Form 990

(Rev January 2020)

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations).

OMB No 1545-0047 2019

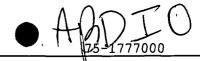
Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u> </u>	For the 2	u i y caien	dar year, or tax year i	beginning	, 2015,	and ending		,	
В	Check if app	plicable	С				D Employ	er identifica	tion number
	X Addres	s change	Sandy Creek F	oundation			75-	177700	0
		change	P.O. Box 7037	26			E Telepho	ne number	
	Initial r	eturn	Dallas, TX 75	370			214	-987-1	400
	\vdash	urn/terminated							
	\vdash	led return					G Gross r	eceints \$	613,480.
	\vdash	ation pending	F Name and address of p	rincipal officer T D = 3	- Datta		(a) Is this a group retur	_	
		attor pending	Same As C Abo	L. raly	e Patterson		• • • • • • • • • • • • • • • • • • • •		
	Tay even	npt status	X 501(c)(3)		4947(a)(1) or	T 5&7	(b) Are all subordinates If "No," attach a list	(see instruc	tions)
÷					4947(a)(1) 01				
<u></u>	Websit		ndycreekfound		<u> </u>		(c) Group exemption no		msz
K		organization	X Corporation Trust	Association Other	- ILY	ear of formation	_ 1981 M s	State of legal	domicile TX
[Fa	rt I	Summar	y ho the ergonization's	mission or most signific	ant notuution =				
	1 Bri	erly descri	the organization's	mission or most signific	ant activities_ Se	e_Sched	ule_0	- -	
ခွ									
뎙		- -			- -			- 	
Activities & Governance	a	eck this bo		zation discontinued its o					
હુ				governing body (Part VI		sea or mor	e man 25% or its	3	9
વ્ય				mbers of the governing t		16)		4	6
<u>ies</u>				ed in calendar year 201				5	7
≅			r of volunteers (estima		,			6	
₽ 5	7a Tot	al unrelate	ed business revenue f	rom Part VIII, column (0	c), line 12			7a	0.
	b Net	t unrelated	d business taxable inc	ome from Form 990-T, I	ine 39			7b	0.
							Prior Year		Current Year
4	8 Coi	ntributions	and grants (Part VIII	, line 1h)			5,471,9	44.	490,441.
Revenue	9 Pro	gram serv	vice revenue (Part VII	, line 2g)			80,9	67.	62,409.
eve	10 Inv	estment ir	ncome (Part VIII, colu	mn (A), lines 3, 4, and 7	'd)		20,8	42.	60,106.
ď	11 Oth	ner revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1	Oc, and 11e)			00.	524.
	12 Tot	al revenue	e – add lines 8 throug	h 11 (must equal Part V	'III, column (A), lir	ne 12)	5,574,2	53.	613,480.
	13 Gra	ants and s	ımılar amounts paid (l	Part IX, column (A), line	s 1-3)		1,4	48.	262,618.
	14 Be	nefits paid	I to or for members (F	art IX, column (A), line	4)				
/ 2	15 Sal	laries, oth	er compensation, emp	loyee benefits (Part IX,	column (A), lines	5-10)	179,5	56.	397,490.
Se	16a Pro	ofessional	fundraising fees (Part	IX, column (A), line 11e	e)				
Expenses	h Tot	al fundrai	sing expenses (Part I)	(, column (D), line 25)					
Ŋ	17 Oth	or evnen	ses (Part IX, column (A) lines 112.11d 11f.9/	rte rnal Revanua	Service	100 3	21	407 621
	17 Oti 18 Tot	al expens	os Add Imas 13 17 (r	A), lines 11a-11d, 11f	Sceived US Ban	k-USB	180,3		407,621.
			s expenses Subtract I		(A), III 3.59)	~-	361,3		1,067,729.
		venue less	s expenses Subtract	ine to itom line 12	11011 0 0 111	<u></u>	5,212,9		-454,249.
ta or	an Tot	al accata	(Part V. lina 16)		NOV 23 ZU	20	Beginning of Currer		End of Year
LUCI of Asset od Balar			(Part X, line 16) es (Part X, line 26)				5,331,3		4,893,808.
그 월달			•		0-4 15		36,1		34,156.
. <u>22</u>				act line 21 from line 20	Ogden, U		5,295,2	10.	4,859,652.
., [Pa	rt'll	Signatur	re Block						
J Unde	er penalties o	of perjury, I de	eclare that I have examined t	his return, including accompany ed on all information of which p	ng schedules and stater	nents, and to th	ne best of my knowledge	and belief, i	t is true, correct, and
	Diete Deciai	T. s	arer (other than officer) is oas		—– Tas any knowled		1 1 1 1		
_			3 HATEL	TRUSUM	······································			<u>13,20</u>	<u>lo </u>
Sig	jn	Signatu	ire of officer				Date	•	
He	re		<u>rles H. Armstr</u>	ong, Jr.			Treasurer		
: 		ļ	r print name and title			r			
Sig He Pa		Print/Type p	oreparer's name	Preparer's signature		Date	Check	It SIN	1
Pa	id			Non-Paid Prepa	rer		self-employ	ed	
Pre	eparer	Firm's name	e •						
Us	e Only	Firm's addr	ess F				Firm's EIN	-	
_							Phone no		
May	the IRS	discuss th	nis return with the pre	parer shown above? (se	e instructions)				Yes No
				see the senarate instru		~~~	01011 01/21/20		Form 990 (2019)

<u>F</u> orn	n 990 (2019)	Sandy Creek Foundation	75-17770	00	F	age 2
Paı		ement of Program Service Accomplishments				
		of Schedule O contains a response or note to any line in this Part III				<u> X</u>
1		be the organization's mission				
	See_Sche	<u>dule_O</u>				
						
	Did the ergen	cation undertake any conferent program on used divine the year which were not listed on the aver-			_	
2	Form 990 or	ization undertake any significant program services during the year which were not listed on the prior		Vac	V	No
		ribe these new services on Schedule O.		Yes	Δ	140
3	•	nization cease conducting, or make significant changes in how it conducts, any program serv	ices?	Yes	Y	No
Ū	•	ribe these changes on Schedule O		, 03	N	110
4		organization's program service accomplishments for each of its three largest program service	es. as measu	red by e	expen	ses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations, if any, for each program service reported	to others, the	total e	xpens	es,
	and revenue	, if any, for each program service reported				
	· (Codo:	\/Evpansos \$ 041,076 including greats of \$ 262,610,\/Pa				
4 8	(Code:) (Expenses \$ 941,876. including grants of \$ 262,618.) (Re				
		ly Creek Foundation engaged in significant international ar				
		several new venues. These engagements included Christian				
		ution, and networking in international locations, such as (
	Oklahoma	estic locations in Alabama, Idaho, Maryland, Nevada, North (<u>arorina,</u>	Tex.	15, _	anu_
	OKTATIONS	·				
			- 			
	-		- -			
	-		- 		- - -	
			-			
	-				- 	
	(Code) (Expenses \$ including grants of \$) (Re	venue \$			
7.	·	ly Creek Foundation established several new avenues and rel		no fo	r t	
		of teaching, mentoring, advising, and consulting with vari				
		is leaders, both internationally and nationally. Meetings,			<u>. u</u>	<u>u</u>
		aces took place abroad and within the facilities and office				
		oundation.	<u> 31</u>		<u>-</u> _ ت	
	35055					- - -
	- -					
			-			
			- -			
						
_	_					
40	(Code.) (Expenses \$ including grants of \$) (Re	venue \$			
	The Sand	ly Creek foundation established the operation of a headquar	ters fac	ility	7,	_
		used to house the extensive theological library, resource				1
		of the foundation; provide a venue for hosting meetings,				
		onal classes, and research; while also serving as an interr			or	the
		the foundation. This facility provides adequate space and				
		projects, research, and Biblical studies, as well as, prem				
		ing various individuals and Christian leaders collaborating				
	foundati		- - - -			
4 0		m services (Describe on Schedule O.)		-		
	(Expenses	\$ including grants of \$) (Revenue \$)	
		n service expenses ► 941,876.				
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			V	NI -
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X_
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		<u>X_</u>
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х_
	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? If 'Yes,' complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	X	
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Form 990 (2019) Sandy Creek Foundation

Partily Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 :	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		Х
1	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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
ł	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		<u> </u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		<u>x</u>
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)			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28Ь		X
(A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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 conservation contributions? If 'Yes,' complete Schedule M	30		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		<u>x</u>
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u>x</u> _
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	_	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	1	V 1	
1 :	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 5		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
c	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		ابب	
	(gambling) winnings to prize winners?	1 c Form	X gan (2010
BAA	IEEADIONE UNSITIS	Loum	23U (ZU17)

a	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a 7	_		
١	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ļ.,
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	_ 3 b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
١	b If 'Yes,' enter the name of the foreign country			}
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			X
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 a 5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	· · · · · · · · · · · · · · · · · · ·			
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).			
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
1	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		X
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 q		
,	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	a Gross income from members or shareholders			
•	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ı	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
á	a is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O		-	
ŀ	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		Ì	
	Enter the amount of reserves on hand			
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X_
ŀ	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N	-		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O	16		Х
	n res, complete i unit 4720, schedule U			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

	Check if Schedule O contains a response of hote to any line in this 7 art vi				Λ					
Sec	ction A. Governing Body and Management									
_		ا ما		Yes	No					
1:	a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members	1a 9								
	of the governing body, or if the governing body delegated broad		1							
	authority to an executive committee or similar committee, explain on Schedule O									
	Enter the number of voting members included on line 1a, above, who are independent	[1 b	1							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with any other	<u> </u>	<u></u>						
	officer, director, trustee, or key employee? See Schedule 0		2	Х						
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors, trustees, or key employees to a management company or other person	ne direct supervision n?	3		х					
4	Did the organization make any significant changes to its governing documents									
	since the prior Form 990 was filed?		4		X					
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?		6		Х					
7 :	7 a 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?									
1	Are any governance decisions of the organization reserved to (or subject to approval by) me	embers								
	stockholders, or persons other than the governing body?		7 b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken the following	during the year by								
	The governing body?		8 a	X						
ı	Each committee with authority to act on behalf of the governing body?		8 b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who can	not be reached at the	-							
_	organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O		9		Х					
Sec	tion B. Policies (This Section B requests information about policies not req	uired by the Internal Ri	eveni	ie Co	ode.)					
				Yes	No					
10 a	Did the organization have local chapters, branches, or affiliates?		10 a		X					
ı	o If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, operations are consistent with the organization's exempt purposes?	and branches to ensure their	10 ь							
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?	11 a	X						
	Describe in Schedule O the process, if any, used by the organization to review this Form 99									
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	see benedule o	12a		Х					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that to conflicts?	could give rise	12 b							
(Did the organization regularly and consistently monitor and enforce compliance with the policy? If " Schedule O how this was done	Yes,' describe in	12c							
12	Did the organization have a written whistleblower policy?		13		Х					
	Did the organization have a written document retention and destruction policy?		14		X					
	Did the process for determining compensation of the following persons include a review and approv	al by independent	14							
	persons, comparability data, and contemporaneous substantiation of the deliberation and de The organization's CEO, Executive Director, or top management official	cision?	15a		X					
	Other officers or key employees of the organization		15 b		X					
•	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)		130		Λ					
10.	,	arrangement with a								
102	i Did the organization invest in, contribute assets to, or participate in a joint venture or similar taxable entity during the year?	arrangement with a	16 a		Х					
ł	o If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and take steps									
	organization's exempt status with respect to such arrangements?		16 b							
Sec	tion C. Disclosure	<u> </u>								
17	List the states with which a copy of this Form 990 is required to be filed ► None									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable available for public inspection. Indicate how you made these available. Check all that apply), 990, and 990-T (Section 5	01(c)(3)s on	ly)					
		er (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p the public during the tax year See Schedule O	olicy, and financial statements availa	ble to							
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and records >)					
	Kimberly Hobbs 5206 Edgewater Court Parker TX 75094 214-	987-1400								

Form 990 (2019)	Sandy	Creek	Foundat	ion

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, ,	<u> ٦</u>		•	•	•			ŧΙ

Form 990 (2019)

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

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

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

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

See instructions for the order in which to list the persons above.

BAA

Check this box if neither the organization nor any relat	ed organiz	ation	con	nper	rsate	ed any	/ cu	rrent officer, direct	or, or trustee	·····
		(C)								
(A) Name and title	(B) Average hours per	\$5	s both dır	ector	officei /trust			(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Mr. Scott Colter	50									_
Secretary	0	X		X				79,083.	0.	0.
(2) Dr. L. Paige Patterson	50				П					
Pres / Chairman	0	X		Х				60,000.	0.	0.
(3) Dorothy Patterson	50									
Director	0	X					_	40,000.	0.	0.
(4) Mr. Armour Patterson	10									
Director	0	Х						9,000.	0.	0.
(5) Mr. Charles H. Armstrong, Jr.	5									
Treasurer	0	X		X				0.	_0.	0.
(6) Dr. Brad Jurkovich	2]								
Vice Chairman	0	X		Х				0.	0.	0.
	2									
Director	0	Х						0.	0.	0.
(8) Dr. Chris Thompson	2									
Director	0	X		<u> </u>				0.	0.	0.
_(9) Mr. Paul Spann	2					1 1				
Director	0	Х						0.	0.	0.
(10)										
(11)										
(10)	<u> </u>		L,		_			-		
(12)		}								
(13)										
(14)		-								
	1									

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Part VII Section A. Officers, Directors, Tre	ustees, (B)	Key T	En		oye C)	es,	and	d Highest Com	pensated Emp	loyees	(conti	nued)
	(6)			Pos	sition			(0)	(E)		(E)	
(A) Name and title	Average hours	box	, unle	check ess p	more	than is bot	h an		(E) Reportable	Estima	(F) ited am	ount
	per week (list any		- 1-1		d a director/trustee)			the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	0	f other	
	hours	Individual trustee or director	nstitutional trustee	Officer	Key employee	nplo ghes	Former	(W-2/1099-MISC)	(W-2/1099-WIISC)	the or	ganızat İ related	tion d
	related organiza	<u> </u>	ພູ	~	큫	rt cor	14			orga	ınızatıor	15
	- tions below	trust	5		yee	nper)
	dotted line)	8	stee			Highest compensated employee						
(15)							_					
(16)							_				_	
(17)	<u> </u>	-		_			-					
(17)												
(18)												
(19)												
(20)	<u> </u>	ļ					-				_	
	 											
(21)												
(22)	<u> </u>	!					_			<u> </u>		
(23)	<u> </u>						-		 _			
(24)	1	<u> </u>					-					
(24)	┪ -					1						
(25)										-		
1 b Subtotal	<u>L</u>		Ш				•	188,083.	0.	L		0.
c Total from continuation sheets to Part VII, Secti	on A							0.	0.			_ 0.
d Total (add lines 1b and 1c)								188,083.	0.			0.
2 Total number of individuals (including but not limited	to those I	sted	abo	ve) v	vho	recei	ved		0 of reportable com	ensation)	
from the organization 0							_				Voc	No
3 Did the organization list any former officer, direct	tor tructe	o ko	A	mol	avoc		hial	aest companyated	employee		Yes	No
on line 1a? If 'Yes,' complete Schedule J for suc	ch individu	al	ус	прк	усс	, 01	ingi	lest compensated	cmployee	3		Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	f reportab	le co	mpe	ensa	tion	and	oth	er compensation				
such individual	ei illali pi	50,00	JU ,	" '	c 3,	COII	ipie	de Scriedule 5 loi	(4		Х
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e compen s,' comple	satio te Sc	n fre	om lule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	ındıvıdual	5		Х
Section B. Independent Contractors			-1				41		#100 000 -4			
Complete this table for your five highest compensation from the organization. Report compensation.	isated indi	the ca	den alen	dar	ear	endi	ng v	vith or within the or	ganization's tax year	·		
(A) Name and business add	ress							(B) Description (of services	Compe	;) nsatio	n
				_								
	<u> </u>											
			_									
2 Total number of independent contractors (including t		ted to	tho	se I	stec	abo	ve)	who received more	than			
\$100,000 of compensation from the organization			1001	07/						Form	000 /	2010

		0 (2019) Sandy			unda	ition			75-1777000	Page \$
Par	t VI	II Statement of					Land Hara Dank V	au		
	-	Check if Schedul	e O	contains	a resp	oonse or note to an	y line in this Part V (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue Contributions; Gifts, Grants Program Service Revenue and Other Similar Amounts	b c d e f g h	Federated campaign Membership dues Fundraising events Related organizatio Government grants (conticular amounts not included to the contributions in lines 1a-1f Total. Add lines 1a- Honorariums Royalties	ns ributi ifts, g uded clude -1f	grants, and above d in	1 a 1 b 1 c 1 d 1 c 1 g	490, 441. Business Code 812900 511130	490,441. 32,128. 30,281.	32,128. 30,281.		
Program Se	l .	All other program so Total Add lines 2a- Investment income (in other similar amour	-2f Inclu			nterest, and	62,409. 60,106.	60,106.		
	b	Income from investi Royalties Gross rents	6a 6b	t of tax-e		t bond proceeds. ► (ii) Personal	00,100.	30,100.		
	7a b c	Less cost or other basis and sales expenses	7a 7b 7c	(i) Secu	rities	(ii) Other				
Other Revenue	b	Gross income from fundra (not including \$	on lu	ne 1c) om fundra		b events	,	1		
	b c 10a b	See Part IV, linc 19 Less direct expension Net income or (loss Gross sales of inventory, returns and allowances Less: cost of goods Net income or (loss	es) fro less	om gamino	10	b //tiles ► a 524. b	E24	524		
Revenue	11 a b c d					Business Code	524.	524.		

12 Total revenue. See instructions

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Crieck if Scriedule O contains a	(A)	(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	262,618.	262,618.		
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.				
4	• • • • • • • • • • • • • • • • • • • •				
5	Compensation of current officers, directors, trustees, and key employees	179,083.	129,541.	49,542.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	123,916.	102,949.	20,967.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	69,617.	53,417.	16,200.	
10	Payroll taxes	24,874.	18,977.	5,897.	
11	Fees for services (nonemployees):				
a	a Management				
ŀ	Legal	5,000.		5,000.	
(c Accounting				
	Lobbying				
	Professional fundraising services See Part IV, line 17				
g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion	26,649.	26,649.		
13	Office expenses	16,447.		16,447.	
14	Information technology	4,698.		4,698.	- -
15	Royalties				
16	Occupancy	70,154.	70,154.		
17	Travel	204,328.	204,328.		····
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22		18,238.	18,238.		
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	Hospitality Gifts	29,426.	29,426.		 -
	Automotive	14,499.	14,499.		
	Theological Research	11,080.	_ 11,080.		
	Postage and Shipping	4,328.		4,328.	
	All other expenses	2,774.		2,774.	
	Total functional expenses. Add lines 1 through 24e	1,067,729.	941,876.	125,853.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X **(B)** End of year (A) Beginning of year 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3,742,159 2,754,215. Pledges and grants receivable, net 3 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D Illa 2,166,303 26,710 10 c **b** Less accumulated depreciation. 10b 1,589,157 2,139,593 11 11 Investments - publicly traded securities. 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 5,331,316. 16 4,893,808. 16 Total assets. Add lines 1 through 15 (must equal line 33) 36,106 17 17 Accounts payable and accrued expenses 34,156 18 18 Grants payable Deferred revenue 19 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 Total liabilities. Add lines 17 through 25 36,106 34,156 Organizations that follow FASB ASC 958, check here Х or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 5,295,210 27 4,859,652 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Assets 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 32 32 5,295,210 4,859,652.

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4,893,808.

33

5,331,316

33

Total liabilities and net assets/fund balances

Forn	m 990 (2019) Sandy Creek Foundation	75-177700	0	Page	12
	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6	13,480	ງ.
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3	-4	54,249	<u>-</u> €.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	5,2	95,210).
5	Net unrealized gains (losses) on investments	5		18,691	
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 on Schedule O)	9		. ().
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	4,8	59,652	 2
Par	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			ĺ	П
				Yes N	<u></u>
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		- [
	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) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	<u> </u>	<u>. </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both	newed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
ŀ	b Were the organization's financial statements audited by an independent accountant?		2 b		<u></u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se	parate			1
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	iudit,			_
	review, or compilation of its financial statements and selection of an independent accountant?		2 c	_	
	on Schedule O				
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	jle	3 a		<u> </u>
t		audit	3 ь		

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Form **990** (2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Name	Name of the organization Employer identification number							
San	Sandy Creek Foundation 75-1777000							
Par		Reason for Public Cha						ctions.
The c	rga	nization is not a private found	dation because it is: (For lines 1 through 12,	check o	nly one	box)	
1		A church, convention of church	es, or association of cl	nurches described in sec	tion 170(b)(1)(A)	(i).	$\wedge \sigma$
2	Г	A school described in section 1	70(b)(1)(A)(ii). (Attach	Schedule E (Form 990 or	990-EZ))		') (
3	Г	A hospital or a cooperative h	ospital service organ	ization described in sec	tion 17	0(b)(1)(A	۱)(iii).	\mathcal{I}
4	Г	A medical research organiza	tion operated in conju	unction with a hospital of	describe	d in sec	ction 170(b)(1)(A)(iii)	Enter the hospital's
	_	name, city, and state		·				·
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle		or oper	ated by	a governmental unit o	described in
6		A federal, state, or local government	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).	
7		An organization that normally run section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II)	part of its support from a	governm	ental un	it or from the general pi	ublic described
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part	1)			
9		An agricultural research organi	zation described in sec	tion 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant col	lege
		or university or a non-land-grai	nt college of agriculture	(see instructions) Enter	the nam	ne, city,	and state of the college	or
		university.						
10	X	An organization that normally r from activities related to its c investment income and unre June 30, 1975 See section!	exempt functions—sub lated business taxabl	oject to certain exception e income (less section	ns, and	(2) no i	more than 33-1/3% of	its support from gross
11		An organization organized ar	nd operated exclusive	ly to test for public safe	ety See	section	n 509(a)(4).	
12		An organization organized ar or more publicly supported o	rganizations describe	d in section 509(a)(1) o	r sectio	n 509(a)(2). See section 509(out the purposes of one a)(3). Check the box in
_		lines 12a through 12d that de				•	-	a the supported
а	_	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	gularly appoint or elect	a majority of the director	rs or trus	tees of t	the supporting organization	ion You must
b		Type II. A supporting organiz management of the supporting must complete Part IV, Secti	organization vested in	ontrolled in connection the same persons that co	with its ontrol or	support manage	ted organization(s), by the supported organiza	having control or having control or having control or
С		Type III functionally integrated organization(s) (see instruction	A supporting organizat	ion operated in connection	n with, ar	nd function	onally integrated with, its	supported
d		Type III non-functionally integrated The constructions) You must com	rated. A supporting org	anization operated in cor	nection	with its	supported organization(it and an attentivenes	s) that is not s requirement (see
е		Check this box if the organiz integrated, or Type III non-fu	ation received a writte	en determination from t	the IRS			
f	Er	iter the number of supported		supporting organization	•			
g	Pr	ovide the following information	n about the supported	d organization(s)				<u> </u>
) Na	me of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No	1	
					103			
(A)								
<u> </u>		-						
(B)								
								
(C)	»							
(D)								
(E)								
Total	otal							

Par	t II Support Schedule for (Complete only if you checked organization fails to qualify	the box on line 5,	7, or 8 of Part I or i	f the organization	r failed to qualify uni	d 170(b)(1)(A)(vider Part III If the	<i>i</i> i)
Sec	tion A. Public Support		,		<u> </u>		/
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	-					
3	The value of services or facilities furnished by a governmental unit to the organization without charge			\			
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	t					
Sec	tion B. Total Support			<u>/</u>			
	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources				:		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10			_			
12	Gross receipts from related active	ities, etc (see in	structions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, thi	rd, fourth, or fifth	tax year as a section	n 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	blic Support P	'ercentage				
	Public support percentage for 20	·	-	e 11, column (f))	14	%
15	Public support percentage from	2018 Schedule A,	Part II, line 14			15	
16a	33-1/3% support test-2019. If the and stop here. The organization	he organization di qualifies as a put	id not check the bookings	ox on line 13, ar ganization	nd line 14 is 33-1/3	% or more, check	this box
b	33-1/3% support test-2018. If the and stop here. The organization	ne organization did qualifies as a pu	d not check a box blicly supported oi	on line 13 or 16 ganization	a, and line 15 is 33	3-1/3% or more, ch	eck this box ►
1 7 a	10%-facts and-circumstances te or more and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	test, check this	s box and stop her	e. Explain in Part \	/I how
	b 10% facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support	 		<u> </u>					
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') Pt VI	,	-"						
					75,717.	490,441.	566,158.		
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	65,196.	73,429.	62,183.	80,967.	62,933.	344,708.		
3	Gross receipts from activities that are not an unrelated trade or business under section 513	03,130.	75,425.	02,103.	00,,50,.	02,733.	0.		
4	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.		
	Total. Add lines 1 through 5	65,196.	73,429.	62,183.	156,684.	553,374.	910,866.		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	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	0.	0.	0.	0.	0.	0.		
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.		
-	Public support. (Subtract line		, 0.	<u> </u>		<u> </u>	<u> </u>		
	7c from line 6)	;	2	 	. , ,		910,866.		
		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
	dar year (or fiscal year beginning in) Amounts from line 6	65,196.	73,429.	62,183.	156,684.	553,374.	910,866.		
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from	03,190.	73,429.	02,183.					
b	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				20,842.	60,106.	80,948.		
С	Add lines 10a and 10b	٠ 0.	0.	0.	20,842.	60,106.	80,948.		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		·				0.		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) See Part VI			-	500.		500.		
	Total support. (Add lines 9, 10c, 11, and 12)	65,196.	73,429.	62,183.	178,026.	613,480.	992,314.		
	First five years. If the Form 990 organization, check this box and	stop here		third, fourth, or	fifth tax year as	a section 501(c)(3	·		
	tion C. Computation of Pul			- 121 (2)			01 72 9		
	Public support percentage for 20	•		e 13, column (t))		15	91.79 %		
	Public support percentage from 2					16	95.14 %		
	tion D. Computation of Inv		<u> </u>						
17	Investment income percentage for	•		=	mn (t))	17	8.16 %		
18	Investment income percentage fr					18	4.75 %		
	33-1/3% support tests—2019. If t is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppo	orted organization	► [X]		
	33-1/3% support tests—2018. If the line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qua	ilifies as a publicl	y supported organ	ization		
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

75-1777000

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.)

C		^ · · · · · · · · · · · · · · · · · · ·	Organizations
SOCTION	A A 11	NUMBARINA	I Iraanizatione
JECHOIL	A. AII	Juppoi illiu	Olualiizaliolis

			Yes	NO
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	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	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	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3c		<u>ا</u> ۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔
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.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
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)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?			
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filling organization's supported organizations? If 'Yes,' provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7	-	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7° If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
С	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	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer 10b below	10a		
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)	10b		



га	1 14 Supporting Organizations (Continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	١. '		,
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
_	ction B. Type I Supporting Organizations			<u> </u>
	Mon D. Type . curpetting c.gumautone		Yes	No
1	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
	applied to such powers during the tax year.	1	ļ	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the	2		
50	supporting organization.		L	L
<u> </u>	ction C. Type II Supporting Organizations		Yes	No
			res	NO
1 	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	,	 	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			-
	The organization satisfied the Activities Test. Complete line 2 below			
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	ıstruc	tions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities			
			\vdash	
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	 3a]
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		



Schedule A (Form 990 or 990-EZ) 2019 Sandy Creek Foundation

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 75-1777000

	3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -					
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI) See through E		
Sec	Section A — Adjusted Net Income (A) Prior Year					
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
_7	Other expenses (see instructions)	7				
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)					
	Average monthly value of securities	1a				
1	Average monthly cash balances	1b				
•	Fair market value of other non-exempt-use assets	1c				
	Total (add lines 1a, 1b, and 1c)	1d				
	e Discount claimed for blockage or other factors (explain in detail in Part VI)					
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		. <u> </u>		
3	Subtract line 2 from line 1d	3				
_4 	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 035	6	· <u></u> _			
_7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sec	tion C — Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
_2	Enter 85% of line 1	2				
3		3				
4	Enter greater of line 2 or line 3	4		<u> </u>		
5	Income tax imposed in prior year	5				
6 	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionally inter(see instructions)	grated	Type III supporting org	anızatıon		

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Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019	Sandy Creek Foundation		1777000	Page 7
Part V Type III Non-Function	nally Integrated 509(a)(3) Supporting C	Organizations (continued)		
Section D - Distributions			Curre	nt Year

ec	ction D — Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
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	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	

9 Distributable amount for 2019 from Section C, line 6

10 Line 8 amount divided by line 9 amount

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			 -
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015	·=		
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount	· <u></u>		
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions.			
7 Excess distributions carryover to 2020. Add lines 3 _j and 4c.			
8 Breakdown of line 7:			
d Excess from 2015		4.1	
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019		•	

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Schedule A (Form 990 or 990-EZ) 2019

75-1777000

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part III, Line 1 - Unusual Grants

2015 2016 2017 2018 2019 Total \$ 0. \$ 0. \$ 5,396,227. \$ 75,000. \$ 5,471,227.

Part III, Line 12 - Other Income

 Nature and Source
 2019
 2018
 2017
 2016
 2015

 Lease Income
 \$ 500.
 \$ 500.
 \$ 0.
 \$ 0.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Sandy Creek Foundation 75-1777000 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. 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 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No 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 (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements. 2a **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art,

historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items

- b If the organization elected, as permitted under FASB 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 FASB ASC 958 relating to these items **►**S
- a Revenue included on Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

▶ \$

ÞŚ Schedule D (Form 990) 2019

419,205.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		207,196.		207,196.
b Buildings.		1,426,797.		1,426,797.
c Leasehold improvements.				
d Equipment		62,219.	18,667.	43,552.
e Other		470,091.	8,043.	462,048.
Total. Add lines 1a through 1e (Column (d)	2,139,593.			

Schedule D (Form 990) 2019

Part VII Investments – Other Securities. Complete if the organization answered		N/A	990 Part X line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-c	
(1) Financial derivatives	(2) 20011121	(C) inclined of Valuation Cost of Cita	, juli mario: 12.120
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)		27.72	
Part VIII Investments – Program Related. Complete if the organization answered	'Yes' on Form 990	N/A D. Part IV. line 11c. See Form 9	90. Part X. line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end	
(1)			
(2)	-		
(3)			
(4)			
(5)			
(6)			
(7)	· 		
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX Other Assets.	N/A		
Complete if the organization answered	'Yes' on Form 990), Part IV, line 11d. See Form 9	
	scription		(b) Book value
(1) (2)			
(3)			<u> </u>
(4)	· · · · · · · · · · · · · · · · · · ·		
(5)			
(6)			
(7)			
(8)			
(10)	 		<u> </u>
Total. (Column (b) must equal Form 990, Part X, column (E	3) line 15)		<u> </u>
Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo		le or 11f. See Form 990. Part X. line 25	
	ption of liability	<u></u>	(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4) (5)			
(6)			
(7)	_		
(8)			
(9)			
(10)			 _
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	 	>	1.51.6
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foctax positions under FASB ASC 740. Check here if the text of the footnote has		nancial statements that reports the organization's	liability for uncertain
tax positions under FASE ASC 740. Check here it the text of the roothote has	TET A22021 8/22/10	Scho	dula D (Form 990) 2019

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Schedule D	(Form 990) 2019	Sandv	Creek	Found	lation

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Part XI Reconciliation of Revenue per Audited Financial Sta		e per Return. N/A	
Complete if the organization answered 'Yes' on Form	990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2 a	1	
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d	, , , , , , , , , , , , , , , , , , , 	2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b	<u> </u>	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, III	ne 12)	5	
Part XII Reconciliation of Expenses per Audited Financial St	atements With Expens	es per Return. N/A	
Complete if the organization answered 'Yes' on Form			
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		•
c Other losses	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d	<u> </u>	2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b	· — —	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, I	ine 18)	5	
Part XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Part III, Line 4 - Description Of Organization Collections & How Furthers Exempt Purpose

Library collection of approximately 31,300 volumes, including an estimated 3,500 antiquarian volumes. This collection is used to promote biblical truth and values. Foundation ambassadors use the collection for education and training, for preaching and teaching, and for the evangelization of those who are lost and for the advancement of the Kingdom of God.

Schedule D (Form 990) 2019

BAA

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

Sandy Creek Foundation				·		75-17770	00
Part I General Information on Gra							
 Does the organization maintain records to the selection criteria used to award the 	e grants or assistance	?		eligibility for the grants of	or assistance, and		Yes X No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistan							
Form 990, Part IV, line 21,	for any recipient	that received r	more than \$5,000. F	Part II can be duplic	cated if additional	space is neede	d.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Shema Madagascar Ministries BP 176							Ministries
Fort Dauphin, 614 Madagascar			55,285.	0.			Vehicle
(2) Bibleseminar Bonn Risdorf DE, Ehrental 2-4, 53332 Bornheim Germany			200,350.	0.1		١	Teaching the Gospel
(3) Southwestern Baptist Seminary P.O. Box 22510 Fort Worth, TX 76122	75-0891462		6,983.	0.			Student Aid
(4)		-					
(5)				'			
<u>(6)</u>						 	
<u></u>							
(8)						<u></u>	
2 Enter total number of section 501(c)(3 3 Enter total number of other organization	• •	=	in the line 1 table				3

				_	
Schedule I	(Form 990)	(2019)	Sandv	Creek	Foundation

75-1777000

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
					
·					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019 Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number

Sandy Creek Foundation

75-1777000

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

The Sandy Creek Foundation exists to promote biblical truth and values through local, national, and international avenues. Foundation ambassadors accomplish this through global theological education and training, domestic and international preaching and teaching, written publications, and networking among Christian leaders and organizations. The ultimate goal of the Sandy Creek Foundation is the evangelization of those who are lost and the advancement of the Kingdom of God.

Form 990, Part III, Line 1 - Organization Mission

The Sandy Creek Foundation exists to promote biblical truth and values through local, national, and international avenues. Foundation ambassadors accomplish this through global theological education and training, domestic and international preaching and teaching, written publications, and networking among Christian leaders and organizations. The ultimate goal of the Sandy Creek Foundation is the evangelization of those who are lost and the advancement of the Kingdom of God.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

L. Paige Patterson and Dorothy Patterson are husband and wife.

Mr. Armour Patterson is the Pattersons' son.

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

A draft of the Form 990 is electronically sent to each member of the governing body for their review prior to filing the final return.

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

No copy of governing documents were made available to the public during the tax vear.