete Part IV, S | r controlled in connecti ization vested in the sa ections A and C. | ame perso | ns that co | ntrol or manage the | supported |
| С | its supported organization(s | | | | | | grated with, |
| d | Type III non-functionally integrated in that is not functionally integrated requirement (see instruction | itegrated. A supportated The organizat | ting organization operation generally must sati | ated in coi isfy a disti | nnection w | rith its supported org | |
| е | Check this box if the organiz | | | | | | e III |
| | functionally integrated, or Ty | | ally integrated supporting | ng organiz | ation | | |
| f | Enter the number of supported | - | | • | • | | 1 |
| <u>g</u> (| Provide the following information Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | listed in you | organization or governing ment? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | | Yes | No | | |
| (A) | | | | | | | |
| | Southmost College | 74-6002593 | 2 | L | X | 0 | 0 |
| (B) | | | | | | | |
| (C) | 1 | | | | | | |
| (D) | ! | | | | | | |
| (E) | | | | | | | |
| Total | | | , b , a | , | | | |

| | rt II Support Schedule for Org | uthmost College F anizations Des | | tions 170(b)(1) | (A)(iv) and 17 | 74-233856 0(b)(1)(A)(vi) | 5 Page 2 |
|-----|--|---|--|---|---|-----------------------------|---------------|
| | (Complete only if you check | | | | | | der |
| | Part III If the organization fa | | | | | | / |
| Sec | tion A. Public Support | | | | | / | |
| _ | ndar year (or fiscal year beginning in) | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 / | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | - |
| | membership fees received (Do not | | | | | | |
| | ınclude any "unusual grants ") | | | <u> </u> | | | 0 |
| 2 | Tax revenues levied for the organization's | | | | | | |
| | benefit and either paid to or expended on | | | | | | |
| | its behalf | | | | | | 0 |
| 3 | The value of services or facilities | | | , | / | ' | |
| | furnished by a governmental unit to the | 1 | | | | | |
| | organization without charge | | | | | | 0 |
| 4 | Total. Add lines 1 through 3 | 0 | 0 | 0 | / 0 | 0 | 0 |
| 5 | The portion of total contributions by each | r | 1 w | 3, | | | |
| | person (other than a governmental unit | , , , , , , , , , <u>, , , , , , , , , , </u> | 45. | 1 21 1 | | 114, | |
| | or publicly supported organization) | ()) () | | المرازات والمرازات | 1 100 | * | |
| | included on line 1 that exceeds 2% | 84 54 14 J. | a sai | | 18. 3 | | |
| | of the amount shown on line 11, | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | / . / _ / | | |
| | column (f) | 181 | E 75 18 | | ,,,, | All A Chi | |
| Sac | Public support. Subtract line 5 from line 4 | | | · · · / | | 8 K K | |
| | ndar year (or fiscal year beginning in) | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| | | | (b) 2013 | (6) 2014 | | 0 | 0 |
| 7 | Amounts from line 4 | 0 | | / 0 | U | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, | } | | / | | | |
| | rents, royalties and income from similar | | | | | | |
| | sources | | | / | | | 0 |
| 9 | Net income from unrelated business | | | / | | | |
| | activities, whether or not the business is | | | / | | | |
| | regularly carried on | | | / | | | 0 |
| 10 | Other income Do not include gain or | | | , | | | |
| | loss from the sale of capital assets | | / | | | | |
| | (Explain in Part VI) | | / | | | | 0 |
| 11 | Total support. Add lines 7 through 10 | , | / | | ı | | 0 |
| 12 | Gross receipts from related activities, etc. (s | ee instructions) | 7 | | | 12 | |
| 13 | First five years. If the Form 990 is for the o | organization's first, s | econd, third, fourth | n, or fifth tax year a | is a section 501(c) | (3) | - |
| | organization, check this box and stop here | | / | <u> </u> | | | ▶ |
| Sec | ction C. Computation of Public Su | pport Percenta | age / | | | | |
| 14 | Public support percentage for 2016 (line 6, o | column (f) divided b | y line 1/1, column (| f)) . | | 14 | 0 00% |
| 15 | Public support percentage from 2015 Sched | lule A, Part II, line 1 | 4 / | | | 15 | 0 00% |
| 16a | 33 1/3% support test—2016. If the organiz | | , | , and line 14 is 33 | 1/3% or more, | | |
| | and stop here. The organization qualifies a | s a publicly support | ed organization | | | • | . ▶∐ |
| b | 33 1/3% support test-2015. If the organiz | ation did not check | a box on line 13 o | r 16a, and line 15 i | s 33 1/3% or more | , check this | _ |
| | box and stop here. The organization qualifi | es as a publicly sup | ported organizatio | n | • | | ▶ [] |
| 17a | 10%-facts-and-circumstances test—2010 | 6. If the organization | n did not check a b | ox on line 13, 16a, | or 16b, and line 1 | 4 | |
| | is 10% or more, and if the organization mee | | | | | | |
| | Part VI how the organization meets the "fact | is-and-circumstan <i>ce</i> | es" test The organ | ization qualifies as | a publicly support | ea | ⊾ □ |
| L | organization . | . / | المناج حطمته من امرام م | | 16h a- 17a | | · 🟲 🗀 |
| a | 10%-facts-and-circumstances test—2015 15 is 10% or more, and if the organization m | o. If the organization | n ala not check a b -circumstances" te | iox on line 13, 16a, est, check this box | , 100, 01 1/8, and I and stop bere F | rile rolain in | |
| | Part VI how the organization meets the "fact | | | | | pull III | |
| | supported organization . | J | | | | | ▶□ |
| 18 | Private foundation. If the organization did | not check a box on | line 13. 16a 16h | 17a, or 17b, check | this box and see | | |
| - | instructions . | | | | | • | . ▶□ |

Schedule A (Form 990 or 990-EZ) 2016

| he | dule A (Form 990 or 990-EZ) 2016 Texas Sou | hmost College | Foundation, Inc | | | 74-2338565 | Page 3 |
|----------|--|---------------------|-----------------------|------------------------|----------------------|--------------------|-----------|
| _ | rt III Support Schedule for Orga | | | ion 509(a)(2) | | 74-2330303 | Page 3 |
| | (Complete only if you checke | | | | zation failed to | nualify under Pari | · II/ |
| | If the organization fails to qua | | | | | quality under t an | 7 |
| - | ction A. Public Support | any under the | tests listed belt | ow, picase con | ipiete i dit ii.) | | |
| | ndar year (or fiscal year beginning in) | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 / | (f) Total |
| u.u 1 | Gifts, grants, contributions, and membership fees | (4) 2012 | (3) 2010 | (0) 2011 | (6) 2010 | (6) 20.0 | (1) 10121 |
| • | received (Do not include any "unusual grants ") | | | | | | 0 |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| | sold or services performed, or facilities | | | | | | |
| | furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | 0 |
| 2 | Gross receipts from activities that are not an | | | | | / | |
| | unrelated trade or business under section 513 . | | | | | / | 0 |
| 1 | Tax revenues levied for the organization's | | | | / | | |
| • | benefit and either paid to or expended on | | | | / | | |
| | its behalf | | | | / | | 0 |
| 5 | The value of services or facilities | | | | / | | |
| | furnished by a governmental unit to the | | | | / | | |
| | organization without charge | | | | | | 0 |
| 3 | Total. Add lines 1 through 5. | 0 | 0 | 0 | / 0 | 0 | 0 |
| 7a | Amounts included on lines 1, 2, and 3 | | | | / | | |
| | received from disqualified persons | | | | / | | 0 |
| b | Amounts included on lines 2 and 3 received | | | / | | | |
| | from other than disqualified persons that | | | | | | |
| | exceed the greater of \$5,000 or 1% of the | | | | | | |
| | amount on line 13 for the year | | | 1 | | | 0 |
| С | Add lines 7a and 7b . | 0 | 0. | / 0 | 0 | 0 | 0 |
| 3 | Public support (Subtract line 7c from | * | 9. | . / | • | ŧ | |
| | line 6) | i , | 4 | | x F | , , | 0 |
| ec | tion B. Total Support | | | | | | |
| ale | ndar year (or fiscal year beginning in) | (a) 2012 | (b) 2013 | / (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 9 | Amounts from line 6 . | 0 | 0 | 0 | 0 | 0 | 0 |
|)a | Gross income from interest, dividends, | | i / | | | | |
| | payments received on securities loans, | | [| | | | |
| | rents, royalties and income from similar sources | | / | | | | 0 |
| þ | Unrelated business taxable income (less | | / | | | | |
| | section 511 taxes) from businesses | | <i>i</i> | | | | |
| | acquired after June 30, 1975 . | | / | | | | 0 |
| С | Add lines 10a and 10b | 0 | / 0 | 0 | 0 | 0 | 0 |
| i | Net income from unrelated business | | / | | | | |
| | activities not included in line 10b, whether | | / | | | | |
| | or not the business is regularly carned on | | <u>'</u> | | | | 0 |
| 2 | Other income Do not include gain or | | / | | 1 | | |
| | loss from the sale of capital assets | | <i>[</i> | | | | |
| | (Explain in Part VI) . | | / | | | | 0 |
| 3 | Total support. (Add lines 9, 10c, 11, | | ŀ | | | | |
| | and 12) | Ō | 0] | 0 | 0 | 0 | 0 |
| ŀ | First five years. If the Form 990 is for the org | ganization's first, | second, third, fourth | ı, or fifth tax year a | s a section 501(c)(3 | 3) | . — |
| | organization, check this box and stop here | | • • | | • • | | ▶ 🔲 |
| ec | tion C. Computation of Public Sup | | | | | | |
| 5 | Public support percentage for 2016 (line 8, co | lumn (f) divjded t | by line 13, column (f |)) . | | 15 | 0 00% |
| <u> </u> | Public support percentage from 2015 Schedu | | | | | 16 | 0.00% |
| ec | tion D. Computation of Investmen | | • | | | | |
| 7 | Investment income percentage for 2016 (line | | | olumn (f)) . . | Ļ | 17 | 0 00% |
| 3 | Investment income percentage from 2015 Sci | _ | | | [| 18 | 0 00% |
| a | 33 1/3% support tests—2016. If the organiz | | | | | nd line 17 is | , — |
| L | not more than 33 1/3%, check this box and st | | | | | · · · · · | . ▶ 🗀 |
| Ø | 33 1/3% support tests—2015. If the organiz | | | | | | ▶ [|
| | line 18 is not more than 33 1/3%, check this b | ov bug arob usu | e. The organization | quannes as a publ | anhhorea orga | ווגמוטוו | · 🟲 📖 |

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 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 in section 509(a)(1) or (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
- 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
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in **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
- 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
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **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
- 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 organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

| _ | Yes | No |
|------------|--|--|
| | | |
| 1 | X | |
| - - | <u> </u> | |
| - | | |
| 2 | | X |
| 3a | | Х |
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| 3b | | |
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| 3c | 45. | |
| 4a | X | |
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| 4b | r | ,] |
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| | | , F.E. |
| 5a | | X |
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| 5b 5c | | |
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| 7 | | |
| 8 | | X |
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| 9a | · · · · · · · · · · · · · · · · · · · | X |
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| 9b | | X |
| 9с | | X |
| | , , | * |
| 10a | | |
| 104 | | |
| 10b | | |

| Section C - Distributable Amount | | | Current Year | | |
|---|----|---|--------------|--|--|
| 1 Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | 50. (1) (1) (A) (A) (A) (A) | | | |
| 2 Enter 85% of line 1 | 2 | E. S. M. Sept. May. | | | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | · Sair at v. | | | |
| 4 Enter greater of line 2 or line 3. | 4 | 2 4 4 3 3 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 | - | | |
| 5 Income tax imposed in prior year | 5 | A Company | | | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to | | e by a cut | | | |
| emergency temporary reduction (see instructions). | _6 | 79 - 7 9 37 | | | |
| 7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see | | | | | |

8

8 Minimum Asset Amount (add line 7 to line 6)

0

| Part | Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) | | | | | |
|-------|--|--|--|--|--|--|
| Secti | on D - Distributions | Current Year | | | | |
| 1 | Amounts paid to supported organizations to accomplish ex | | | | | |
| 2 | Amounts paid to perform activity that directly furthers exem | pt purposes of supported | 1 | | | |
| | organizations, in excess of income from activity | | | | | |
| 3 | Administrative expenses paid to accomplish exempt purpos | ses of supported organiz | ations | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | | | |
| 6 | Other distributions (describe in Part VI) See instructions | | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 0 | | |
| 8 | Distributions to attentive supported organizations to which t | he organization is respo | nsive | | | |
| | (provide details in Part VI) See instructions | | | | | |
| 9_ | Distributable amount for 2016 from Section C, line 6 | | | _ 0 | | |
| 10 | Line 8 amount divided by Line 9 amount | | | 0 000 | | |
| | | | (ii) | (iii) | | |
| S | ection E - Distribution Allocations (see instructions) | (i) Excess Distributions | Underdistributions | Distributable | | |
| | | L.XCess Distributions | Pre-2016 | Amount for 2016 | | |
| 1_ | Distributable amount for 2016 from Section C, line 6 | 1 3 4 1 1 | l í | 0 | | |
| | Underdistributions, if any, for years prior to 2016 | | | t v r | | |
| 2 | (reasonable cause required—explain in Part VI) See | | | 4 Ng 1 1 | | |
| | instructions | of the subtraction is | | A Cash . In It has | | |
| 3 | Excess distributions carryover, if any, to 2016 | A MESSESSESSESSESSESSESSESSESSESSESSESSESS | to sale "Mi | atting E. S. S. C. | | |
| a | The second of the second | 、四省了第1個高级門 | 数12.1 1.1 4.26gg | | | |
| b | | ALL THE ELLE FRED ST. | All The State of Ball of | Landa de la la la la la la la la la la la la la | | |
| С | From 2013 . | (1) (1) (1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1 | 计信息 计继续编制 | 第4章 医二二十二 | | |
| d | From 2014 . | The state of the s | 1、 经股份的 化对抗 化 不 1. 200 | John The Best one | | |
| е | From 2015 | 4. 智· 图 2.147 | 海中国国际的 抗 | A. MATERIAL TO | | |
| f | Total of lines 3a through e | 0 | | A. G. KARES | | |
| g | Applied to underdistributions of prior years | Extra 11 age W Military a will be | 0 | a office of the forest | | |
| h | Applied to 2016 distributable amount | 1.27、微数证据是 | Manufacture of the state | 0 | | |
| i | Carryover from 2011 not applied (see instructions) | 。现在25° 的数据4 | ない はいかい はいかん はんない ないかん はんしゅん | STATE OF COMMITTEE | | |
| j | Remainder Subtract lines 3g, 3h, and 3i from 3f | 0 | 产品的"智力"的 | | | |
| 4 | Distributions for 2016 from | 1 1 1 1 1 1 1 1 1 1 | | (图) (1966年) (1967年) | | |
| | Section D, line 7 \$ 0 | 1 | A sell a free to the | 2001 美数区区·1867 | | |
| а | Applied to underdistributions of prior years | - 1、12.7.7.6 植松空火龙。 | 0 | 第一次等的。例如 | | |
| b | Applied to 2016 distributable amount | では、2世紀20日本の | | 0 | | |
| С | Remainder Subtract lines 4a and 4b from 4 | 0 | of the second of | ALL THE STATE OF T | | |
| 5 | Remaining underdistributions for years prior to 2016, if | * 1. 爱好, 6厘次 | | | | |
| | any Subtract lines 3g and 4a from line 2 For result | | | 1 1 1 1 | | |
| | greater than zero, explain in Part VI See instructions | or or white the | 0 | - | | |
| 6 | Remaining underdistributions for 2016 Subtract lines 3h | | | | | |
| | and 4b from line 1 For result greater than zero, explain in | | | | | |
| _ | Part VI See instructions | 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 0 | | |
| 7 | Excess distributions carryover to 2017. Add lines 3j | | | , | | |
| | and 4c | 0 | | 1 e 7 4 e 8 | | |
| 8 | Breakdown of line 7 | a company destriction | THE STATE OF THE PARTY OF THE P | AL PP CONT. | | |
| а | i per see | が、インは、 は何、 と言語 | · 1. 正常的地位 | , 整地社会部件。 | | |
| b | Excess from 2013 . 0 | | 第2回路等は、中央の数 | The state of the s | | |
| С | Excess from 2014 . 0 | (1) 对 (1) 对 (1) 对 (2) 对 | ALTO L. COM | 。秦安治(6)(1)(6)(6)(1) | | |
| d | Excess from 2015 0 | 1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、1、 | A Charles and A Charles | The Car Marian | | |
| е | Excess from 2016. | 3 3 3 3 3 1 5 3 4 7 1 E | 37 2 2 2 2 4 4 | Same of resident the | | |

| Schedulé A (Form 990 or 990-EZ) 2016Texas Southmost College Foundation, Inc | 74-2338565 | P <u>ag</u> e 8 |
|---|---------------|------------------------|
| Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a | or 17b, Part | |
| III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV | | |
| B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, line | | |
| 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 | v, Section E, | |
| lines 2, 5, and 6. Also complete this part for any additional information (See instructions) | | |
| Part IV Section C Line 1 The Texas Southmost College Foundation, Inc. is meant to be | | |
| comprised of a 25 member Board of Directors Currently, the Foundation only has ten active | | |
| board members, The Texas Southmost College District is the only supported entity of the | | - |
| Texas Southmost College Foundation, Inc | | |
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SCHEDULE D (Form 990)

Department of the Treasury

Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2016

Open to Public Inspection

Employer identification number

Texas Southmost College Foundation, Inc. 74-2338565 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate value of contributions to (during year) . 2 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year а Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b C Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. 24 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

| Sched | lule D (Form 990) 2016 Texas Southmost Colleg | <u>e Foundation</u> | , Inc. | | | | 74-233 | 8565 | | Page 2 |
|--------|--|---------------------|--------------------|------------------|-----------------|------------------|-------------------|---|--------------|------------|
| Par | t III Organizations Maintaining Coll | ections of | Art, Hist | torical T | reasures, o | r Other | Similar Ass | ets (con | tinue | d) |
| 3 | Using the organization's acquisition, accessi | on, and other | records, | check any | of the follow | ing that ai | e a significant | use of it | s | _ |
| | collection items (check all that apply) | | | _ | | | | | | |
| а | Public exhibition | | d _ | Loan | or exchange | programs | | | | |
| b | Scholarly research | | e | Other | - | | | | | . - |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and | explain h | now they fo | urther the org | anızatıon' | s exempt purp | ose in Pa | irt | |
| 5 | During the year, did the organization solicit of assets to be sold to raise funds rather than to | | | | | | | | es 🔲 | No |
| Par | Complete if the organization answ 990, Part X, line 21. | | on Forn | n 990, Pa | art IV, line 9 | , or repo | rted an amo | unt on F | orm | |
| 1a | Is the organization an agent, trustee, custode | ian or other in | itermedia | ry for cont | ributions or o | ther asset | s not | | | |
| | included on Form 990, Part X? | | | | | | | Y∙ | :s [] | No |
| b | If "Yes," explain the arrangement in Part XIII | and complete | e the folio | wing table | • | | | A === === === === === === === === === = | | |
| _ | Pasianina balansa | | | | | 10 | | Amount | | |
| c C | Beginning balance | | | • | | 1c 1d | | | | |
| d | Additions during the year | | • | | | 1e | | | | |
| e f | Ending balance | | | | | 1f | | | | |
| _ ' | - | | | | | | | | | |
| 2a | Did the organization include an amount on F | | | | | | = | Ye | es 🔼 | No |
| b | If "Yes," explain the arrangement in Part XIII | Check here | if the exp | lanation h | as been provi | ded on Pa | art XIII | | | |
| Part | _ | | | | | | | | | |
| | Complete if the organization ansv | vered "Yes" | on Form | n 990, Pa | art IV, line 10 | 0 | | | | |
| | } | Current year | (b) Pri | ior year | (c) Two years | back (d |) Three years bac | k (e) Fo | ur years | back |
| 1a | Beginning of year balance | | | | | | | | | |
| b | Contributions . | | | | | | | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | Ì | | |
| | and programs | <u> </u> | | | | | | | | |
| f | Administrative expenses | | | | | | | | | |
| g | End of year balance | 0 | | 0 | | 0 | | 0 | | 0 |
| 2 | Provide the estimated percentage of the curr | | | (line 1g, co | olumn (a)) hel | d as | | | | |
| а | Board designated or quasi-endowment | • | <u>%</u> | | | | | | | |
| b | Permanent endowment | <u>%</u> | | | | | | | | |
| C | Temporarily restricted endowment | % | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100 |)%. | | | | | | | |
| 3a | Are there endowment funds not in the posse | ssion of the o | rganızatıd | on that are | held and adı | ministered | for the | r | | |
| | organization by | | | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | • | 3a(i) | | |
| | (ii) related organizations | | • | | | | | 3a(ii) | | |
| b | If "Yes" on line 3a(ii), are the related organization | | • | | | • | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the | | 's endowr | ment fund | S | | | | | |
| Part | | | | | | | | | | |
| | Complete if the organization answ | vered "Yes" | on Form | <u>1 990, Pa</u> | rt IV, line 1 | <u>1a. See l</u> | Form 990, P. | art X, lın | <u>e 10.</u> | |
| | Description of property | (a) Cost or ot | | | st or other | | cumulated | (d) Bo | ook value | 3 |
| | | (investm | ent) | bası | s (other) | dep | reciation | | | |
| 1a | Land . | | 0 | | 0 | | | | | 0 |
| b | Buildings | | 0 | | 0 | | 0 | | | 0 |
| С | Leasehold improvements | | 0 | | 0 | | 0 | | | 0 |
| d | Equipment . | | 0 | | 0 | | 0 | | | 0 |
| e | Other | [| 0 | | 0 | | 0 | | | 0 |
| Tota | I. Add lines 1a through 1e (Column (d) must e | gual Form 99 | 0, Par <u>t X,</u> | column (l | B), line 10c) | | <u> </u> | | | 0 |

| Schedule D (Form 990) 20 | 16 Texas Southmost Colleg | e Foundation, Inc | | 74-2338565 Page |
|--------------------------|--|--------------------------|--|---|
| Part VII Invo | estments—Other Securiti | | | |
| ` Cor | nplete if the organization a | nswered "Yes" on Form 99 | 90, Part IV, line 11b See Fo | rm 990, Part X, line 12 |
| | on of security or category ng name of security) | (b) Book value | (c) Method of v Cost or end-of-year | |
| (1) Financial derivati | ves | 0 | - | |
| (2) Closely-held equi | | 0 | | |
| (3) Other | | | | |
| | | | | |
| | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | . <u>. </u> |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| | 1 Form 990, Part X, col (B) line 12) ▶ | 0 | | ······································ |
| | estments—Program Rela | | | |
| Con | <u>nplete if the organization a</u> i | nswered "Yes" on Form 99 | 30, Part IV, line 11c See Fo | rm 990, Part X, line 13 |
| (a) Desc | cription of investment | (b) Book value | (c) Method of v Cost or end-of-year | |
| | | | Cost of Cha-on-year | That Not value |
| (1) | | | · | |
| (2) | | <u> </u> | | |
| (3) | | | | |
| <u>(4)</u> (5) | <u> </u> | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | - | | | |
| | Form 990, Part X, col (B) line 13) | 0 | 1 1 | |
| Part IX Oth | er Assets. | | | |
| | | nswered "Yes" on Form 99 | 90, Part IV, line 11d. See Fo | rm 990. Part X. line 15 |
| | | (a) Description | -,, | (b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| | oust equal Form 990, Part X, co | ol (B) line 15) | > | |
| | er Liabilities. | | | _ |
| Con line | - | nswered "Yes" on Form 99 | 90, Part IV, line 11e or 11f. S | See Form 990, Part X, |
| 1. (a) [| Description of liability | (b) Book value | and the second s | × (|
| (1) Federal income | taxes | 0 | | in the state of |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | Carle A This said |
| (E) | | i i | しょうき かいしょう 一般の間 | 是""。 27 " 歷· 夏热 孝 " " 最初 |

| 1. (a) Description of hability | (n) pook value | |
|--|----------------|--|
| (1) Federal income taxes | C | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | The state of the s |
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| (8) | | |
| (9) | | the first of the first state of the first of |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | <u>▶</u> | The state of the s |

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

| Schedule D (Form 9 | 990) 2016 | Texas Southmost College Foundation, Inc | 74-2338565 Page 5 |
|--------------------|-----------|--|--------------------------|
| Part XIII | Supple | Texas Southmost College Foundation, Incemental Information (continued) | |
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www irs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection Internal Revenue Service Employer identification number Name of the organization Texas Southmost College Foundation, Inc. 74-2338565 Form 990, Part VI, Section B, Line 11 Organization's process used to review From 990, Form 990 is reviewed by one or more officers of the Organization prior to it being signed and submitted

| Schedule O (Form 990 or 990-EZ) (2016) | Page 2 |
|---|--------------------------------|
| Name of the organization | Employer identification number |
| Texas Southmost College Foundation, Inc | 74-2338565 |
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