Department of the

Treasury

DLN: 93493318097050

OMB No. 1545-0047

2019

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.

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

Open to Public Inspection

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			alendar year, or tax year begin C Name of organization	ning 01-01-2019 , and endi	ng 12-31-	-2019	D Employer	idontif	ication number
_		pplicable: change	SAN ANTONIO AREA FOUNDATION				D Employer	iuentii	cation number
□ Na		-					74-60654	14	
☐ Ini		-	Doing business as						
☐ Fina	al returi	n/terminated					E Telephone r	umbor	
		d return	Number and street (or P.O. box if ma 303 PEARL PARKWAY NO 114	ail is not delivered to street address)	Room/suite	е			
⊔ Ар	plication	on pending					(210) 225	-2243	
			City or town, state or province, coun SAN ANTONIO, TX 782151285	try, and ZIP or foreign postal code					
							G Gross recei		97,657,768
			F Name and address of principa LYNDA CABELL	officer:		H(a) Is t	his a group retur	n for	
			303 PEARL PARKWAY NO 114				ordinates? : all subordinates		□Yes ☑No
			SAN ANTONIO, TX 782151285				luded?		☐ Yes ☐No
I la:	x-exen	mpt status:	☑ 501(c)(3) □ 501(c)() ◄ (insert no.) \square 4947(a)(1) or \square			No," attach a list		
J W	ebsit	te:► WW	/W.SAAFDN.ORG			H(c) Gro	oup exemption nu	ımber	▶ 3910
							1		
K Forr	n of or	rganization:	: 🗹 Corporation 🗌 Trust 🗌 Asso	ciation D Other >		L Year of for	rmation: 1964 M	l State	of legal domicile: TX
Pa	art I	Sumi	mary scribe the organization's mission or	mant significant activities.					
			HE COMMUNITY FOUNDATION FOR		REA. WE I	HOLD END	OWMENTS AND	FUNDS	WHICH SUPPORT
Ce	<u>L</u>	LOCAL CH	ARITIES AND SPONSOR STRATEG	C INITIATIVES WHICH BENEFIT	OUR COM	1MUNITY.			
Œ	-								
EII	-								
λοκ	2	Check thi	is box $\blacktriangleright \Box$ if the organization dis	continued its operations or dispo	sed of mo	ore than 25	5% of its net ass	ets.	
೨ ಶ	3	Number o	of voting members of the governin	g body (Part VI, line 1a)			•	3	17
S)	4	Number o	of independent voting members of	the governing body (Part VI, lin	e 1b) .		•	4	14
Activities & Governance	5	Total num	nber of individuals employed in cal	endar year 2019 (Part V, line 2a)			5	55
t t	6	Total num	nber of volunteers (estimate if nec	essary)				6	350
⋖	7a	Total unre	elated business revenue from Part	VIII, column (C), line 12				7a	482,686
	ь	Net unrel	ated business taxable income from	Form 990-T, line 39				7b	466,446
						F	Prior Year		Current Year
0.	8	Contribut	ions and grants (Part VIII, line 1h)				36,427,64	2	109,537,728
Ravenue	9	Program :	9	3,040,192					
δΛċ	l		ent income (Part VIII, column (A), li				9,065,82	+	18,602,021
<u> </u>	11	Other rev	venue (Part VIII, column (A), lines 5	5, 6d, 8c, 9c, 10c, and 11e)			793,010		819,260
	12	Total reve	enue—add lines 8 through 11 (mu:	st equal Part VIII, column (A), lir	ie 12)		49,550,96	7	131,999,201
	13	Grants ar	nd similar amounts paid (Part IX, c	olumn (A), lines 1–3)			35,273,62	3	29,951,579
	l		paid to or for members (Part IX, co				(0
S	l		other compensation, employee be		5-10)		4,107,92	1	4,585,647
ıse	16a	Professio	nal fundraising fees (Part IX, colun	nn (A), line 11e)					0
Expenses	l .		raising expenses (Part IX, column (D), I						
ঐ	l		penses (Part IX, column (A), lines :				4,426,71	7	4,390,034
		•	enses. Add lines 13–17 (must equ				43,808,26	+	38,927,260
			less expenses. Subtract line 18 fro		_		5,742,70	+	93,071,941
- S			TOO EXPENSEST DUBLING THE TO THE		•	Beginni	ng of Current Yea		End of Year
Net Assets or Fund Balances									
SSe	20	Total asse	ets (Part X, line 16)				249,001,76	1	363,969,632
절절	21	Total liab	ilities (Part X, line 26)				23,835,81	כ	15,132,114
žZ	22	Net asset	s or fund balances. Subtract line 2	1 from line 20			225,165,95	1	348,837,518
	rt II		ature Block						
			erjury, I declare that I have exami						
any k			f, it is true, correct, and complete.	Declaration of preparer (other	tnan office	er) is based	on all informati	on or v	vnich preparer has
		Signatu	* ure of officer				2020-11-12 Date		
Sign		Joigilace	are or officer				Jace		
Here	;		CABELL CFO						
		17	r print name and title	I Burnamada a	1		Γ		
		Pi	rint/Type preparer's name	Preparer's signature	Dat 202	20-11- 1 2 [©]		N 1715390)
Paid			irm's name ► RSM US LLP				elf-employed Firm's EIN ► 42-07	14325	
Pre		#I	MANUS HAINE P NON US LLY				42-U/		
Use	On	ily F	irm's address ▶ 19026 RIDGEWOOD PK	WY STE 400		F	Phone no. (210) 828	3-6281	
			SAN ANTONIO, TX 782	59					
May t	he IR	S discuss	this return with the preparer show	n above? (see instructions)				✓ Y	′es 🗆 No

Form	990 (2	2019)				Page 2
Pa	rt III	Statement of Program So	ervice Accomplis	hments		
		Check if Schedule O contains a	response or note to	any line in this Part III .		🗆
1	Briefly	y describe the organization's miss				
		ANTS FOR CHARITABLE PURPOSI TAN AREA AND SURROUNDING C		ND EDUCATIONAL ORGA	ANIZATIONS, PRINCIPALLY IN THE	SAN ANTONIO
2		ne organization undertake any sig		vices during the year wh	nich were not listed on	
		rior Form 990 or 990-EZ?				☐ Yes ☑ No
		s," describe these new services o				
3	servic	ne organization cease conducting, res?		changes in how it condu	icts, any program	☐ Yes ☑ No
4	Sectio		izations are required	to report the amount o	largest program services, as meast f grants and allocations to others, t	
4a	(Code:	:) (Expenses \$	32.782.199	including grants of \$	29,951,579) (Revenue \$	3,111,409)
	See Ad	dditional Data	,,	J		-,,
4b	(Code:	:) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code:	:) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program services (Describe in S	chedule O.)			
		enses \$	including grants of	\$) (Revenue \$)
4e	Total	program service expenses >	32,782,1	99		_

Form	990 (2019)			Page 3
Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		No
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		No
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? <i>If "Yes," complete Schedule D</i> ,Part 2	6	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8	Yes	
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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	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 🥦	11b	Yes	
	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 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
	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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	Yes	
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	Yes	
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		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,	40		

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

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

18

19

20a

20b

21

Yes

Yes

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Nο

Nο

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Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 50			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b 5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		140
	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		No
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	lines V
Se	ction 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 17			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: LYNDA CABELL 303 PEARL PARKWAY NO 114 SAN ANTONIO, TX 782151285 (210) 225-2243			

 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. Isist 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 organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable 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 nor any related organization and any related organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Check this box if neither the organization nor any related organization of the organization from the organization from the organization is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Or of the organization of the organization of the organization of the organization from the organization from the organization from the organization and related organization shelow dotted line) 	Form 990 (2019)											Page 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ 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 organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,	
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. 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 furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 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 organization and any related organization or any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) Average hours per beneficer and a director/trustee) List all of the organization or any related organization	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. 🗆
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■ 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, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization. Sie instructions for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line) ■ Check this box if neither the organization below dotted line) ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line) ■ Check this box if neither the organization or any related organization organization or any related organization or any related organization organiza	year.		•						, ,		-	n's tax
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Average hours per week (list any hours for related organizations) below dotted line) Continue to the person of the order in which to list the persons above. Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·	
(A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (B) Average hours per week (list any hours for related organization (W-2/1099-MISC) (B) Reportable compensation from the organization (W-2/1099-MISC) (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations	organization, more than \$10,000 of reportab	le compensatio	n from t								е	
Name and title Average hours per week (list any hours for related organizations below dotted line) Name and title Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer	☐ Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.		
it st		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estim amount comper from	ated of other sation the
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		` '	rela	ted
	See Additional Data Table											

Form 990 (2019)													Page 8
Part VII Section A. Officers, Direct (A) Name and title	(B) Average hours per week (list any hours	Position than o	ion (do	(C) lo no loox, u	c) ot che unles	neck mo ess pers	nore rson	(D) Reportabl compensati from the organizatio	ole tion e ion	(E) Reportable compensation from related organizations	n ,	(F) Estima amount c compen	ated of other sation the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W-2/1099 MISC)		(W-2/1099- MISC)		organizat relat organiza	ed
See Additional Data Table											丰		
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	+		 	+	+		\forall				+		
1b Sub-Total	Part VII, Section			<u></u>		* *	<u></u>	1,614,78		63,12	25		86,450
2 Total number of individuals (including of reportable compensation from the			e liste	ed a	bove	a) wno	rece	eived more the	an \$10	30,000		_	
3 Did the organization list any former of line 1a? If "Yes," complete Schedule 3			iee, k	.ey e	₃mpl •	oyee,	or hi	ghest compen	sated	employee on	3	Yes	No No
4 For any individual listed on line 1a, is organization and related organization individual	the sum of reports greater than \$	ortable (\$150,00 • •	comp 10? <i>If</i>	ensa "Yes	atior s," c	n and comple:	other te Sc	compensation	n from uch	ı the	4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization									or indi	vidual for	5		No
Section B. Independent Contract Complete this table for your five high-		- inder	-546		- str	- store		ived more	- than	+100 000 of co		- ±: = m	
Complete this table for your five high from the organization. Report comper											mpen.	sation (C	·1
FSG INC	and business addre	<u> </u>						PROG		cription of services CONSULTING SERVIC	CES	Comper	
179 LINCOLN STREET 3RD FLOOR BOSTON, MA 02111													
RSM US LLP 331 W 3RD STREET SUITE 200								AUDIT	T/TAX S	SERVICES			221,417
DAVENPORT, IA 52801 KAMIN ASSOCIATES INC IT SERVICES											213,149		
PO BOX 6816 SAN ANTONIO, TX 78209 COLONIAL CONSULTING LLC								INVE	CTMEN	IT MANAGEMENT	_		205,565
750 THIRD AVENUE 20TH FLOOR NEW YORK, NY 10017												200,00	
MORIARTY CONSULTING GROUP		-						PROG	RAM C	CONSULTING SERVIC	CES		116,078
100 SHEFFIELD SAN ANTONIO, TX 78213 2 Total number of independent contractor		+ not lim	nited	to th	hose	listed	aho	we) who receiv	-red m		nn of		
compensation from the organization > !					_					70 010 4211,		Form 99	0 (2010)

		(2019)								Page 9
Part	VIII				recno	inse or note to any	line in this Part VIII			\square
		Check ii Sched	uie	O Contains a	respo	inse of flote to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campa	igns		1a			revenue		512 - 514
tributions, Gifts, Grants Other Similar Amounts		b Membership dues	5.	. [1b					
Gra mo		c Fundraising even	ts .	. [1c	182,318				
fs, r A		d Related organizat	tions	; <u> </u>	1d	1,652,203				
Gifts, nilar A		e Government grants	(con	tributions)	1e					
ons, Sin	1	f All other contributio and similar amounts	ns, g	ifts, grants,	ĺ					
utic Per		above		L	1f	107,703,207				
哥哥	!	g Noncash contributio lines 1a - 1f:\$	ns in	cluded in	1g	81,956,670				
Contributions, and Other Sim		h Total. Add lines 1	1a-1				100 527 720			
						Business Code	109,537,728			
	2 a	ADMIN FEE REVENUE				900099	2,653,753	2,653,753		
an						300033	386,439	386,439		
Program Service Revenue	b	PROGRAM REVENUE				900099	360,439	300,439		
æ Æ										
rvic	С									
% -	d	I								
gran	e									
δ		·								
	f	All other program	serv	ice revenue.						
		Total. Add lines 2				3,040,192	1	1	Γ	<u> </u>
	3	Investment income similar amounts)	(inc	luding divider	nds, i	nterest, and other	15,186,356	,	482,686	14,703,670
	4	Income from invest				ond proceeds				
	5	Royalties	_			1	614,955			614,955
				(i) Real		(ii) Personal	-			
	6 a	Gross rents	6a	18	32,908	1				
	b	Less: rental expenses	6b		0					
	С	Rental income	_							
	,	or (loss) I Net rental income	6c		32,908					182,908
	Ì	d Net rental income or (loss)			(ii) Other				102,300	
	7a	Gross amount	_	.,			1			
		from sales of assets other	7a	68,98	30,298					
	h	than inventory Less: cost or					-			
		other basis and sales expenses	7b	65,56	64,633	1				
		·								
		Gain or (loss) Net gain or (loss)	7c		.5,665					3,415,665
_		Gross income from fu				· · · •	1			, ,
nue		(not including \$ contributions reported		182,318 of line 1c).						
eve		See Part IV, line 18			8a	44,114				
r R		Less: direct expen			8b	93,934				
Other Revenue	•	Net income or (los	s) fr	om fundraisir	ng eve	ents 🕨	-49,820 ¬			-49,820
	9a	Gross income from								
		See Part IV, line 19			9a					
		Less: direct expend Net income or (los			9b ctiviti	les .	_			
	Ì	. Net meanle or (los	3) 11	om gaming a		es •	1			
	10	aGross sales of inve	entor	ry, less						
	ŀ	Less: cost of goods			10a 10b		-			
		Net income or (los				orv >				
		Miscellaneo			100110	Business Code				
	11	-aOTHER INCOME				900099	71,217	71,217		
	Ł	·								
	C									
		A All ables on								
		l All other revenue • Total. Add lines 1:			_ [
		2 Total revenue. Se			•		71,217			
		. Total revenue, S	ee If	isu uCu0∏5 .	•	•	131,999,201	3,111,409	482,686	18,867,378 Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must c				ımn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			<u> U</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	29,209,447	29,209,447		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	734,772	734,772		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	7,360	7,360		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,552,617	281,635	1,023,679	247,303
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,490,294	661,999	1,718,958	109,337
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	90,364	24,108	61,657	4,599
9 Other employee benefits	166,010	30,868	130,919	4,223
10 Payroll taxes	286,362	67,525	197,112	21,725
11 Fees for services (non-employees):				
a Management				
b Legal	52,171	21,431	30,740	
c Accounting	221,417	5,000	216,417	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	961,233		961,233	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	827,050	721,598	104,646	806
12 Advertising and promotion	17,328	254	16,774	300
13 Office expenses	100,615	14,490	79,011	7,114
14 Information technology	298,658	75,231	200,619	22,808
15 Royalties	156,151	113,560	38,326	4,265
16 Occupancy	594,502	374,275	198,174	22,053
17 Travel	27,834	7,443	17,021	3,370
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	97,811	15,493	82,014	304
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	162,278	76,935	80,810	4,533
23 Insurance	31,577		31,577	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EVENT EXPENSES	375,128	252,224	84,804	38,100
b REPAIRS AND MAINTENANCE	248,268	78,576	144,245	25,447
c DUES & SUBSCRIPTIONS	124,599	3,067	121.349	183

68,297

25,117

38,927,260

4,318

590

32,782,199

62,815

24,527

5,627,427

1,164

517,634

Form **990** (2019)

d MEALS & ENTERTAINMENT

25 Total functional expenses. Add lines 1 through 24e

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).

e All other expenses

Form 990 (2019)

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Liabilities 22

Fund Balances

ō 29

Assets 30 Investments—program-related. See Part IV, line 11 .

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

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here ▶

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

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

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

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

Retained earnings, endowment, accumulated income, or other funds

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

Intangible assets . .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances .

Total liabilities and net assets/fund balances

1 0111	1 990	(2019)					Page II
Р	art X	Balance Sheet					_
		Check if Schedule O contains a response or not	e to an	y line in this Part IX	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			5,313,358	1	8,047,876
	2	Savings and temporary cash investments .		[823,646	2	0
	3	Pledges and grants receivable, net			3,362,529	3	10,254,181
	4	Accounts receivable, net		10,409,038	4	472,602	
	5 6	Loans and other payables to any current or form key employee, creator or founder, substantial c entity or family member of any of these persons Loans and other receivables from other disquali section 4958(f)(1)), and persons described in se	ontribu s . fied pe	tor, or 35% controlled		5	
S	7	Notes and loans receivable, net			69,550	7	59,242
ssets	8	Inventories for sale or use				8	
ASS	9	Prepaid expenses and deferred charges			222,559	9	435,164
•	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,003,441			
	ь	Less: accumulated depreciation	10b	2,258,652	581,139	10c	744,789
	11	Investments—publicly traded securities .			212,525,703	11	263,337,833
	12	Investments—other securities. See Part IV, line	11 .		15,694,239	12	80,617,945

13

14 15

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21

22 23

24

25

26

27

28

29

30

31

32

33

363,969,632

567,929

504.669

210.064

13,282,209

176.297

390.946

15.132.114

158,345,177

190,492,341

348,837,518

363,969,632

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249,001,761

710,383

352.487

5.003.842

16,073,789

148,011

1,547,298

23.835.810

129,304,278

95,861,673

225,165,951

249,001,761

of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c

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

Yes

3h

Nο

Form 990 (2019)

Audit Act and OMB Circular A-133? 3a

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

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

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

Additional Data

Software ID:

Software Version:

EIN: 74-6065414

Name: SAN ANTONIO AREA FOUNDATION

Form 990 (2019)

Form 990, Part III, Line 4a:

THE SAN ANTONIO AREA FOUNDATION IS A COMMUNITY FOUNDATION WHICH CONSISTS OF TRUSTS AND FUNDS CONTRIBUTED BY INDIVIDUALS, CORPORATIONS AND PUBLIC AGENCIES TO BENEFIT BEXAR COUNTY AND CERTAIN SOUTH TEXAS COUNTIES. THE INDIVIDUAL FUNDS AND TRUSTS MAKE CHARITABLE CONTRIBUTIONS AS SPECIFIED IN THEIR GOVERNING INSTRUMENTS.

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation nsation

16,577

12,706

1,622

0

0

21,625

21,375

146,930

135,916

127,465

Х

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

ARENDA BURNS

APRIL HANSARD

PATRICIA MEJIA

DEVELOPME

CONTROLLER

ALEX PEREZ

DIRECTOR

JOHN HAYES

IMMEDIATE PAST CHAIR

VP OF HUMAN RESOURCES AND ORGANIZATIONAL

VP OF COMMUNITY ENGAGEMENT AND IMPACT

	week (list any hours					office ustee		from the organization	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
REBECCA BRUNE COO (UNTIL 8/19/19)	40.00			х				398,599	0	16,029
MARJORIE FRENCH PRESIDENT/CEO	8.00 40.00 8.00			х				270,808	0	121
REBECCA HELTERBRAND VP OF STRATEGY AND INNOVATION	40.00 8.00			х				188,475	0	17,701
LYNDA CABELL CFO	40.00 8.00			×				196,164	0	5,886
LISA BRUNSVOLD VP OF DEVELOPMENT AND DONOR SERVICES	40.00 8.00			х				150,430	0	15,808

			х		188,475	I
VP OF STRATEGY AND INNOVATION	8.00					
LYNDA CABELL	40.00					
CFO	8.00		Х		196,164	
LISA BRUNSVOLD	40.00					
VD OF DEVELOPMENT AND DONOR CERVICES			X		150,430	I

40.00

8.00 40.00

8.00 40.00

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1.00 1.00

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) organization organizations from the any hours

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

PAST CHAIR

JANE PHIPPS

LUIS DE LA GARZA

JANIE BARRERA

HAROLD BERG CPA

LAURA EHRENBERG-CHESLER

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

	any nours	and	a dir	ecto		ustee		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
THEODORE THEO GUIDRY II CPA CHAIR	1.00	Х		x				0	20,125	0	
MICHELLE R SCARVER CPA PFS VICE CHAIR	1.00	Х		х				0	0	0	
JAMES D DARRYL BYRD SECRETARY	1.00	Х		х				0	0	0	
GENERAL JAMES T HILL	1.00			v				0	0	0	

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VICE CHAIR	1.00					
JAMES D DARRYL BYRD	1.00					
		Χ	Χ		0	
SECRETARY	1.00					
GENERAL JAMES T HILL	1.00					
	•••••	Χ	Х		0	
TREASURER	1.00					
MARIE SMITH	1.00					
		X			0	

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and Independent Contractors (A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Average Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other ensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	week (list any hours					office ustee)		from the organization	from related organizations	compensation from the
	for related organizations below dotted line)		Institutional Trustee	1 ()	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DAVID KOMET DIRECTOR	1.00	Х						0	0	0
ADENA WILLIAMS LOSTON PHD DIRECTOR	1.00	X						0	0	0
BRAD PARMAN DIRECTOR	1.00	Х						0	0	0

ADENA WILLIAMS LOSTON PHD	1.00				0	C	
DIRECTOR	1.00	,				3	
BRAD PARMAN	1.00				0	C	
DIRECTOR	3.00	^			١	0	

DIRECTOR	1.00						
BRAD PARMAN	1.00	x			0	0	
DIRECTOR	3.00						
MATTHEW C REEDY	1.00	V					

	1.00						
BRAD PARMAN	1.00						
		X			1 0	l o	
DIRECTOR	3.00	,,,				-	
MATTHEW C REEDY	1.00						
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1.00 1.00

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DIRECTOR

DIRECTOR

HARRY W WOLFF JR

DIRECTOR	1.00	^			J	0	,	_
BRAD PARMAN	1.00				0	C		_ n
DIRECTOR	3.00				J	,		_
	1.00							_

		X			1 0	l o	1 0
DIRECTOR	3.00						
MATTHEW C REEDY	1.00	V					
DIRECTOR (UNTIL 10/03/19)	1 00	X			٥	0	0

0

HATTHEW CREED!		Х			0	0	
DIRECTOR (UNTIL 10/03/19)	1.00						
BDIICE TILLEV	1.00						

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9349331809705				
SC		ULE A	- Dublic 4	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047			
	m 99		Complete if the or	rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019			
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection			
Nam	e of th	nie Service he organiza O AREA FOUND					Employer identific	ation number			
SAN A	INTOINI	J ARLA TOUNL	AIION				74-6065414				
	rt I		for Public Charity State				See instructions.				
1 1	rganiz		a private foundation because onvention of churches, or as	•			(A)(:)				
		,	,				. , . ,				
2			scribed in section 170(b)(,						
3		·	or a cooperative hospital serv	_			-				
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's			
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170			
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).				
7	✓		ation that normally receives (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the genera	al public described in			
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi).	(Complete Part I	I.)					
9			ural research organization de rant college of agriculture. S					ege or university or a			
10		from activit investment	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to ceres taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross			
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	See section 509	(a)(4).				
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a				
а		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	appoint or elect a majo							
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar							
С		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its			
d		Type III n	on-functionally integrated integrated integrated. The organization (s). You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar				
е			box if the organization receiver or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally			
f	Enter	the number	of supported organizations				<u> </u>				
g			ing information about the su	· · · · · · · · ·	т'		Γ	T			
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
Tota		l. P. '	tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9				

E	art II Support Schedule for						
	(Complete only if you chair if the organization failed						nder Part III.
	Section A. Public Support	a to quality affac	i the tests listed	a below, please t	complete rait II.	1.)	
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received. (Do not	62,490,983	29,031,061	31,152,385	36,427,642	39,675,661	198,777,732
2	include any "unusual grant.") 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	62,490,983	29,031,061	31,152,385	36,427,642	39,675,661	198,777,732
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).						79,021,524
6	Public support. Subtract line 5						119,756,208
	from line 4. Section B. Total Support		1				
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	(or fiscal year beginning in) ► Amounts from line 4.	62,490,983	29,031,061	31,152,385	36,427,642	39,675,661	198,777,732
8		6,502,286	3,545,561	5,679,323	4,533,401	15,501,533	35,762,104
9	Net income from unrelated business activities, whether or not the business is regularly carried on					482,686	482,686
10	or loss from the sale of capital assets (Explain in Part VI.).	85,783	1,254,468	3,924,291	24,521	71,217	5,360,280
11	10						240,382,802
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is f						nization,
	check this box and stop here					▶ ⊔	
	Section C. Computation of Publi	• •	_				
	Public support percentage for 2019 (li					14	49.820 %
	Public support percentage for 2018 So a 33 1/3% support test—2019. If the					15	57.240 %
	and stop here. The organization qua 33 1/3% support test—2018. If the	lifies as a publicly :	supported organiza	ation			. ▶ ☑
17	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2019. If the or on meets the "facts	ganization did not s-and-circumstance	check a box on lin es" test, check this	e 13, 16a, or 16b, box and stop he	and line 14 re. Explain	_
Ŀ	organization	st—2018. If the o	rganization did not facts-and-circumst	t check a box on li cances" test, check	ne 13, 16a, 16b, o this box and stop	r 17a, and line here.	▶ □
18	supported organization Private foundation. If the organizat	ion did not check a	a box on line 13, 1	6a, 16b, 17a, or 1	7b, check this box	and see	
	instructions						▶ 🗀

Р	art III Support Schedule for								
	(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.)								
S	tne organization falls to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)				
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)		
	(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.").								
2	Gross receipts from admissions,								
	merchandise sold or services								
	performed, or facilities furnished in any activity that is related to the								
	organization's tax-exempt purpose								
3	Gross receipts from activities that are								
	not an unrelated trade or business								
4	under section 513 Tax revenues levied for the								
•	organization's benefit and either paid								
_	to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5								
7a	Amounts included on lines 1, 2, and								
L	3 received from disqualified persons Amounts included on lines 2 and 3								
D	received from other than disqualified								
	persons that exceed the greater of								
	\$5,000 or 1% of the amount on line 13 for the year.								
c	Add lines 7a and 7b								
8	Public support. (Subtract line 7c								
	from line 6.)								
Se	ection B. Total Support		1				Г		
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
9	Amounts from line 6								
10a	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties and income from similar sources.								
b	Unrelated business taxable income								
	(less section 511 taxes) from								
	businesses acquired after June 30, 1975.								
С	Add lines 10a and 10b.								
11	Net income from unrelated business								
	activities not included in line 10b,								
	whether or not the business is regularly carried on.								
12	Other income. Do not include gain or								
	loss from the sale of capital assets								
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,								
13	11, and 12.).								
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>		
	check this box and stop here						▶ ⊔		
	ection C. Computation of Public S			! (6))		15			
15									
16	6 Public support percentage from 2018 Schedule A, Part III, line 15								
	Investment income percentage for 201			line 13 column (f	:))	17			
17 10	Investment income percentage for 201	-		-		17			
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not		
	more than 33 1/3%, check this box and s								
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the								
ט	not more than 33 1/3%, check this box	-			•		_		
20		-	-						
	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 🕨 🗌								

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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 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

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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 Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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

4b supervised by or in connection with its supported organizations. 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 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 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

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. 6 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) . 7

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

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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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.
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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,"

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

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			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?			
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).			
_				
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		
S	ection 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 instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	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.	2a		
ı	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.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O			. Part VIV See			
	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1					
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1 b					
C	Fair market value of other non-exempt-use assets	1c					
d	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					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
	Section C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6					

	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	

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to who details in Part VI). See instructions	sive (provide		
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions if any for years prior to 2019			

7 Total annual distributions. Add lines 1 through 6.						
Distributions to attentive supported organizations to who details in Part VI). See instructions						
9 Distributable amount for 2019 from Section C, line 6	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						

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			
 Carryover from 2014 not applied (see instructions) 			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	The state of the s	·	

c From 2016		
d From 2017		
e From 2018		
Total of lines 3a through e		
g Applied to underdistributions of prior years		
n Applied to 2019 distributable amount		
Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
Applied to 2019 distributable amount		
Remainder. Subtract lines 4a and 4b from 4.		

instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		

C Remainder, Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
b Excess from 2016		
c Excess from 2017		

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

d Excess from 2018.

e Excess from 2019.

Additional Data

Software ID:

Software Version: FIN: 74-6065414

Name: SAN ANTONIO AREA FOUNDATION

Schedule A (Form 990 or 990-EZ) 2019

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).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

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

As Filed Data -

DLN: 93493318097050

2019

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

	me of the organization I ANTONIO AREA FOUNDATION				Employe	er identification	number
SAI	NANTONIO AREA FOUNDATION				74-6065	414	
Ρā	rt I Organizations Maintaining Donor Adv				or Accour	ıts.	
	Complete if the organization answered "Y				(1.)	. F d d	
	Total number at and of year	(a) Dono	or advi	sed funds	+ ' '	Funds and other	accounts
	Total number at end of year			19:	+		
	Aggregate value of contributions to (during year)			33,263,62			
•	Aggregate value of grants from (during year) Aggregate value at end of year			21,436,22			
	,			102,202,14			
•	Did the organization inform all donors and donor advisorganization's property, subject to the organization's e						Yes 🗌 No
5	Did the organization inform all grantees, donors, and or charitable purposes and not for the benefit of the dono private benefit?	or or donor advisor,	or for	any other purpose		mpermissible	Yes □ No
Pa	rt II Conservation Easements. Complete if the organization answered "Y	es" on Form 990,	Part	IV, line 7.			
	Purpose(s) of conservation easements held by the org	anization (check all	that ap	oply).			
	Preservation of land for public use (e.g., recreati	on or education)		Preservation of a	n historically	y important land a	area
	☐ Protection of natural habitat			Preservation of a	certified his	storic structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held easement on the last day of the tax year.	a qualified conserva	tion co	ntribution in the fo		servation	of the Veer
а	Total number of conservation easements				2a ''	iela at the Lila t	Ji the real
b	Total acreage restricted by conservation easements .				2b		
c	Number of conservation easements on a certified histo				2c		
d	Number of conservation easements included in (c) acq structure listed in the National Register				2d		
1	Number of conservation easements modified, transfer tax year ▶	red, released, exting	juished	d, or terminated by	the organiz	zation during the	
Ļ	Number of states where property subject to conservat	ion easement is loca	ited >				
5	Does the organization have a written policy regarding and enforcement of the conservation easements it hol	the periodic monitor	ing, in	spection, handling 	of violation	S,	□ No
•	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of v	iolatio	ns, and enforcing o	conservation		
,	Amount of expenses incurred in monitoring, inspecting	g, handling of violati	ons, ar	nd enforcing conse	rvation ease	ements during the	e year
3	Does each conservation easement reported on line 2(or and section 170(h)(4)(B)(ii)?	d) above satisfy the	require	ements of section :	170(h)(4)(B	^^	□ No
)	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the	nservation easement	s in its	revenue and expe			□ N0
aı	the organization's accounting for conservation easement III Organizations Maintaining Collection	ents.					
	Complete if the organization answered "Y If the organization elected, as permitted under SFAS 1	es" on Form 990,	Part	IV, line 8.			
.a	art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	or public exhibition, e ancial statements th	educat at desc	ion, or research in cribes these items.	furtherance	of public service	2,
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for pu following amounts relating to these items:	116 (ASC 958), to re blic exhibition, educ	port ir ation,	its revenue stater or research in furtl	ment and ba nerance of p	alance sheet work public service, pro	s of art, ovide the
((i) Revenue included on Form 990, Part VIII, line 1				•	\$	0
	ii)Assets included in Form 990, Part X						
2	If the organization received or held works of art, histo following amounts required to be reported under SFAS	rical treasures, or ot	her sir	milar assets for fina			
а	Revenue included on Form 990, Part VIII, line 1	, ,	_		•	· \$	0
h	Assets included in Form 990, Part X						

Cat. No. 52283D

Schedule D (Form 990) 2019

		(Form 990) 2019									Page 2
	31111	Organizations M									
3		the organization's acq (check all that apply):		nd other records		any of t	he foll	lowing that are	e a significant	use of its c	ollection
а	✓	Public exhibition			d		Loan c	or exchange p	rograms		
b	✓	Scholarly research			е		Other				
С	✓	Preservation for future	e generations								
4	Provid Part	de a description of the XIII.	organization's collect	ions and explain	how the	ey furthe	er the	organization's	exempt purp	ose in	
5		g the year, did the org s to be sold to raise fur								☐ Yes	☑ No
Pai	t IV	Escrow and Cust Complete if the or X, line 21.			rm 990	, Part I	۷, lin	ne 9, or repo	rted an amo		
1 a		e organization an agent ded on Form 990, Part I								☐ Yes	☑ No
b	Ι Ε "∀ε	es," explain the arrange	ement in Part VIII and	d complete the fo	allowing	table:				Amount	
c		nning balance		•	_			1c		- Inounc	
d	_	ions during the year .						1d			
е		butions during the year									
f		ng balance									
2a	Did th	he organization include	an amount on Form	990, Part X, line	21, for	escrow	or cus	todial account	liability?		□ No
b		es," explain the arrange								_	
Pa	rt V	Endowment Fund					'	<u> </u>			
		Complete if the or									
1.	Dogina	ing of year balance .		a) Current year 80,500,062		rior year 102,465,		c) Two years bad 279,200,9		ears back (e 5,338,772	71,271,930
	_	outions	· · · · ⊢	11,217,923		102,403,	003	287,134,4		3,469,139	654,192
		/estment earnings, gair	as and losses	25,887,649		-5,728,	016	13,311,1		5,135,256	-2,991,649
		or scholarships	15, 4110 105565	4,727,267		17,307,		13,748,0		2,873,988	
		expenditures for facilitie	es —	., ,						,,,,,,,,,,	
Ī		ograms				-1,070,	073	459,588,7	' 00 2	2,868,189	2,595,701
		istrative expenses .		1,578,052				3,844,7			
g	End of	year balance		111,300,315		80,500,	062	102,465,0	063 279	9,200,990	66,338,772
2		de the estimated perce	-	•	e (line 1	g, colum	nn (a))) held as:			
а		d designated or quasi-e		560 %							
b	Perm	anent endowment 🟲	90.570 %								
C	Temp	porarily restricted endo	wment ► 8.770 °	%							
		percentages on lines 2a									
3a	orgar	here endowment funds nization by:	·	n of the organiza	tion that	t are he	ld and	l administered	for the		Yes No
	. ,	nrelated organizations					•			3a(i	
h		elated organizations .es" on 3a(ii), are the re								3a(i . 3b	- +
4		ribe in Part XIII the inte					•			. 30	165
Pai	t VI	Land, Buildings, Complete if the ore	and Equipment.				[V, lin	ne 11a. See I	Form 990. Pa	art X. line	10.
	Descri	iption of property	(a) Cost or other b		t or other			(c) Accumulate		, , , , , , , , , , , , , , , , , , , 	Book value
			(investment)								
1a	Land										

150,000

543,815

1,213,257

1,096,369

b Buildings

 ${f c}$ Leasehold improvements

 \boldsymbol{d} Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

e Other . .

856,831

381,463

1,020,358

150,000

356,426

162,352

76,011

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Fo	orm 990. Part IV line	e 11b.See Form 990 I	Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial derivatives			
(2) Closely-held equity interests	72.451.044		F
	72,451,044		F
(B) MINERAL INTERESTS (C) DARTNERSHIR INVESTMENTS	3,035,774		F
(C) PARTNERSHIP INVESTMENTS	4,418,127		
(D) REAL ESTATE (E)	713,000		F
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	80,617,945		
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Fo	orm 990, Part IV, line	e 11c. See Form 990,	Part X, line 13.
(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX Other Assets. Complete if the organization answered 'Yes' on For	rm 990, Part IV, line	11d. See Form 990, Pa	
(a) Description			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X Other Liabilities. Complete if the organization answered 'Yes' on For	rm 990. Part IV. line	11e or 11f.See Form	990. Part X. line 25.
1. (a) Description of lia		110 01 1111000 101111	(b) Book value
(1) Federal income taxes (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)		•	390,946
2. Liability for uncertain tax positions. In Part XIII, provide the text of organization's liability for uncertain tax positions under FIN 48 (ASC 74)			

Schedule D (Form 990) 2019

Page 4

1	lotal revenue, gains, and other s	upport per audited financial statements .		1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on i	nvestments	2a		
b	Donated services and use of facili	ties	2b		
C	Recoveries of prior year grants		2c	7	
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.) .		4b		
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12.)		5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Par		Return.	
1	Total expenses and losses per au	dited financial statements		1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25:			
а	Donated services and use of facili	ties	2a		
b	Prior year adjustments		2b		
c	Other losses		2c		
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.) .		4b		
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4	lc. (This must equal Form 990, Part I, line 18	.)	5	
Pai	t XIII Supplemental Info	rmation			
Prov	vide the descriptions required for P lines 2d and 4b; and Part XII, lines	art II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b. Also complete this part to provide	4; Part IV, lines 1b and 2b; Pare any additional information.	t V, line 4;	Part X, line 2; Part
	Return Reference		Explanation		
See A	Additional Data Table				

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 74-6065414 Name: SAN ANTONIO AREA FOUNDATION

ORDED AT A NOMINAL VALUE OF \$1 IN THE CONSOLIDATED STATEMENT OF FINANCIAL POSITION.

Supplemental Information			

Return Reference Explanation PART III, LINE 4: THE FOUNDATION SERVES AS TRUSTEE OF A TRUST WHICH OWNS A BUILDING WHICH HOUSES AN ART SCHO OL AND ARTWORK COLLECTION. THIS COLLECTION IS PRESERVED, UNENCUMBERED, AND CANNOT BE DISPO SED OF FOR FINANCIAL GAIN. THE FOUNDATION RECORDS ADDITIONS AND DELETIONS OF THE COLLECTIO N IN THE STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS. AS SUCH, THE COLLECTION IS REC

Supplemental Information	
Return Reference	Explanation
PART IV, LINE 2B:	IN ACCORDANCE WITH ACCOUNTING STANDARDS, IF A NOT-FOR-PROFIT ORGANIZATION ESTABLISHES A FU ND AT A COMMUNITY FOUNDATION WITH ITS OWN FUNDS AND SPECIFIES ITSELF AS THE BENEFICIARY OF THAT FUND, THE COMMUNITY FOUNDATION MUST ACCOUNT FOR THE TRANSFER OF SUCH ASSETS AS A LIA BILITY. THE FOUNDATION REFERS TO SUCH FUNDS AS AGENCY FUNDS. THE FOUNDATION MAINTAINS LEGA L OWNERSHIP OF AGENCY FUNDS AND, AS SUCH, CONTINUES TO REPORT THE FUNDS AS ASSETS OF THE FOUNDATION. HOWEVER, IN ACCORDANCE WITH THIS STANDARD, A LIABILITY HAS BEEN ESTABLISHED FOR THE FAIR MARKET VALUE OF THE FUNDS.

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4:	THE FOUNDATION'S ENDOWMENT FUNDS ARE INTENDED TO BE USED FOR GRANT MAKING PURPOSES IN PERPETUITY.

È

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THE ASC 740 PROVIDES GUIDANCE FOR HOW UNCERTAIN TAX POSITIONS SHOULD BE RECOGNIZED, MEASUR ED, DISCLOSED AND PRESENTED IN THE FINANCIAL STATEMENTS. THIS REQUIRES THE EVALUATION OF T AX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE FOUNDATION'S TAX RETURN TO DETERMINE WHETHER THE TAX POSITIONS ARE MORE-LIKELY-THAN-NOT OF BEING SUSTAINED WHEN CHALLENGED OR WHEN EXAMINED BY THE APPLICABLE TAX AUTHORITY. TAX POSITIONS NOT DEEME D TO MEET THE MORE LIKELY-THAN-NOT THRESHOLD WOULD BE RECORDED AS A TAX ASSET OR LIABILITY IN THE CURRENT YEAR. MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX P

OSITIONS.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493318097050 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** SAN ANTONIO AREA FOUNDATION 74-6065414 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (such as, program service, describe for and investments region and independent fundraising, program specific type of in the region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) See Add'l Data 3.562.132 3a Sub-total . b Total from continuation sheets to Part I . . . 3,562,132 c Totals (add lines 3a and 3b)

Schedule F (Form 990)	2019							Page 2
			inizations or Entities ceived more than \$5,0					on Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		VANCOUVER, BC, CANADA	SUPPORT THE CREATIVE WORK OF ALANA LEVANDOSKI'S MUSICAL COMPOSITION	7,360	CHECK	C	ON/A	N/A
I					<u> </u>			
	<u> </u>				<u> </u>		<u> </u>	
			l above that are recogni: unsel has provided a sec				-	1
3 Enter total numb	er of other orc	janizations or entitie	es	<u></u>	<u></u>	<u> </u>	<u>*</u>	0

ype of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships		
	(see Instructions for Form 8865)	\square Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐ Yes	✓ No

Schedule F (Form 9	990) 2019 Page 5
Prov amoi meth any a	Demental Information de the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; unts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide additional information. See instructions. 5, Supplemental Information
Return Reference	Explanation
PART I, LINE 2:	THE FOUNDATION VERIFIES THE GRANTEE'S ELIGIBILITY FOR THE GRANTS/ASSISTANCE, INCLUDING 501(C)(3) STATUS OR ITS EQUIVALENT.

990 Schedule F, Supplemental Information Return Reference Explanation

PART III ACCOUNTING METHOD:

Additional Data

CENTRAL AMERICA AND THE

CARIBBEAN

NORTH AMERICA

Software ID: Software Version:

EIN: 74-6065414

Name: SAN ANTONIO AREA FOUNDATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of	(c) Number of	(a) Activities condu
	offices in the	employees or	in region (by type)
	region	agents in	fundraising, progra
		region	services, grants t

nducted

(i.e.,

(e) If activity listed in (d) is a program service, describe specific type of

(f) Total expenditures for region

(h) Number of (c) Number of (d) Activities con (a) Degion

ram

service(s) in region

recipients located in the region)

3,554,772

7,360

0

0 INVESTMENTS

IN/A

IN/A

0 IGRANTS TO RECIPIENTS

LOCATED IN REGION

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493318097050 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization SAN ANTONIO AREA FOUNDATION 74-6065414 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Cat. No. 50083H

Schedule G (Form 990 or 990-EZ) 2019

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

Pa	rt II Fundraising Events. Comple				
	than \$15,000 of fundraising e gross receipts greater than \$5		gross income on Form	990-EZ, lines I and t	ob. List events with
	<u> </u>	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		RENAISSANCE WITH THE STARS (event type)	(event type)	(total number)	col. (c))
Reversie					
	1 Gross receipts	223,639	2,793		226,432
	2 Less: Contributions	179,974	2,344		182,318
	3 Gross income (line 1 minus line 2)	43,665	449		44,114
	4 Cash prizes				
Se.	5 Noncash prizes				
ens	6 Rent/facility costs	19,369	762		20,131
찣	7 Food and beverages	40,180	964		41,144
Direct Expenses	Entertainment Other direct expenses	29,924	2,735		32,659
۵	9 Other direct expenses 10 Direct expense summary. Add lines 4 t	brough Q in column (d)			02.024
	11 Net income summary. Subtract line 10	2 ()			93,934
Par	t III Gaming. Complete if the organical complete in the organical		s" on Form 990. Part I	V. line 19, or reported	-49,820 i more than \$15,000
Revenue	on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Rev	1. Crace revenue				
Sé	1 Gross revenue				
Direct Expense	2 Cash prizes				
页	3 Noncash prizes				
rect	4 Rent/facility costs				
۵	5 Other direct expenses				
		☐ Yes <u>%</u>	☐ Yes <u>%</u>	☐ Yes %	
	6 Volunteer labor	☐ No	☐ No	☐ No	
	7 Direct expense summary. Add lines 2 t	hrough 5 in column (d)			
	8 Net gaming income summary. Subtract	t line 7 from line 1, colum	n (d)	•	
9 a b	Enter the state(s) in which the organization licensed to conduct gas If "No," explain:	aming activities in each of	these states?		Yes No
L0a	Were any of the organization's gaming lic	enses revoked, suspende	d or terminated during the		
b	If "Yes," explain:				∐Yes ∐No

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ing activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· 🗆 Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$ $ angle$	anization ▶ \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address •						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	•		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spen	Ī	□ 1es		
		pt activities during the tax year 🕨	•				
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

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

DLN: 93493318097050

Open to Public

Inspection

nternal Revenue Service ame of the organization						Employer identific	cation number
AN ANTONIO AREA FOUNDATIO	N					74-6065414	acion number
Part I General Inform	ation on Grants	and Assistance				74 0003414	
Does the organization main the selection criteria used to	ntain records to sub	stantiate the amount of				e, and	☑ Yes ☐ N
Describe in Part IV the organic							
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(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) See Additional Data							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
Enter total number of sectiEnter total number of othe							315 10

(Form 990)

Department of the

Treasury

(1) HARDSHIP GRANTS

(3)

(3)

(4)

(7)

Part IV

PART I, LINE 2:

INDIVIDUALS:

Return Reference

EXPLANATION

(2) SCHOLARSHIP GRANTS

ADOPTION OF ASU 2018-08 - SEE PART IV

Schedule I (Form 990) 2019

882

Part III can be duplicated if additional space is needed

Explanation

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

(c) Amount of

cash grant

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

932,608

1,254,914

-1,452,750

FUNDS ARE EXPENDED IN FULL. THE EVALUATIONS ARE REVIEWED BY FOUNDATION STAFF.

\$4.370.121 IN SCHOLARSHIPS AND GRANTS PAYABLE TO CONDITIONAL LIABILITIES.

0 N/A 0 N/A 0 N/A

THE FOUNDATION FIRST VERIFIES THE GRANTEE'S ELIGIBILITY FOR THE GRANTS/ASSISTANCE, INCLUDING 501(C)(3) STATUS OR ITS EQUIVALENT. IN ADDITION,

ASU 2018-08 WAS ADOPTED ON THE MODIFIED-PROSPECTIVE BASIS. THE ADOPTION OF THIS ASU INCREASED THE CHANGE IN NET ASSETS BY RECLASSIFYING

ALL RECIPIENTS THAT RECEIVE A COMPETITIVE GRANT IN EXCESS OF \$15,000 ARE REQUIRED TO COMPLETE AN EVALUATION EVERY SIX MONTHS UNTIL THE GRANT

(d) Amount of

noncash assistance

(e) Method of valuation (book,

FMV, appraisal, other)

N/A

N/A

N/A

Page 2

(f) Description of noncash assistance

Schedule I (Form 990) 2019

(5)

PART III, GRANTS AND OTHER

ASSISTANCE TO DOMESTIC

Additional Data

A KITTY'S PURRSUIT OF

SPRING BRANCH, TX 78070

ABANDONED PET PROJECT

HAPPINESS PO BOX 1011

PO BOX 2413

BOERNE, TX 78006

Software ID: Software Version:

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

501(C)(3)

501(C)(3)

EIN: 74-6065414

Name: SAN ANTONIO AREA FOUNDATION

47-2566562

47-1067342

(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 non-cash assistance	(h) Purpose of grant or assistance

14,000

25,000

O N/A

O N/A

N/A

N/A

URGENT HVAC SYSTEM

OPERATING EXPENSES

FOR GENERAL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 82-4695428 501(C)(3) 6.798 O N/A IN/A FOR GENERAL AGARITA CHAMBER PLAYERS 117 INSLEE AVE OPERATING EXPENSES

SAN ANTONIO, TX 78209 74-2422589 501(C)(3) 37.500 O N/A N/A TO SUPPORT TOOL ALAMO COLLEGES SCHOLARSHIPS FOR FOUNDATION DISTRICT OFFICE OF LAUTO MECHANIC INSTITUTIONAL ISTUDENTS ADVANCEMENT 1819 N MAIN AVENUE

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

SAN ANTONIO, TX 78212

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

ALAMO HEIGHTS SCHOOL FOUNDATION 7101 BROADWAY SAN ANTONIO, TX 78209	23-7282478	501(C)(3)	5,000	0	N/A		FOR GENERAL OPERATING EXPENSES
ALAMO PUBLIC	74-2461534	501(C)(3)	26,865	0	N/A	N/A	FOR GENERAL

OPERATING EXPENSES TELECOMMUNICATIONS COUNCIL PO BOX 9

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

SAN ANTONIO, TX 78291

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

O N/A

N/A

FOR GENERAL

ALPHA HOME PO BOX 15440 SAN ANTONIO.TX 78212	74-1668144	501(C)(3)	9,307	0	N/A	FOR GENERAL OPERATING EXPENSES
5/11/11/01/10, 1/1 /0212						

7.500

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

501(C)(3)

83-0998314

ALPINE CHAPEL

PO BOX 2701 TELLURIDE, CO 81435

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

ANTONIO AREA CHAPTER

3642 E HOUSTON STREET

SAN ANTONIO, TX 78219

AMERICAN RED CROSS ATTN OFFICE OF THE GENERAL	53-0196605	501(C)(3)	12,601	0	N/A	TO ASSIST THE VICTIMS OF THE JAPAN
COUNSEL						EARTHQUAKE AND
TE 2025 E STREET NW						PACIFIC TSUNAMI
WASHINGTON, DC 20006						

VICTIMS OF THE JAPAN

EARTHQUAKE AND

PACIFIC TSUNAMI

501(C)(3) 65,000 O N/A N/A TO ASSIST THE AMERICAN RED CROSS SAN 53-0196605

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

11300 NACOGDOCHES ROAD

SAN ANTONIO, TX 78217

AMERICAN SUNRISE - A NONPROFIT COMMUNITY	74-3001093	501(C)(3)	16,737	0	N/A	TO SUPPORT THE NELSON AND TRACY
BUILDER						WOLFF
1002 N FLORES STREET						COMMEMORATIVE
SAN ANTONIO TX 78205						ISTATUE

501(C)(3) 84,915 O N/A N/A ANIMAL DEFENSE LEAGUE OF 74-6002033 ANIMAL DEFENSE TEXAS LEAGUE OF TEXAS

ISPAY/NEUTER

PROGRAM

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

				_			
							OWNERS
							LOW INCOME PET
SAN ANTONIO, TX 78270							SERVICES TO LOCAL
PO BOX 701268							SPAY/NEUTER
ANIMAL RESOURCE CENTER	74-2846005	501(C)(3)	8,900	0	N/A	N/A	TO PROVIDE

ANTONIAN COLLEGE 74-1492576 501(C)(3) 126,666 O N/A IN/A ITO ASSIST WITH PREPARATORY HIGH SCHOOL REMODELING OF THE 6425 WEST AVENUE ISCHOOL

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

SAN ANTONIO, TX 78213

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 74-1009740 501(C)(3) 123.338 O N/A IN/A FOR GENERAL ARCHDIOCESE OF SAN ANTONIO OPERATING EXPENSES 2718 WEST WOODLAWN

0 N/A

IN/A

FOR GENERAL

OPERATING EXPENSES

25.000

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

501(C)(3)

SAN ANTONIO, TX 78228
ARTHUR NAGEL COMMUNITY

CLINIC INC

PO BOX 519 BANDERA, TX 78003 77-0697361

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

O N/A

N/A

FOR GENERAL

ARTPACE SAN ANTONIO INC 445 NORTH MAIN AVENUE	04-3757857	501(C)(3)	38,624	0	N/A	N/A	ARTPACE SUSTAINABILITY
SAN ANTONIO, TX 78205							STRATEGIC PLAN

60,000

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

501(C)(3)

ASSUMPTION SEMINARY

2600 WEST WOODLAWN SAN ANTONIO, TX 78228 74-6003637

(b) EIN (e) Amount of non-(f) Method of valuation (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other)

(a) Description of

ISAN ANTONIO'S

COMPREHENSIVE PLAN

ATASCOSA ANIMAL ALLIES	82-3068046	501(C)(3)	15,000	0	N/A	1 7	FOR GENERAL
INC							OPERATING EXPENSES
307 2ND STREET							
PLEASANTON, TX 78064							

N/A AVANCE SAN ANTONIO INC 74-1769114 501(C)(3) 106.000 O N/A TRIPLE P PROGRAM AS 903 BILLY MITCHELL BLVD IPART OF THE CITY OF

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

SUITE 100

SAN ANTONIO, TX 78226

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

AWAKENINGS INC PO BOX 8409 HOUSTON, TX 77288	72-1601093	501(C)(3)	5,000	0	N/A	N/A	TO SUPPORT GENERAL EXPENSES

JOHNSON CITY, TX 78636

BAMBERGER RANCH PRESERVE 30-0041245 501(C)(3) 13.000 O N/A N/A FOR GENERAL 2341 BLUE RIDGE DRIVE OPERATING EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) BARSHOP JEWISH COMMUNITY 74-1152783 501(C)(3) 7.200 Oln/A N/A FOR GENERAL TING EXPENSES

CENTER OF SAN ANTONIO 12500 NW MILITARY HWY SAN ANTONIO, TX 78231			,				OPERATING EXF
BETHEL HORIZONS	23-7017755	501(C)(3)	50.000	0	N/A	N/A	FOR GENERAL

FOUNDATION INC OPERATING EXPENSES

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

312 WISCONSIN AVENUE MADISON, WI 53703

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) BEXAR COUNTY FAMILY 73-1723464 501(C)(3) 5,846 O N/A N/A FOR GENERAL TING EXPENSES

BEYOND THE LIGHT	47-3840669	501(C)(3)	5.000	0	N/A	N/A	FOR GEN
JUSTICE CENTER FOUNDATION 126 E NUEVA 2ND FLOOR SAN ANTONIO, TX 78204							OPERATII

607 PIEDMONT AVENUE SAN ANTONIO, TX 78203

ENERAL OUTREACH PROJECT OPERATING EXPENSES

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

BLESSED SACRAMENT ACADEMY 1135 MISSION ROAD SAN ANTONIO, TX 78210	74-1369411	501(C)(3)	16,500	0	N/A	N/A	PARENTS' ACADEMY
BLUE SKY EDUCATIONAL	45-5630226	501(C)(3)	9.305	0	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

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

DALLAS, TX 75201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) BOY SCOUTS OF AMERICA -22-1576300 501(C)(3) 26,250 O N/A N/A UNITED WAY GAP

ALAMO AREA COUNCIL 2226 NW MILITARY HWY							FUNDIN
SAN ANTONIO, TX 78213							
BOYS & GIRLS CLUBS OF SAN	74-1109637	501(C)(3)	164,500	0	N/A	N/A	FOR GEN

SAN ANTONIO, TX 78204

SENERAL ANTONIO OPERATING EXPENSES 123 RALPH AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government BOYSVILLE INC 74-1207553 501(C)(3) 116.048 OIN/A N/A FOR GENERAL ING EXPENSES

PO BOX 369 CONVERSE, TX 78109		, , , ,	·		·		OPERATING EXPENSES
BRACKENRIDGE PARK CONSERVANCY	26-3416330	501(C)(3)	10,600	0	N/A	N/A	FOR GENERAL OPERATING EXPENSES

PO BOX 6311

SAN ANTONIO, TX 78209

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

O N/A

N/A

TO SUPPORT THE HARVEY F. NAITM FARLY

CHILDHOOD CAMPUS

BRADY HIGH SCHOOL	74-6003860	501(C)(1)	16,032	0	N/A	1 *	FOR GENERAL
2301 HWY 190							OPERATING EXPENSES
BRADY, TX 76825							

802.000

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

501(C)(3)

BRIGHTON CENTER

14207 HIGGINS ROAD SAN ANTONIO, TX 78217 74-2331826

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 30-0211961 501(C)(3) 42.500 0 N/A IN/A FOR GENERAL BRISCOE WESTERN ART MUSEUM OPERATING EXPENSES 210 W MARKET STREET SAN ANTONIO, TX 78205 501(C)(3) 25.250 O N/A IN/A FOR FINANCIAL CAMP ARANZAZU 74-3032285 8945 LONG POINT SUITE 200 SUPPORT TO ASSIST HOUSTON, TX 77055 CHILDREN TO ATTEND ICAMP ARANZAZU WHO

RESIDE IN BEXAR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 33-0863088 501(C)(3) 10.000 O N/A IN/A FOR GENERAL CAMPUS CRUSADE FOR

CHRIST INTERNATIONAL OPERATING EXPENSES PO BOX 628222 ORLANDO, FL 32862 CASA OF CENTRAL TEXAS 74-2403373 501(C)(3) 25.000 0 N/A IN/A FOR GENERAL OPERATING EXPENSES

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

1619 E COMMON STREET SUITE 301

NEW BRAUNFELS, TX 78130

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

307 MADRID STREET CASTROVILLE, TX 78009

CASA OF MCLENNAN COUNTY 1001 WASHINGTON AVENUE WACO, TX 76701	45-5401776	501(C)(3)	5,000	0	N/A	N/A	REMODELING OF OFFICE BUILDING
CASTROVILLE NIP & TUCK	20-3874779	501(C)(3)	8,000	0	N/A	N/A	THE LOW COST SPAY &

INFUTER PROGRAM FOR

MEDINA COUNTY

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

CATHOLIC CHARITIES	74 4400743	F04/6)/2)	70 500		N1/A	01/0	OD CANITZATION AL
INDIANAPOLIS, IN 46202							
1400 N MERIDIAN STREET							
INDIANAPOLIS							OPERATING EXPENSES
CATHOLIC ARCHDIOCESE OF	45-0608082	501(C)(3)	5,000	o	N/A	N/A	FOR GENERAL

CATHOLIC CHARITIES 74-1109743 78.5001 OIN/A IN/A IORGANIZATIONAL 501(C)(3)| ARCHDIOCESE OF SAN IDEVELOPMENT AND ANTONIO INC LEADERSHIP INITIATIVE

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

202 W FRENCH PLACE SAN ANTONIO, TX 78212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government CATHOLIC COMMUNITY 20-5917270 E01/C)/3) וחחח חד O N/A N/A TO SUPPORT THE SAN

OPERATING EXPENSES

CATHOLIC COMMONITY	20-301/3/0	301(0)(3)	70,000	U	IN/A	1197	I TO SUFFURI THE SAN
FOUNDATION							FERNANDO CATHEDRAL
111 BARILLA PLACE SUITE 101							ENDOWMENT
SAN ANTONIO, TX 78209							1

84-2654436 501(C)(3) 5.000 O N/A IN/A FOR GENERAL CELEBRATE DYSLEXIA

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

319 SANTO DOMINGO

HELOTES, TX 78023

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CENTER FOR APPLIED 82-5253554 501(C)(3) 20.000 O N/A N/A IEDUCATION -

OPERATING EXPENSES

SCIENCE AND TECHNOLOGY 200 E BASSE SUITE 201 SAN ANTONIO, TX 78209			·				OPERATING FUNDS
CENTER FOR REFUGEE	27-2787747	501(C)(3)	9,121	0	N/A	N/A	FOR GENERAL

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

SERVICES

8703 WURZBACH SUITE A-1 SAN ANTONIO, TX 78240

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) CENTRO PARTNERSHIP SAN 20-5981107 501(C)(3) 25,944 O N/A IN/A FOR GENERAL OPERATING EXPENSES ANTONIO

110 BROADWAY SUITE 230 SAN ANTONIO, TX 78205							
CHARCOT-MARIE-TOOTH ASSOCIATION	22-2480896	501(C)(3)	5,000	0	N/A	l '	SUPPORT GENERAL OPERATING EXPENSES

PO BOX 105

GLENOLDEN, PA 19036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CHAUTALIOUA INSTITUTION 16-0758844 501(0)(3) Q 7501 $\Delta / M \mid \Delta$ FOR GENERAL

PO BOX 28 CHAUTAUQUA, NY 14722	10-0738044	301(e)(3)	3,730	Ŭ	IN/A	 OPERATING EXPENSES
CHILD ADVOCATES SAN ANTONIO	74-2494625	501(C)(3)	10,522	0	N/A	FOR GENERAL OPERATING EXPENSES

ANTONIO

1956 S WW WHITE RD SAN ANTONIO, TX 78222

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

101

SAN ANTONIO, TX 78212

CHILDREN'S ASSOCIATION FOR MAXIMUM POTENTIAL PO BOX 27086 SAN ANTONIO, TX 78227	74-2095766	501(C)(3)	100,000	0	N/A	FOR GENERAL OPERATING EXPENSES
CHILDREN'S BEREAVEMENT CENTER OF SOUTH TEXAS 205 W OLMOS DRIVE SUITE	74-2828178	501(C)(3)	617,500	О	N/A	TO SUPPORT THE GIFT DEL MILAGRO CAPITAL CAMPAIGN (WITH

ICAMPUS NAMING

RIGHTS)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 74-1224362 501(C)(3) 18.000l IN/A CHILDREN'S HOSPITAL OF SAN O N/A TO BE USED FOR THE ANTONIO FOUNDATION CHILDREN'S AMBULANCE TEAM

IPROGRAM

100 NE LOOP 410 SUITE 706 SAN ANTONIO, TX 78216 74-2633697 1.250.000 IN/A CHILDSAFE CHILD ABUSE

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

501(C)(3) O N/A 7130 WEST US HWY 90 IRESOURCE SAN ANTONIO, TX 78227 IENHANCEMENT (CARE)

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

CHOSEN CARE INC	81-2872095	501(C)(3)	13,900	0	N/A	N/A	THE CHOSEN CARE
351 MAIN PLAZA			·				MENTORING & SUPPORT
NEW BRAUNFELS, TX 78130							PROGRAM

OPERATING EXPENSES

CHRIST EPISCOPAL CHURCH 74-1180188 501(C)(3) 41.318 O N/A N/A FOR GENERAL

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

510 BELKNAP PLACE SAN ANTONIO, TX 78212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 47-6105603 501(C)(3) 30.000 IN/A CINCINNATI CHILDRENS O N/A IFOR THE SEACREST

HOSPITAL MEDICAL CENTER STUDIO FELLOWSHIP POSITION PO BOX 5202 CINCINNATI. OH 45201

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

SAN ANTONIO, TX 78215

CITY EDUCATION PARTNERS 47-4539590 501(C)(3) 2.293.786 O N/A IN/A FOR GENERAL 303 PEARL PKWY STE 114 OPERATING EXPENSES

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

CITY YEAR INC - SAN ANTONIO 109-B N SAN SABA STREET SAN ANTONIO, TX 78207	22-2882549	501(C)(3)	120,372	0	N/A		TO SUPPORT THE WHOLE SCHOOL WHOLE CHILD PROGRAM AT SARAH KING ELEMENTARY
CLADITY CUILD CUIDANCE	74 1152067	E01(C)(2)	204 624	0	NI / A	NI/A	LICCRITAL DENOVATION

CLARITY CHILD GUIDANCE 74-1153067 501(C)(3) 204,6341 OIN/A THOSPITAL RENOVATION CENTER

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

8535 TOM SLICK SAN ANTONIO, TX 78229

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 83-1388210 501(C)(3) 10.000 O N/A IN/A CND MEDIA INC IFOR GENERAL 1523 WEST MISTLETOE IOPERATING EXPENSES

SCOT CENTER FUND

1523 WEST MISTLETOE
AVENUE
SAN ANTONIO, TX 78201

COLLEGE OF WOOSTER 34-0714654 501(C)(3) 5,000 0 N/A N/A IN SUPPORT OF THE

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

1189 BEALL AVENUE

WOOSTER, OH 44691

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) COLSON CENTER FOR 90-1117779 501(C)(3) 5,000 O N/A N/A ICOLSON CENTER VIDEO CUDICTIAN MODERNIEW IDDODUCTION OF WHAT

PO BOX 62160 COLORADO SPRINGS, CO 80962							WOULD YOU SAY?
COMMUNITIES IN SCHOOLS OF SAN ANTONIO INC	74-2393714	501(C)(3)	57,521	0	N/A	7	FOR GENERAL OPERATING EXPENSES

1616 E COMMERCE STREET BLDG 1

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

SAN ANTONIO, TX 78205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CONTEMPLATIVE OUTREACH 13-3345685 501(C)(3) 10,000 O N/A N/A FOR GENERAL

10 PARK PLACESECOND FLOOR SUITE B BUTLER, NJ 07405			·				OPERATING EXPENSES
CONTEMPORARY ART FOR SAN	74-2419615	501(C)(3)	22,000	0	N/A	N/A	FOR GENERAL

SAN ANTONIO, TX 78204

NERAL ANTONIO OPERATING EXPENSES 116 BLUE STAR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 74-2197306 501(C)(3) 15.000l O N/A IN/A CONVERSE ANIMAL SHELTER IGROOMING PETS FOR INC ISUCCESS

O N/A

IN/A

TO SUPPORT REAP

10.000

PO BOX 644 CONVERSE, TX 78109

PO BOX 1771 MD110102 SAN ANTONIO, TX 78296 13,300

74-6002071

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

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CRESSIE ANIMAL REFUGE AND 27-0465104 501(C)(3) 25.000 OIN/A IN/A DESTINATION HOME

CDOSSBOINT INC	74 6050016	E01(C)(2)	15 000	0	N/A	N/A	EOR THE CARITAL
1614 DOE PARK SAN ANTONIO, TX 78248							
ENRICHMENT CENTER			,				BOUND
		(- / (- /	,	_	1. 4		

CROSSPOINT INC /4-6058916 201(C)(3) 15,000 U I N/A IFOR THE CAPITAL 301 YUCCA CAMPAIGN

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

SAN ANTONIO, TX 78203

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 74-2465229 501(C)(3) 5.000 0 N/A N/A TO SUPPORT THE CROSSROADS MINISTRY OF ESTES PARK INC REMODEL FOR IBUILDING WHICH WILL PO BOX 3616 PROVIDE SPACE FOR

ESTES PARK, CO 80517 N/A CULINARY HEALTH 82-0660176 501(C)(3) 2.000.000 OIN/A

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

303 PEARL PKWY STE 114 SAN ANTONIO, TX 78215

FOOD REPACKAGING AND STORAGE FOR GENERAL EDUCATION FOR FAMILIES OPERATING EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 501(C)(3) 6.000 O N/A IN/A CURREY CREEK BAPTIST 74-2985752 IFOR GENERAL

CHURCH IOPERATING EXPENSES

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

35 CASCADE CAVERNS DEF HOWARD FOUNDATION 81-4636512 501(C)(3) 15.000l O N/A IN/A FOR GENERAL 9901 IH 10 WEST SUITE 800 OPERATING EXPENSES

BOERNE, TX 78015

SAN ANTONIO, TX 78230

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) DISABLED AMERICAN 94-2776664 501(C)(4) 12,601 O N/A N/A ANNUAL DISTRIBUTION VETERANS IFOR GENERAL **EXPENSES**

ATTN LEGAL DEPARTMENT 3725 ALEXANDRIA PIKE COLD SPRING, KY 41076							OPERATING EXPENSES OF THE SACRAMENTO CHAPTER
ELLA AUSTIN COMMUNITY	74-1166908	501(C)(3)	11,330	0	N/A	N/A	AT-RISK YOUTH

SAN ANTONIO, TX 78202

UTH CENTER DEVELOPMENT 1023 NORTH PINE PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 02 424 5205 E04(6)(3) 20 500 0 1 5 1 / 5 NI/A FOR GENERAL

427 EVANS AVENUE SAN ANTONIO, TX 78209	82-4215205	501(C)(3)	28,500	0	N/A		OPERATING PURPOSES
EPISCOPAL DIOCESE OF WEST	74-1143118	501(C)(3)	5,625	0	N/A	N/A	FOR GENERAL

SAN ANTONIO, TX 78209

NERAL OPERATING EXPENSES TEXAS PO BOX 6885

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 53-0204604 501(C)(3) 21.100 O N/A IN/A FOR GENERAL FELLOWSHIP FOUNDATION INC OPERATING EXPENSES

PO BOX 23813	
WASHINGTON, DC	20026
FELLOWSHIP OF CI	HRISTIA

IRELATED TO HAITI IACCOUNT 380-02 ΑN 44-0610626 501(C)(3) 5.000 0 N/A IN/A FOR GENERAL ATHLETES OPERATING EXPENSES

8701 LEEDS ROAD KANSAS CITY, MO 64129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) FIESTA YOUTH 46-3737851 501(C)(3) 10.370 O N/A IN/A FOR GENERAL 702 DONALDSON AVE SUITE OPERATING EXPENSES

205A SAN ANTONIO, TX 78201 FIRST BAPTIST CHURCH OF 20-3260850 501(C)(3) 50.000 0 N/A IN/A

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

BOERNE, TX 78006

FOR GENERAL BOERNE OPERATING EXPENSES 631 SOUTH SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) FIRST BAPTIST CHURCH SAN 74-2689599 501(C)(3) 30 000l O N/A ITO ASSIST WITH

FREEDOM IN AMERICA

ANTONIO 515 MCCULLOUGH AVENUE SAN ANTONIO, TX 78215	7 1 2303333	332(3)(3)	33,333				RESTRUCTURE OF WEST
FIRST LIBERTY INSTITUTE	75-1403169	501(C)(3)	5.000	0	N/A	N/A	PROTECT RELIGIOUS

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

2001 WEST PLANO PARKWAY

SUITE 1600 PLANO, TX 75075

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) FIRST DRECOVERDIAN CHURCH 74-1175027 E01/C)/2) EU UUUI O N / A IN/A LEOD THE CENEDAL

12300 TWINBROOK PARKWAY

ROCKVILLE, MD 20852

410

- SAN ANTONIO TX 404 NORTH ALAMO SAN ANTONIO, TX 78205	74-1173637	301(0)(3)	30,000	0	IV/A		FUND
FISHER HOUSE FOUNDATION	11-3158401	501(C)(3)	10,750	0	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 59-2174510 501(C)(3) 50.000 IN/A FOOD FOR THE POOR INC O N/A IN SUPPORT OF THE THAITI WATER PROJECT

6401 LYONS ROAD COCONUT CREEK, FL 33073 FORWARD PROGRESS ARTS & 36-4765690 501(C)(3) 5.000 O N/A N/A

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

SAN ANTONIO, TX 78239

FOR GENERAL ENTERTAINMENT CENTER INC. OPERATING EXPENSES 8106 SLEEPY FOREST

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

FOUNDATION FOR CULTURAL ARTS IN SAN ANTONIO 222 E HOUSTON STREET SUITE 640 SAN ANTONIO, TX 78205	74-2512597	501(C)(3)	5,000	0	N/A	LAS CASAS FOUNDATION PERFORMING ARTS EDUCATION PROGRAM AND THE JOCI AWARDS
FREDERICKSBURG COMMUNITY HEALTH CENTER INC	91-2129853	501(C)(3)	50,000	0	N/A	 FOR GENERAL OPERATING EXPENSES

140 INDUSTRIAL LOOP SUITE 100

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

FREDERICKSBURG, TX 78624

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) FRIENDS OF CHRISTUS SANTA 74-2723391 501(C)(3) 66.700 O N/A IN/A FOR THE WESTOVER HILLS CARDIOLOGY

ROSA FOUNDATION 100 NE LOOP 410 SUITE 706 IRENOVATION PROJECT SAN ANTONIO, TX 78216 FRIENDS OF HOSPICE SAN 74-2608764 7.000 l IN/A

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

SAN ANTONIO, TX 78229

501(C)(3) 0 N/A PROVIDING HOSPICE ANTONIO INC CARE TO UNINSURED PO BOX 40487 PATIENTS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government FRIENDS OF LAKE MCQUEENEY 74-2121275 501(C)(3) 21.000 IN/A O N/A IENVIRONMENT - FOR

OPERATING EXPENSES

PO BOX 781 THE GENERAL FUND SAN ANTONIO, TX 78123 LMPC GIRL SCOUTS OF SOUTHWEST 74-1109759 501(C)(3) 5.500 O N/A N/A FOR GENERAL

TEXAS 811 N COKER LOOP ROAD

SAN ANTONIO, TX 78216

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

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

GIRLS INCORPORATED OF SAN ANTONIO	20-5468038	501(C)(3)	8,200	0	N/A	FOR GENERAL OPERATING EXPENSES
ANTONIO						OPERATING EXPENSES
118 N MEDINA STREET						
SAN ANTONIO, TX 78207						

CAMPUS

N/A GOOD SAMARITAN CENTER OF 74-1117340 501(C)(3) 52.701 0 N/A YOUTH DEVELOPMENT SAN ANTONIO SERVICES (YDS) - MAIN

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

1600 SALTILLO STREET

SAN ANTONIO, TX 78207

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) GRAVITY A CENTER FOR 46-1925075 501(C)(3) 10.000 O N/A N/A TO SUPPORT GENERAL CONTEMPLATIVE ACTIVICAL OPERATING EXPENSES

FOR GENERAL OPERATING EXPENSES

PO BOX 7 OMAHA, NE 68101						
GREATER MANHATTAN COMMUNITY FOUNDATION	48-1215574	501(C)(3)	10,000	0	N/A	N/A

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

PO BOX 1127

MANHATTAN, KS 66505

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

GREATER SAN ANTONIO AFTER SCHOOL ALL STARS	20-0195564	501(C)(3)	5,000	0	N/A	BRENTWOOD'S ROAD TO SUCCESS
2300 W COMMERCE ST SUITE						
215						
SAN ANTONIO, TX 78207						

1818 SAN PEDRO

SAN ANTONIO, TX 78212

74-2780384 501(C)(3) 10,000 O N/A N/A BOARD GUARDIAN HOUSE

STRENGTHENING AND

INOMINATIONS PROJECT

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

HIS BRIDGEBUILDERS 422 PIKE ROAD SAN ANTONIO,TX 78209	75-2596111	501(C)(3)	25,000	0	N/A	HOMEWORK WITH HEART AND READING FOR SUCCESS
HABITAT FOR HUMANITY OF	74-1897502	501(C)(3)	30,990	0	N/A	FOR GENERAL

SAN ANTONIO, TX 78204

IOPERATING EXPENSES SAN ANTONIO INC 311 PROBANDT

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

HALLMARK UNIVERSITY INC 10401 IH 10 WEST SAN ANTONIO, TX 78230	45-4620000	501(C)(3)	5,000	0	N/A		FOR GENERAL OPERATING EXPENSES
HAVEN FOR HOPE OF BEXAR	20-8075412	501(C)(3)	19,600	0	N/A	N/A	TRANSFORMATIONAL

SAN ANTONIO, TX 78207

RMATIONAL COUNTY IRESOURCE CENTER 1 HAVEN FOR HOPE WAY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 501(C)(3) 50.000 O N/A N/A HEALY-MURPHY CENTER 74-1667875 TO PURCHASE SUPPLIES FOR TEEN 618 LIVE OAK SAN ANTONIO, TX 78202 MOTHERS AND THEIR BABIES 75-1317961 501(C)(3) 30.000 O N/A N/A TO RENOVATE AND IMPROVE THE

BUTTERFLY GARDEN

AT THE HEARD INATURAL SCIENCE

MUSEUM

IAND SYCAMORE TRAIL

HEARD NATURAL SCIENCE MUSEUM AND WILDLIFE SANCTUARY INC. ONE NATURE PLACE MCKINNEY, TX 75069

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) E04(6)(3) 45 000 LEOD CENTER AT

IELIZABETH AND DREW

ICAUTHORN

HEARTBEAT	27-1047308	501(C)(3)	7.500	0	N/Δ	N/A	FOR GENERAL
1005 WEST HIGHWAY 290 DRIPPING SPRINGS, TX 78620							OPERATING EXPENSES
RESOURCE CENTER	46-06/3585	501(C)(3)	15,000	ال	N/A	l '	OPERATING EXPENSES

301(0)(3) 5431 NE 20TH AVENUE OPERATING EXPENSES PORTLAND, OR 97211 AND IN HONOR OF

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

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

INTERNATIONAL

1 WORLD AVENUE
LITTLE ROCK, AR 72202

HEARTGIFT FOUNDATION 7970 FREDERICKSBURG ROAD SUITE 101-373 SAN ANTONIO, TX 78229	74-2967809	501(C)(3)	10,000	0	N/A		SUPPORT EXPENSES RELATED TO THE SAN ANTONIO CHAPTER.
HEIFER PROJECT	35-1019477	501(C)(3)	5,000	0	N/A	N/A	FOR HUNGER RELIEF

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 26-3618295 501(C)(3) 570.000 N/A HELP END LOCAL POVERTY O N/A PROVIDE EDUCATION CIDS IN

CAPACITY BUILDING

(DBA HELP ONE NOW) PO BOX 26716 RALEIGH, NC 27611							FOR 60 KII FERRIER, F PRE-K THR SECONDAR
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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN ANTONIO, TX 78295

HAITI, FROM IROUGH 501(C)(3) 10,000 O N/A N/A HEMISFAIR CONSERVANCY 46-5764124 HEMISFAIR

ARY SCHOOL CONSERVANCY PO BOX 1262

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

501(C)(3)

20-0395325

HERO

3701 AUTUMN LEAVES LANE

MARIETTA, GA 30066

HERITAGE SCHOOL 310 SMOKEHOUSE ROAD FREDERCKSBURG, TX 78624	74-2709925	501(C)(3)	39,000	0	N/A	FOR THE PURCHASE OF A PORTABLE CLASSROOM BUILDING
FREDERCKSBURG, IX 70024						CLASSROOM BUILDING

O N/A

N/A

FUND THE WORK OF

HERO IN HAITI

5.000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 31-1813333 501(C)(3) 8.0001 O N/A IN/A FOR GENERAL HIGHLAND LAKES UNITED METHODIST CHURCH OPERATING EXPENSES AND IN MEMORY OF JIM PO BOX 1005 IFOUT 26-0106908 501(C)(3) 5.000 OIN/A IN/A FOR THE DIXON WATER FOUNDATION

I HEADWATERS ALLIANCE

BUCHANAN DAM, TX 78609 HILL COUNTRY ALLIANCE PO BOX 151675 AUSTIN.TX 78715 CHALLENGE MATCHING IGRANT FOR THE

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) HILL COUNTRY MONTESSORI 74-2570676 501(C)(3) 52,073 O N/A N/A IN SUPPORT OF THE

SCHOOL INC 50 STONE WALL DRIVE BOERNE, TX 78006							SPORT PAVILLION PROJECT
HISPANIC LEADERSHIP DEVELOPMENT FOUNDATION	74-2956228	501(C)(3)	25,000	0	N/A	l '	FOR GENERAL OPERATING EXPENSES

200 E GRAYSON SUITE 203 SAN ANTONIO, TX 78215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) HOLY REDEEMER CATHOLIC 74-1109740 501(C)(3) 5,000 O N/A N/A FOR GENERAL CHURCH OPERATING EXPENSES

1819 NEVADA STREET SAN ANTONIO, TX 78203							OPERATING EXPENSE
HORSES HELPING THE	74-2746369	501(C)(3)	5,000	0	N/A	N/A	HORSE SPIRIT FOR

PIPE CREEK, TX 78063

HANDICAPPED SENIORS 791 BACKHAUS ROAD

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

O N/A

N/A

NARRATIVE CHANGE

OPERATING EXPENSES

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

501(C)(3)

HOUSING AND COMMUNITY

ONE HAVEN FOR HOPE WAY

SAN ANTONIO, TX 78207

BUILDING ONE SUITE 200 74-2685268

SERVICES DBA PROSPERA 8610 N NEW BRAUNFELS AVENUE SUITE 500 SAN ANTONIO, TX 78217							TECHNICAL ASSISTANCE WITH RALLY
I CARE SAN ANTONIO INC	74-2690192	501(C)(3)	6,500	0	N/A	N/A	FOR GENERAL

80,000

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

101-369

SAN ANTONIO, TX 78229

IMMSCHOOLS 10419 TOLLOW WAY HELOTES, TX 78023	82-3350805	501(C)(3)	25,000	0	N/A		FOR GENERAL OPERATING EXPENSES
IMPACT SAN ANTONIO FOUNDATION INC 7970 FREDERICKSBURG ROAD SUITE	20-1154171	501(C)(3)	6,500	0	N/A	1 7	FOR THE ANNUAL CAMPAIGN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 74-1619603 501(C)(3) 5.000 O N/A IN/A INNER CITY DEVELOPMENT VAN ACQUISITION TO

INC SUPPORT YOUTH & 1300 CHIHUAHUA STREET ADULT PROGRAMING SAN ANTONIO, TX 78207 INSPIRE COMMUNITY FINE 20-2879857 501(C)(3) 17.500 O N/A IN/A FOR GENERAL

ART CENTER OPERATING EXPENSES 1943 NORTH NEW BRAUNFELS

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

SAN ANTONIO, TX 78208

if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) INTERCULTURAL 74-1804539 501(C)(3) 8,500 O N/A N/A | EDUCATION

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

CONTINUITY FOR

1 STREET EDUCATION FUND	20-2777557	501(C)(3)	5 000	0	N/A	N/A	EOR GENERAL
101 TOWER 2 2 SAN ANTONIO, TX 78228							
ASSOCIATION 5815 CALLAGHAN RD SUITE							PREK-K STUDENTS

J 21 KEET EDOCATION FOIND 201(C)(2) 5,000 U I IV/A IFUR GENERAL INC OPERATING EXPENSES PO BOX 66073

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

DEVELOPMENT DECEMBELL

WASHINGTON, DC 20035

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 23-7403400 501(C)(6) 329.560 O N/A N/A FOR GENERAL J BRADLEY AUST SURGICAL SOCIETY OPERATING EXPENSES DEPT OF SURGERY/DIVIISION

OPERATING EXPENSES

OF TRAUMA MAIL CODE 7740 UTHSCSA 7703 FLOYD SAN ANTONIO, TX 78229

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

7410 APPLE CREEK DRIVE

CHARLOTTE, NC 28227

501(C)(3) 6,000 N/A JEFF ANDLER MINISTRIES 02-0599980 O N/A IFOR GENERAL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) JEWISH FEDERATION OF SAN 74-1109662 501(C)(3) 9,300 O N/A IN/A TO SUPPORT GENERAL ANTONIO FUNDING AND NEW

12500 NW MILITARY HWY SUITE 200 SAN ANTONIO, TX 78231						SIGNAGE
JEWISH NATIONAL FUND-USA INC	83-2880252	501(C)(3)	10,000	0	N/A	FOR GENERAL OPERATING EXPENSES

78 RANDALL AVENUE ROCKVILLE CENTRE, NY

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

11570

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

KETTERING UNIVERSITY 38-2410852 501(C)(3) 13.302 O N/A IN/A EDUCATION - FOR THE 1700 UNIVERSITY AVENUE IGENERAL FUND FLINT, MI 48504

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

SAN ANTONIO, TX 78212

KEYSTONE SCHOOL 74-1193335 501(C)(3) 11.000 O N/A N/A FOR GENERAL OPERATING EXPENSES 119 F CRAIG PLACE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 20-1508875 501(C)(3) 8.176 O N/A IN/A LANDA GARDENS IFOR GENERAL

IPREY CONSERVANCY

CONSERVANCY IOPERATING EXPENSES PO BOX 12243 SAN ANTONIO, TX 78212

LAST CHANCE FOREVER 74-2213535 501(C)(3) 15.000l O N/A IN/A LIAST CHANCE PO BOX 460993 FOREVER/THE BIRD OF

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) LAUNCH GLOBAL 20-3826376 501(C)(3) 23.000 OIN/A IN/A FOR GENERAL IG EXPENSES

OF LAUREN INTERNATIONAL

PO BOX 19686 BIRMINGHAM, AL 35219		,,,,	,		•	OPERATING EXPENSES
LAUREN INTERNATIONAL INC PO BOX 37474	59-2981750	501(C)(3)	63,000	0	N/A	FOR GENERAL OPERATING EXPENSES

JACKSONVILLE, FL 32236

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

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

ON/A

N/A

FOR THE DREAM MAKER

IFUND

LIFES LITTLE MIRACLES 117 AYSHIRE BOERNE, TX 78015	82-1463016	501(C)(3)	5,000	0	N/A	INFANT PRODUCTS AND FAMILY SERVICES

55,000

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

501(C)(3)

74-2712770

LIFTFUND INC

2007 W MARTIN STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government LOW VISION RESOURCE 74-2930723 501(0)(3) 10 124 O N/A IN/A FOR GENERAL

OPERATING EXPENSES

MACDALENIA MINISCEDIES INS	00 0054504	504(6)(2)	E 000			21/2	EOD OFNEDAL
1250 NE LOOP 410SUITE 630 SAN ANTONIO, TX 78209							OI EIGHT ENSES
CENTER			,	-	l.,	,	OPERATING EXPENSES

MAGDALENA MINISTRIES INC 80-0251526 501(C)(3) 5.0001 O|N/A IN/A IFOR GENERAL

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

PO BOX 692041

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

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

501(C)(3)

501(C)(3)

MAKE-A-WISH FOUNDATION

MASON HIGH SCHOOL

MASON, TX 76856

924 EAST COLLEGE AVENUE

74-2357788

74-6001708

OF CENTRAL AND SOUTH	 		_	'', ' '	, and the second	OPERATING EXPENSES
TEXAS INC						
1931 NW MILITARY HWY						
SUITE 210						
SAN ANTONIO, TX 78213						

6.060

5.000

OIN/A

O N/A

IN/A

N/A

FOR GENERAL

FOR GENERAL

OPERATING EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government MCCALLIE SCHOOL INC 62-0475837 501(C)(3) 16,000 O N/A N/A FOR GENERAL

500 DODDS AVENUE CHATTANOOGA, TN 37404						OPERATING EXPENSES
MCNAY ART MUSEUM 6000 N NEW BRAUNFELS	74-1195277	501(C)(3)	65,170	0	N/A	FOR GENERAL OPERATING EXPENSES

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

AVENUE

organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or government assistance

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

OPERATING EXPENSES

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

1111 HERRING AVENUE WACO, TX 76708

HOME

(b) EIN

MEADOWS MENTAL HEALTH POLICY INSTITUTE FOR TEXAS 2800 SWISS AVENUE DALLAS, TX 75204	46-3992618	501(C)(3)	11,000	0	N/A	·	TO SUPPORT THE VETERANS MORAL INJURY PILOT PROGRAM AT HAVEN FOR HOPE
METHODIST CHILDREN'S	74-1109750	501(C)(3)	56,363	0	N/A	N/A	FOR GENERAL

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

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

MEXICO MEDICAL MISSIONS 1302 WAUGH DRIVE 685 HOUSTON, TX 77019	74-2548761	501(C)(3)	10,000	0	N/A		FOR GENERAL OPERATING EXPENSES
MID-TEXAS SYMPHONY SOCIETY C J WASHINGTON EXECUTIVE	74-2003063	501(C)(3)	5,854	0	N/A	1 7	FOR GENERAL OPERATING EXPENSES

DIRECTOR 1000 W COURT STREET 3216 SEGUIN, TX 78155

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 74-6024405 501(C)(3) 110.000 O N/A IN/A MISSION ROAD IFOR GENERAL

OPERATING EXPENSES

DEVELOPMENTAL CENTER IOPERATING EXPENSES 8706 MISSION ROAD SAN ANTONIO, TX 78214

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

8706 MISSION ROAD

SAN ANTONIO, TX 78214

MISSION ROAD MINISTRIES 74-2958552 501(C)(3) 80.500 O N/A IN/A FOR GENERAL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) MISSION SAN JOSE CATHOLIC 74-1161936 501(C)(3) 50.172 O N/A IN/A FOR THE SAN JUAN CHURCH IDIEGO CHAPEL

701 FAST PYRON RENOVATION SAN ANTONIO, TX 78214 52-2133725 501(C)(3) 102.500 0 N/A IN/A MISSIONARY OBLATE

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

8013 GIBBON STREET DANIEL ISLAND, SC 29492

FOR GENERAL PARTNERSHIP OPERATING EXPENSES

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

(d) Amount of cash

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

(c) IRC section

ASSOCIATION

PO BOX 12386

SAN ANTONIO, TX 78212

MISSIONARY OBLATES OF MARY IMMACULATE OF TEXAS 327 OBLATE DRIVE SAN ANTONIO, TX 78216	74-1256497	501(C)(3)	150,000	0	N/A		TO BE USED TO OPERATE AND SUPPORT THE OBLATE SCHOOL OF THEOLOGY
MONTE VISTA HISTORICAL	23-7441280	501(C)(3)	7,500	0	N/A	N/A	TO OFFSET LEGAL FEES

RELATING TO TRINITY

ISSUE

UNIVERSITY REZONING

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 26-1219640 501(C)(3) 86.000l IN/A MORGAN'S WONDERLAND O N/A IFOR GENERAL 5223 DAVID EDWARDS DRIVE OPERATING EXPENSES SAN ANTONIO, TX 78233 MORNINGSIDE MINISTRIES 74-1388420 501(C)(3) 8.254 O N/A N/A TO PROVIDE CARE AND

IASSISTANCE FOR

OLDER ADULTS WHO ARE NOT ABLE TO PAY FOR ASSISTANCE

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

7550 TH-10 WEST SUITE 210

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

O N/A

N/A

GENERAL OPERATING

SUPPORT OF ONGOING

LEXPENSES AND

PROGRAMS

MOZART FESTIVAL TEXAS 4207 MILLSTEAD SAN ANTONIO, TX 78230	47-5538446	501(C)(3)	10,000	0	N/A	FOR GENERAL OPERATING EXPENSES OF MOZART FESTIVAL TEXAS

50.000

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

501(C)(3)

MUSEUM OF THE BIBLE INC.

WASHINGTON, DC 20024

400 4TH STREET SW

27-3444987

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) 74 2044647 E04(0)(3) E0 000 ~ l s : / s INI/A LEOD OFFICE AL

KNOWN AS MULTIPLE

SCLEORISIS

PO BOX 17169 DENVER, CO 80217	/4-204464/	501(C)(3)	50,000	U	IN/A	IN/A	OPERATING EXPENSES
NATIONAL MULTIPLE	74-1266225	501(C)(3)	11,903	0	N/A		TO BE USED FOR

SCLEROSIS SOCIETY OF SAN IRESEARCH IO ANTONIO CONQUER THE DISEASE

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

9830 COLONNADE BLVD 130

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

O N/A

N/A

LEUD CENIEDAL

MONTH 3354 ADELINE STREET BERKELEY, CA 94703	03-1282033	301(0)(3)	20,000	0	10/74	17/4	OPERATING EXPENSES
NATIONAL WILDLIFE	53-0204616	501(C)(3)	50,000	0	N/A	N/A	FOR GENERAL

an nonl

FEDERATION 505 EAST HUNTLAND DRIVE

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

E01(C)(3)

NATIONAL NOVEL WRITING

AUSTIN, TX 78752

65-1292652

OPERATING EXPENSES SUITE 485

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) NEW BRAUNFELS CHRISTIAN 26-2221231 501(C)(3) 5,000 O N/A N/A NEW BRAUNFELS

LVOLLINTEERS IN

NEW BRAUNFELS COMMUNITY	47-4188081	501(C)(3)	8,000	0	N/A	N/A	FOR GENERAL
1659 STATE HIGHWAY 46 WEST SUITE 115-405 NEW BRAUNFELS, TX 78132							MEDICINE
INTINIO INTES							VOLUNTELIS IN

CAT COALITION OPERATING EXPENSES 3353 MORNINGSIDE DRIVE

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

MINISTRIES

SUITE C

NEW BRAUNFELS, TX 78132

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 58-1610318 501(C)(3) 10.000 O N/A IN/A NORTH GEORGIA COMMUNITY IFOR GENERAL

FOUNDATION IOPERATING EXPENSES 615 OAK ST F1300 GAINESVILLE, GA 30501

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

SAN ANTONIO, TX 78256

OAK HILLS CHURCH 74-1676249 501(C)(3) 20.000 O N/A IN/A IFOR THE OVERSEAS 6929 CAMP BULLIS ROAD MISSIONS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 74-1357323 501(C)(3) 50.250 IN/A OBLATE SCHOOL OF O N/A ITO SUPPORT THE ISANKOFA INSTITUTE THEOLOGY FOR AFRICAN

OPERATING EXPENSES

285 OBLATE DRIVE SAN ANTONIO, TX 78216

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

1334 PERRY STREET NE

WASHINGTON, DC 20017

IAMERICAN PASTORAL LEADERSHIP 501(C)(3) N/A OMEGA CENTER INC 81-3500340 7.000 O N/A SUPPORT GENERAL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) OUR LADY OF THE LAKE 74-1109631 501(C)(3) 343.862 O N/A IN/A FOR GENERAL UNIVERSITY OPERATING EXPENSES 411 SW 24TH STREET

0 N/A

IN/A

FOR GENERAL

OPERATING EXPENSES

8.000

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

501(C)(3)

SAN ANTONIO, TX 78207

PARAMOUNT THEATRE FOR 74-1774711
THE PERFORMING ARTS INC

713 CONGRESS AVENUE AUSTIN, TX 78701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) PILGRIM CONGREGATIONAL 95-1786078 501(C)(3) 10,000 O N/A N/A GENERAL OPERATING

IMPROVEMENTS AND

OTHER SPECIAL

PROJECTS

CHURCH							EXPENSES
600 N GAREY AVENUE POMONA, CA 91767							
PIPE CREEK CHRISTIAN	31-1695498	501(C)(3)	20,000	l ol	N/A	N/A	TO SUPPORT CAPITAL

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

SCHOOL

PO BOX 63778

PIPE CREEK, TX 78063

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

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

SOUTH TEXAS

2140 BABCOCK ROAD SAN ANTONIO, TX 78229

PLANNED PARENTHOOD OF GREATER TEXAS INC 7424 GREENVILLE AVENUE SUITE 206 DALLAS, TX 75231	52-1243220	501(C)(3)	10,000	0	N/A	'	FOR GENERAL OPERATING EXPENSES
PLANNED PARENTHOOD	74-1297211	501(C)(3)	138,153	0	N/A	N/A	TO SUPPORT THE NEW

CLINIC

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

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

PROJECT RED FOUNDATION 24165 IH 10 WEST SUITE 217-

SAN ANTONIO, TX 78257

188

PRESBYTERIAN PAN AMERICAN SCHOOL PO BOX 1578 KINGSVILLE, TX 78364	74-1109659	501(C)(3)	70,000	0	N/A		FOR GENERAL OPERATING EXPENSES
PROJECT RED FOUNDATION	46-3924933	501(C)(3)	5,000	0	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government PROMESA ACADEMY CHARTER 82-2921031 501(0)(3) 30 686 O N/A IN/A FOR GENERAL

OPERATING EXPENSES

SCHOOL 6715 HOPE FARM SAN ANTONIO,TX 78249		(-)(-)					OPERATING EXPENSES
RAICES	74-2436920	501(C)(3)	50,000	0	N/A	N/A	FOR GENERAL

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

RAICES 1305 N FLORES STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 74-2243259 501(C)(3) 28.000l O N/A IN/A TO SUPPORT THE REACHING MAXIMUM INDEPENDENCE INC PURCHASE OF A NEW

6336 MONTGOMERY DRIVE ITCE-TOD GROUP HOME SAN ANTONIO, TX 78239 RESPITE CARE OF SAN 74-2467770 501(C)(3) 8.000 0 N/A IN/A

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

SAN ANTONIO, TX 78212

FOR GENERAL ANTONIO INC OPERATING EXPENSES PO BOX 12633

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

ON/A

N/A

FOR GENERAL

RISE RECOVERY PO BOX 15322	74-2216041	501(C)(3)	537,516	0	N/A	FOR GENERAL OPERATING EXPENSES
SAN ANTONIO, TX 78212						

16.210

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

501(C)(3)

RIVER CITY LIVING CHURCH

702 DONALDSON AVENUE SAN ANTONIO, TX 78201

74-2346008

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

RONALD MCDONALD HOUSE CHARITIES OF SAN ANTONIO TEXAS 4803 SID KATZ SAN ANTOINO, TX 78229	74-2140528	501(C)(3)	101,200	0	N/A		SUPPORT NEW PLAYGROUND AT NEW HOUSE IN MEDICAL CENTER
RONALD MCDONALD HOUSE	75-2794920	501(C)(3)	8,000	0	N/A	N/A	FOR THE CAPITAL

OF DALLAS CAMPAIGN: FAMILY 4707 BENGAL STREET IOVERNIGHT ROOM DALLAS, TX 75235

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) ROY MAAS' YOUTH 74-1914638 501(C)(3) 601,559 O N/A N/A ITO SUPPORT THE NEW ALTERNATIVES INC CONSTRUCTION OF A

OPERATING EXPENSES

3103 WEST AVENUE SAN ANTONIO, TX 78213							GIRL'S CABIN ON THE MEADOWLAND CAMPUS (WITH NAMING RIGHTS)
SA CANCER COUNCIL	74-2387944	501(C)(3)	5,500	0	N/A	N/A	FOR GENERAL

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

7979 WURZBACH ROAD SUITE

SAN ANTONIO, TX 78229

U600

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

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

501(C)(3)

SACRAMENTO SPCA

6201 FLORIN-PERKINS ROAD

SACRAMENTO, CA 95828

94-1312343

SA YOUTH	74-2333088	501(C)(3)	20,500	l o	N/A	N/A	FOR GENERAL
PO BOX 7844		(-)(-)	,	_	1.,		OPERATING EXPENSES
							OF LIKATING EXPENSES
SAN ANTONIO, TX 78207							

O N/A

N/A

ANNUAL DISTRIBUTION

OPERATING EXPENSES

IFOR GENERAL

12.601

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SADDLE LIGHT CENTER FOR 74-2612738 501(C)(3) 15,000 O N/A N/A FOR GENERAL **EXPENSES**

CAPITAL CAMPAIGN

THERAPEUTIC HORSEMANSHIP INC 17530 OLD EVANS ROAD SELMA, TX 78154							OPERATING EXPENS
SAINT MARY'S HALL INC	74-0877330	501(C)(3)	31,000	0	N/A	N/A	TO SUPPORT THE

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

9401 STARCREST DRIVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 74-2861587 501(C)(3) 306.773 OIN/A N/A FOR GENERAL SAISD FOUNDATION **EXPENSES**

141 LAVACA SAN ANTONIO, TX 78210		, , , , ,	·				OPERATING EXPENSES
SALVATION ARMY WORLD SERVICE OFFICE	13-2923701	501(C)(3)	50,000	0	N/A	N/A	FOR DORIAN RELIEF

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

615 SLATERS LANE ALEXANDRIA, VA 22314

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) CAN ANTONIO ACADEMY OF 74-0979670 E01/C1/21 521 167 OINIA IN/A FIRST PORTION OF GYM

OPERATING EXPENSES

TEXAS 117 E FRENCH PLACE SAN ANTONIO, TX 78212	74-08/88/0	301(0)(3)	331,107	3	17/0		PROJECT
SAN ANTONIO AGGIE MOMS'	23-7131790	501(C)(3)	100.000	0	N/A	N/A	FOR GENERAL

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

CLUB

6205 WEST AVENUE SAN ANTONIO, TX 78213

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 74-2178792 501(C)(3) 12.140 0 N/A IN/A SAN ANTONIO BOTANICAL ITO UNDERWRITE SAN GARDEN SOCIETY INC IANTONIO BOTANICAL SOCIETY'S, SPLENDOR PO BOX 6569

SAN ANTONIO, TX 78209 IN THE GARDEN'S CENTERPIECES 501(C)(3) N/A SAN ANTONIO CHRISTIAN 74-2989365 10,250 O N/A FOR GENERAL OPERATING EXPENSES HOPE RESOURCE CENTER INC.

321 N GENERAL MCMULLEN DRIVE

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SAN ANTONIO CITY WIDE 26-0799649 501(0)(3) 5 0001 O N/A FOR GENERAL ING EXPENSES

NSBE JUNIOR CHAPTER 9934 AUTUMN DAWN CONVERSE, TX 78109	20 0/030 13	302(0)(0)	3,033				OPERATING EXP
SAN ANTONIO CONSERVATION	74-1664620	501(C)(3)	9,306	0	N/A	N/A	FOR GENERAL

SOCIETY FOUNDATION OPERATING EXPENSES

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

107 KING WILLIAM STREET SAN ANTONIO, TX 78204

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

SAN ANTONIO FERAL CAT COALITION PO BOX 692308 SAN ANTONIO, TX 78269	76-0766948	501(C)(3)	25,000	0	N/A		THE COMMUNITY CAT SUBSIDY PROGRAM
SAN ANTONIO FOOD BANK	74-2122979	501(C)(3)	438,330	0	N/A	N/A	FOR GENERAL

SAN ANTONIO, TX 78269

SAN ANTONIO FOOD BANK INC.
INC.
5200 ENRIQUE M BARRERA
PKWY

SAN ANTONIO FOOD BANK 74-2122979

501(C)(3) 438,330

0 N/A

N/A

FOR GENERAL
OPERATING EXPENSES

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 74-6024105 501(C)(3) 1.555.500 O N/A IN/A SATELLITE ADOPTION SAN ANTONIO HUMANE SOCIETY ICENTER WITH RETAIL

4804 FREDERICKSBURG ROAD ADOPTION PARTNER SAN ANTONIO, TX 78229 74-2584488 501(C)(3) 5.000 O N/A IN/A SAN ANTONIO IVY

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

SAN ANTONIO, TX 78220

ALPHA TAU OMEGA EDUCATIONAL FUND INC READING CAMP PO BOX 201258

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

SAN ANTONIO LIFETIME RECOVERY INC 96 CROSSROADS BLVD SUITE 201-A SAN ANTONIO, TX 78201	74-1540097	501(C)(3)	250,000	0	N/A		TO SUPPORT LIFETIME RECOVERY'S BUILDING FOR RECOVERY CAMPAIGN
--	------------	-----------	---------	---	-----	--	--

2305 ROOSEVELT

SAN ANTONIO, TX 78210

74-1339051 501(C)(3) 45.795 O N/A N/A SAN ANTONIO LIGHTHOUSE IFOR GENERAL

OPERATING EXPENSES

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

SAN ANTONIO, 1X 78213							
1919 NW LOOP 410 SUITE 100 SAN ANTONIO. TX 78213							
MINISTRY INC							OPERATING EXPENSES
SAN ANTONIO METROPOLITAN	74-2285793	501(C)(3)	11,262	0	N/A	N/A	FOR GENERAL

74-2689943 501(C)(3) 62.967 O N/A IN/A SAN ANTONIO MUSEUM OF IFOR GENERAL ART OPERATING EXPENSES 200 WEST JONES AVENUE

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

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

FOR GENERAL OPERATING EXPENSES

SAN ANTONIO PETS ALIVE 1017 N MAIN AVE SUITE 200B SAN ANTONIO, TX 78212	45-4141531	501(C)(3)	50,000	0	N/A	FOR GENERAL OPERATING EXPENSES
STATTATIONIS, TX TOLLE						

SAN ANTONIO REPORT 47-4820476 501(C)(3) 38.950 O N/A N/A

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

126 GONZALES STREET SAN ANTONIO, TX 78205

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

501(C)(3)

27-5164994

SAN ANTONIO SPORTS FOUNDATION PO BOX 830386 SAN ANTONIO, TX 78283	74-2471362	501(C)(3)	190,000	0	N/A	TO SUPPORT THE IPLAY PROGRAM
						-

10.000

O N/A

N/A

FOR GENERAL

OPERATING EXPENSES

PO BOX 830386
SAN ANTONIO, TX 78283

SAN ANTONIO YOUNG
WOMEN'S LEADERSHIP
ACADEMY

2123 W HUISACHE AVENUE SAN ANTONIO, TX 78201

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

SAN ANTONIO YOUNG WOMEN'S LEADERSHIP ACADEMY FOUNDATION 303 PEARL PKWY SUITE 114 SAN ANTONIO, TX 78215	27-5164994	501(C)(3)	9,000	0	N/A		FOR GENERAL OPERATING EXPENSES
SAN ANTONIO ZODLOGICAL	74-1323695	501(C)(3)	27 633	n l	N/A	N/A	TO SUPPORT THE

201(C)(2) 27,033 U IN/A SOCIETY INC ZOOTENNIAL PLAZA 3903 N ST MARYS STREET

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

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

SAVING SAN ANTONIO IAREA STRAYS

SASTEMIC 102 MABRY DRIVE SUITE 100 SAN ANTONIO, TX 78226	45-2690350	501(C)(3)	41,000	0	N/A	1 *	FOR GENERAL OPERATING EXPENSES
SCHERTZ HUMANE SOCIETY	74-2133277	501(C)(3)	15,000	0	N/A	N/A	SAVING SAN ANTONIO

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

PO BOX 605 SCHERTZ, TX 78154

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

O N/A

N/A

FOR GENERAL OPERATING EXPENSES

SCHWAB CHARITABLE FUND PO BOX 628298	31-1640316	501(C)(3)	400,000	0	N/A	FOR GENERAL OPERATING EXPENSES
ORLANDO, FL 32862						

15.000l

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

501(C)(3)

SEGUIN YOUTH SERVICES INC

919 N GUADALUPE ST SEGUIN, TX 78155

74-2852393

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 74-2247996 501(C)(3) 54.678 O N/A IN/A FOR THE BOLNER SETON HOME 1115 MISSION ROAD IENDOWEMENT FUND SAN ANTONIO, TX 78210 WHICH PREVIOUSLY ESTABLISHED THE

SHRINERS HOSPITALS FOR 36-2193608 501(C)(3) 30,665 0 N/A N/A TO SUPPORT THE ENDOWMENT OF CRIPPLED CHILDREN DEPARTMENT PO BOX 31356

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

TAMPA, FL 33631

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

SIGMA ALPHA EPSILON FOUNDATION 1856 SHERIDAN ROAD EVANSTON, IL 60201	36-2170145	501(C)(3)	8,180	0	N/A		FOR GENERAL OPERATING EXPENSES
STLVER VENTURE	83-2852601	501(C)(3)	9.870	ام	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

SILVER VENTURE
PARTNARSHIP
20770 HIGHWAY NORTH
SUITE 108

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

SISTERS OF DIVINE PROVIDENCE 515 SW 24TH STREET SAN ANTONIO,TX 78207	74-1109631	501(C)(3)	30,500	0	N/A		FOR GENERAL OPERATING EXPENSES
SOCIAL VENTURE PARTNERS	68-0492186	501(C)(3)	7,028	o	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

SOCIAL VENTURE PARTNERS 68-0492186 501(C)(3)| INTERNATIONAL 220 SECOND AVENUE SOUTH

SUITE 300 SEATTLE, WA 98104

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SOCIAL VENTURE PARTNERS 83-2852601 501(C)(3) 40.687 O N/A N/A FOR GENERAL

SAN ANTONIO 20770 HIGHWAY NORTH SUITE 108 SAN ANTONIO, TX 78258		()()	·			OPERATING EXPENSES
SOUTH TEXAS SICKLE CELL	74-1586031	501(C)(3)	11,960	0	N/A	FOR GENERAL

AND THALASSEMIA CENTER TOPERATING EXPENSES UTHSCSA DEPT OF PEDIATRICS 7703 FLOYD CURL DRIVE MSC 7802

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

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

SOUTHWEST SCHOOL OF ART	74-6068932	501(C)(3)	9,557	0	N/A	N/A	SUPPORT FOR LOW-
300 AUGUSTA STREET							INCOME CHILDREN TO
SAN ANTONIO, TX 78205							ATTEND THE SUMMER
							ART PROGRAMS AT
							SOUTHWEST SCHOOL
							OF ART

LADOPTION

501(C)(3) N/A SPAY NEUTER INJECT 20-4138968 26.750 O N/A SAVING LIVES PROTECT SAN ANTONIO THROUGH RESCUE AND

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

PO BOX 90325

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) SPAY-NEUTER ASSISTANCE 76-0608925 501(C)(3) 50.000 O N/A N/A SAN ANTONIO MOBILE PROGRAM INC CLINIC PROJECT

PO BOX 70286 HOUSTON, TX 77270						CEINICTROSECT
SPECIAL REACH INC PO BOX 690215 SAN ANTONIO, TX 78269	45-1967838	501(C)(3)	6,200	0	N/A	THE ENRICHMENT PROGRAMS FOR CHILDREN WITH DEVELOPMENTAL

DISABILITIES

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) SPOTLIGHT THEATER & ARTS 74-2089292 501(C)(3) 25.000 O N/A N/A TO FUND THE REPAIRS GROUP FTC INC AND UPGRADE THE

PO BOX 75 BULVERDE, TX 78163							SOUND AND LIGHTING SYSTEMS FOR THE STAGE COMMUNITY THEATER
ST ANTHONY CATHOLIC	59-3204535	501(C)(3)	30,000	0	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

ST ANTHONY CATHOLIC ELEMENTARY SCHOOL

205 W HUISACHE AVENUE SAN ANTONIO, TX 78212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ST ANTHONY CATHOLIC 74-2368777 501(C)(3) 140.000 Oln/A N/A FOR GENERAL IG EXPENSES

OPERATING EXPENSES

SCHOOL 205 W HUISACHE AVENUE SAN ANTONIO, TX 78212							OPERATING EXP
ST JUDE CHILDREN'S	62-0646012	501(C)(3)	12,851	0	N/A	N/A	FOR GENERAL

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

RESEARCH HOSPITAL INC

262 DANNY THOMAS PLACE MEMPHIS, TN 38105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ST JUDE'S RANCH FOR 74-2469139 501(C)(3) 250.000 O N/A N/A FOR GENERAL **EXPENSES**

OPERATING EXPENSES

CHILDREN - TEXAS REGION INC 1400 RIDGE CREEK LANE BULVERDE, TX 78163		, , , ,					OPERATING E
STILLKE'S EPISCOPAL SCHOOL	74-1166903	501(C)(3)	12 500	0	N/A	N/A	FOR GENERAL

THUR GENERAL 201(C)(2) U I IV/A

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

15 ST LUKES LANE

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

N/A

FOR GENERAL

OPERATING EXPENSES

O N/A

ST MARK'S EPISCOPAL	74-1143125	501(C)(3)	103,507	0	N/A	N/A	FOR GENERAL
CHURCH							OPERATING EXPENSES
315 EAST PECAN STREET							
SAN ANTONIO, TX 78205							

115.000

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

501(C)(3)

74-1143128

ST MARY'S UNIVERSITY

ONE CAMINO SANTA MARIA

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ST PETER - ST JOSEPH 74-1143129 501(C)(3) 51,000 O N/A N/A FOR GENERAL

CHILDREN'S HOME 919 MISSION ROAD SAN ANTONIO,TX 78210		, , , ,					OPERATING EXPENSES
ST PHILIP'S COLLEGE	74-6002173	501(C)(3)	5,000	0	N/A	N/A	FOR GENERAL

SAN ANTONIO, TX 78203

FOR GENERAL 1801 MARTIN LUTHER KING OPERATING EXPENSES DRIVE

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

O NI/A

INI/A

LEOD THE CAMPHE

CATHY GARZIO

AUSTIN, TX 78746		I		
SCHOOL 6500 ST STEPHENS DRIVE	50.	88,00	IN/A	BUILDING FUND

AUSTIN, TX 78746

STANFORD UNIVERSITY SCHOOL OF MEDICINE
DEVELOPMENT SERVICES PO
BOX 20466

STANFORD UNIVERSITY 94-1156365
S01(C)(3)
S0,000
O
N/A
N/A
N/A
TO SUPPORT THE
DIVERSITY EFFORTS IN
THE DEPARTMENT OF
MEDICINE LED BY

00 000

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

E01(C)(2)

CT CTEDUENIC EDICCODAL

STANFORD, CA 94305

74 1100670

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 74-3007857 501(C)(3) 49.600 O N/A IN/A STILL WATER CHRISTIAN ITO SUPPORT THE

MINISTRIES INC IESPERANZA DE LA PO BOX 1885 CRUZ CAPITAL PROJECT BOERNE, TX 78006

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

TUSCALOOSA, AL 35401

STILL MAN COLLEGE 63-0315935 501(C)(3) 50.000 O N/A IN/A FOR GENERAL 3601 STILLMAN ROAD OPERATING EXPENSES

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

OPERATING EXPENSES

STRONG FOUNDATION 414 N HACKBERRY STREET SAN ANTONIO, TX 78202	43-1835596	501(C)(3)	6,000	0	N/A	N/A	FOR GENERAL OPERATING EXPENSES
SUMMER DREAMS INC	74-2899917	501(C)(3)	150,000	0	N/A	N/A	FOR GENERAL

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

PO BOX 140 HUNT, TX 78024

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 74-1143132 501(C)(3) 7.500 O N/A IN/A SUNSHINE COTTAGE SCHOOL HEARING TECHNOLOGY

OPERATING EXPENSES

FOR DEAF CHILDREN
603 E HILDEBRAND AVENUE
SAN ANTONIO, TX 78212

SYMPHONY SOCIETY OF SAN 74-1185669 501(C)(3) 106,772 0 N/A N/A FOR GENERAL

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

ANTONIO

PO BOX 658

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 83-1659654 501(C)(3) 17.500 O N/A IN/A FOR GENERAL TAKES SO LITTLE 427 EVANS AVENUE OPERATING EXPENSES

SAN ANTONIO, TX 78209

TEACH FOR AMERICA INC
ONE RIVERWALK PLACE 700 N
ST MARYS
STREFT SUITE 200

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 30-0208271 501(C)(3) 59.650 O N/A IN/A TO START THE TEAMABILITY INC.

1711 NORTH TRINITY
SAN ANTONIO, TX 78201

TEMPLE BETH-EL 74-1246242 501(C)(3) 6.900 0 N/A N/A TO SUPPORT AN

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

TEMPLE BETH-EL 74-1246242 501(C)(3) 6,900 0 N/A N/A TO SUPPORT AND ESTABLISH THE RABBI SAN ANTONIO, TX 78212 SAMUEL STAHL ANNUAL

LECTURESHIP

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

COLLEGE STATION, TX 77842

TEXAS A&M FOUNDATION 401 GEORGE BUSH DRIVE COLLEGE STATION, TX 77840	74-2245072	501(C)(3)	5,000	0	N/A		FOR GENERAL OPERATING EXPENSES
TEXAS A&M UNIVERSITY - COLLEGE STATION DEPT OF STUDENT FINANCIAL AID P O BOX 30016	74-6000531	501(C)(1)	101,190	0	N/A	1 7	FOR GENERAL OPERATING EXPENSES

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

TAMU

COLLEGE STATION, TX 77843

				_		h./^	
TEXAS A&M UNIVERSITY 12TH MAN FOUNDATION PO BOX 2800 COLLEGE STATION, TX 77841	74-1185725	501(C)(3)	50,000	0	N/A	N/A	FOR GENERAL OPERATING EXPENSES

74-6000531 501(C)(1) 50.0001 OIN/A IN/A TEXAS A&M UNIVERSITY MAYS I IFOR GENERAL SCHOOL OF BUSINESS OPERATING EXPENSES 440 WEHNER BUILDING 4113

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

 ΔIMI

IN/A

FOR GENERAL

of southwest

FOUNDATION FOR

BIOMEDICAL RESEARCH

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

501(C)(1)

TEXAS A&M LINIVERSITY-SAN

RESEARCH INSTITUTE PO BOX 760549

SAN ANTONIO, TX 78245

74-6000531

ANTONIO OFFICE OF SCHOLARSHIPS FINANCIAL AID ONE UNIVERSITY WAY SAN ANTONIO, TX 78224	74 0000331	301(0)(1)	30,000	3	N/A		OPERATING EXPENSES
TEXAS BIOMEDICAL	74-1109630	501(C)(3)	6,450	0	N/A	N/A	FOR ANNUAL SUPPORT

an nonl

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

501(C)(3)

74-2886380

TEXAS DIAPER BANK

1803 GRANDSTAND DRIVE 150 SAN ANTONIO, TX 78238

TEXAS BURN SURVIVOR	74-2786500	501(C)(3)	7,000	0 N/A	N/A	TO ASSIST WITH SCAR
SOCIETY						MANAGEMENT FUND
8531 N NEW BRAUNFELS						AND SUMMER CAMP
AVENUE SUITE						
204						
SAN ANTONIO, TX 78217						

O N/A

N/A

HELP PROGRAM

5.000

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

SAN ANTONIO, TX 78229

TEXAS LUTHERAN UNIVERSITY 1000 WEST COURT STREET SEGUIN,TX 78155	74-1109748	501(C)(3)	50,000	0	N/A	N/A	FOR GENERAL OPERATING EXPENSES
TEVAC DUBLIC BADIO	74 2550514	E01(C)(2)	00 E34		NI/A	N/A	TDD HEADOLIABTERS

TEXAS PUBLIC RADIO /4-2559514 501(C)(3)| 88.534 O I N/A TPR HEADQUARTERS 8401 DATAPOINT DRIVE SUITE IAND STUDIO 800 IRELOCATION AND

RENOVATION

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

SOCIETY FOUNDATION 24165 IH 10 WEST SUITE 217 510 SAN ANTONIO, TX 78257	/6-0365382	501(C)(3)	10,000	0	N/A	1 7	OPERATING EXPENSES

501(C)(3) 53.020 O N/A N/A THE ARC OF SAN ANTONIO 74-1200110 IFOR GENERAL 13430 WEST AVENUE OPERATING EXPENSES

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) THE ARMY RETTREMENT 74-2244155 501(C)(3) 11 884 O N/A IN/A FOR GENERAL

OPERATING EXPENSES

RESIDENCE COMMUNITY - SAN	 (-)(-)	,		OPERATING EXPENSES
ANTONIO				
7400 CRESTWAY				
SAN ANTONIO, TX 78239				

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

PO BOX 831444

SAN ANTONIO, TX 78283

N/A THE CANNOLI FUND 45-2476260 501(C)(3) 8.000 O N/A FOR GENERAL

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

THE CARVER DEVELOPMENT BOARD 226 N HACKBERRY STREET SAN ANTONIO, TX 78202	74-2480343	501(C)(3)	5,000	0	N/A		FOR GENERAL OPERATING EXPENSES
THE CHARITY BALL ASSOCIATION OF SAN	74-1488436	501(C)(3)	6,000	0	N/A	l '	FOR GENERAL OPERATING EXPENSES

ASSOCIATION OF SAN ANTONIO INC PO BOX 2357

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

2102

THE CHILDREN'S SHELTER 2939 W WOODLAWN AVENUE SAN ANTONIO, TX 78228	74-1109660	501(C)(3)	702,000	0	N/A		TO SUPPORT THE CHILDREN'S HOPE CENTER
THE CULINARY INSTITUTE OF AMERICA SAN ANTONIO 312 PEARL PARKWAY BLDG 2 SUITE 2102	06-0653264	501(C)(3)	172,905	0	N/A	1 7	FOR GENERAL OPERATING EXPENSES

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

DAYTON, OH 45423

THE DAISY FUND PO BOX 90564 SAN ANTONIO, TX 78209	35-2372827	501(C)(3)	15,000	0	N/A	N/A	PET FOOD, VETERINARY CARE, PROJECT KINDNESS, PAWEDU
							11211200, 11111200

THE DAYTON FOUNDATION 31-6027287 501(C)(3) 11,000 O N/A N/A FOR THE DEMPSEY 40 N MAIN STREET SUITE 500 IEDUCATION AWARD

FUND #2804

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

SAN ANTONIO, TX 78291

THE DOSEUM 2800 BROADWAY SAN ANTONIO, TX 78209	74-2659746	501(C)(3)	11,000	0	N/A	TO SUPPORT THE ANNUAL CHALLENGE MATCHING GRANT
THE KLRN ENDOWMENT FUND INC PO BOX 9	74-2709188	501(C)(3)	10,604	0	N/A	IN SUPPORT OF THE CURIOUS GEORGE PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 74-2707895 501(C)(3) 26.057 IN/A THE MAGIK THEATRE O N/A EXPANDING CHILDRENS

420 S ALAMO STREET ACCESS TO THEATRE SAN ANTONIO, TX 78205 PERFORMANCE AND

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

SAN ANTONIO, TX 78233

IEDUCATION 01-0949598 501(C)(3) 15.000 O N/A IN/A FOR THE POWER OF THE PROSTHETIC FOUNDATION PROSTHETICS PROJECT 5047 SHERRI ANN ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government THE SALVATION ARMY 58-0660607 501(0)(3) 33 526 O N/A IN/A FOR DISASTER RELIEF

521 W ELMIRA SAN ANTONIO, TX 78212	30 000007	301(0)(3)	33,320	,	147	.,	TON DISKSTER RELEASE
THE SCHOOL BOARD PROJECT 122 LEWIS STREET C/O OPT	81-3833174	501(C)(3)	60,000	0	N/A	-	FOR GENERAL OPERATING EXPENSES

IN EXPERTS

SAN ANTONIO, TX 78212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) THE UNIVERSITY OF IOWA 42-6004813 501(C)(3) 10.000 O N/A N/A FOR GENERAL

FOR THE NEW SCHOOL

IENTRANCE

CENTER FOR ADVANCEMENT PO BOX 4550 IOWA CITY, IA 52244							OPERATING EXPENSES
THE WINSTON SCHOOL SAN	74-2529262	501(C)(3)	275,000	0	N/A	N/A	TO SUPPORT THE

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

SAN ANTONIO, TX 78229

CAPITAL CAMPAIGN ANTONIO 8565 EWING HALSELL DRIVE WITH NAMING RIGHTS

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

IEXPENDITURES

THE WITTE MUSEUM 3801 BROADWAY SAN ANTONIO, TX 78209	74-1400537	501(C)(3)	393,926	0	N/A		FOR GENERAL OPERATING EXPENSES
THORNHILL PWS ISL INC	20-3817334	501(C)(3)	5,000	0	N/A	N/A	FOR CAPITAL

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

219 PADDLEWHEEL DRIVE FLORISSANT, MO 63033

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 26-0371270 501(C)(3) 9.500 O N/A IN/A IN SUPPORT OF THE THRIVEWELL CANCER THRIVEWELL CANCER

FOUNDATION PO BOX 29331 FOUNDATION SAN ANTONIO, TX 78229 TMI THE EPISCOPAL SCHOOL 74-1109666 501(C)(3) 5.000 O N/A IN/A

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

SAN ANTONIO, TX 78257

LUNCHEON FOR GENERAL OF TEXAS OPERATING EXPENSES 20955 WEST TEJAS TRAIL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government TOBIN CENTER FOR THE 26-1517165 501(C)(3) 42.500 OIN/A IN/A TOBIN CENTER FOR THE

25 BROADWAY 3RD FLOOR

NEW YORK, NY 10004

PERFORMING ARTS 115 AUDITORIUM CIRCLE SAN ANTONIO, TX 78205		(-)(-)	-				PERFORMING ARTS DANCE SERIES
TOGETHER EDUCATION INC	26-1525207	501(C)(3)	4.506.520	0	N/A	N/A	FOR RELAY LAB

SCHOOLS EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 42-1589520 501(C)(3) 15.000l IN/A IATASCOSA SPAY TRI-CITY ANIMAL SANCTUARY O N/A PO BOX 194 INEUTER ASSISTANCE

SOMERSET, TX 78069 PROGRAM TRINITY EPISCOPAL CHURCH -74-2538854 501(C)(3) 5.000 O N/A N/A

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

MARBLE FALLS, TX 78654

FOR SUPPORT OF THE MARBLE FALLS TRINITY EPISCOPAL 909 AVENUE D ICHURCH MISSION

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

TRINITY UNIVERSITY ONE TRINITY PLACE SAN ANTONIO, TX 78212	74-1109633	501(C)(3)	26,015	0	N/A	FOR GENERAL OPERATING EXPENSES
TRISH MULTIPLE SCLEROSIS RESEARCH CENTER OF NEW YORK INC	25-1922851	501(C)(3)	50,000	0	N/A	FOR GENERAL OPERATING EXPENSES

521 WEST 57TH STREET 4TH FLOOR

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

NEW YORK, NY 10019

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

O N/A

N/A

FOR GENERAL

TRUST FOR HOUSING PO BOX 2007	82-4263384	501(C)(3)	5,000	0	N/A	1 7	FOR GENERAL OPERATING EXPENSES
TELLURIDE, CO 81435							

100,000

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

501(C)(3)

TUESDAY MUSICAL CLUB

SAN ANTONIO, TX 78212

PO BOX 15215

90-0733578

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) US AIR FORCE ACADEMY 26-0537053 501(C)(3) 5.260 O N/A N/A TO SUPPORT THE

OPERATING EXPENSES

	 ==./=>/=>		 	
ENDOWMENT 3116 ACADEMY DRIVE SUITE 200 USAF ACADEMY, CO 80840				CLASS OF 1965 GIFT PROJECT

UNICORN CENTERS INC 74-2354808 501(C)(3) 14,597 OIN/A IN/A IFOR GENERAL

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

4630 HAMILTON WOLFE ROAD

SAN ANTONIO, TX 78229

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government LINITED WAY OF CAN ANTONIO 74-1272221 E01/C)/3) 40 750l O N/A N/A LEOD CENEDAL

		==:(=)(=)				11/4	
SAN ANTONIO, TX 78293							
PO BOX 898							
AND BEXAR COUNTY							OPERATING EXPENSES
ONLIED WAT OF SAN ANTONIO	74-12/2301	301(0)(3)	40,/35	U U	IV/ A	1197	I OK GLINEKAL

SAN ANTONIO, TX 78297

UNIVERSITY HEALTH SYSTEM 74-6002164 501(C)(3) 7.2741 OIN/A IN/A IFOR GENERAL PO BOX 2096 OPERATING EXPENSES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) UNIVERSITY OF TEXAS AT 74-6000203 501(C)(1) 25,000 0 N/A N/A FOR GENERAL

AUSTIN OFFICE OF DEVELOPMENT MECHANICAL ENGINEERING 204 E DEAN KEETON STREE AUSTIN, TX 78712							OPERATING EXPENSES
UNIVERSITY OF TEXAS AT	74-6000203	501(C)(1)	5,000	0	N/A	N/A	FOR GENERAL

OPERATING EXPENSES

UNIVERSITY OF TEXAS AT 74-6000203 AUSTIN COCKRELL SCHOOL OF ENGINEERING

1 UNIVERSITY STATION C2100

AUSTIN, TX 78712

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance UNIVERSITY OF TEXAS AT SAN 74-1977996 501(C)(1) 82.562 O N/A IN/A FOR GENERAL ANTONIO OPERATING EXPENSES ONE UTSA CIRCLE SAN ANTONIO, TX 78249

SAN ANTONIO, TX 78249

UNIVERSITY OF THE 74-1109661 501(C)(3) 106,015 0 N/A N/A FOR GENERAL OPERATING EXPENSES OFFICE OF FINANCIAL AID 4301 BROADWAY CPO 308

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

SAN ANTONIO, TX 78209

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

1 UNIVERSITY STATION C1160

AUSTIN, TX 78712

UT - DEPARTMENT OF CHEMISTRY AND BIOCHEMISTRY 105 E 24TH STREET A5300 AUSTIN, TX 78712	74-6000203	501(C)(3)	69,416	0	N/A		FOR GENERAL OPERATING EXPENSES
		l l		I	I	1	1

74-6000203 501(C)(3) 69,416 O N/A N/A FOR GENERAL UT - DEPARTMENT OF GEOLOGICAL SCIENCES OPERATING EXPENSES

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

UT HEALTH SA - CENTER FOR	74-1587488	501(C)(3)	10,725	0	N/A	N/A	FOR GENERAL
MEDICAL HUMANITIES &							OPERATING EXPENSES
ETHICS							
7703 FLOYD CURL DRIVE MC							
7730							
SAN ANTONIO, TX 78229							

501(C)(3) 149.638 O N/A N/A UT HEALTH SAN ANTONIO 74-1587488 FOR GENERAL 7703 FLOYD CURL DRIVE MAIL OPERATING EXPENSES CODE

7835 SAN ANTONIO, TX 78229

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

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

7703 FLOYD CURL DR MC 7835 SAN ANTONIO, TX 78229

UT HEALTH SAN ANTONIO -	74-1586031	501(C)(3)	46,000	0	N/A	FOR GENERAL
MAIN CAMPUS						OPERATING EXPENSES
7703 FLOYD CURL DRIVE MC						
7835						
SAN ANTONIO, TX 78229						

501(C)(3) 69,416 O N/A N/A UT HEALTH SAN ANTONIO -74-1587488 FOR GENERAL OFFICE OF DEVELOPMENT OPERATING EXPENSES

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

UTSA - SCHOOL OF ARCHITECTURE	74-1717115	501(C)(3)	5,000	0	N/A	IN SUPPORT OF THE ALICIA ROMMO
						l
501 W CESAR CHAVEZ						MEMORIAL
SAN ANTONIO, TX 78207						ENDOWMENT FUND AT
·						UTSA

501(C)(3) 35,000 O N/A N/A VANDERBILT UNIVERSITY 62-0476822 FOR GENERAL

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

NASHVILLE, TN 37240

PMB 407727 2301 OPERATING EXPENSES VANDERBILT PLACE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government VET TRIIP INC 23-7408422 501(0)(3) 15 000 l O N/A IN/A FOR GENERAL

PO BOX 460902 SAN ANTONIO, TX 78246	23 7 100 122	301(0)(3)	13,000	,	14,71	OPERATING EXPENSES
VICTORY OUTREACH OF TEXAS	23-7399475	501(C)(3)	16,725	0	N/A	FOR GENERAL OPERATING EXPENSES

TINC PO BOX 37387

SAN ANTONIO, TX 78237

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government VISIONWORKS INC 74-2924336 501(0)(3) 220 0001 O N/A IN/A FOR GENERAL

PO BOX 692153 SAN ANTONIO, TX 78269	7 1 252 1555	301(3)(3)	223,000	Ĭ		,	OPERATING EXPENSES
VOICES FOR CHILDREN OF	74-2987232	501(C)(3)	5,000	0	N/A		BOARD AND MISSION

SAN ANTONIO, TX 78207

ISTRENGTHENING SAN ANTONIO 118 N MEDINA STREET 121

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

O N/A

FOR GENERAL

FOR GENERAL

OPERATING EXPENSES

VOLONIELIN SERVICES	/ 1 1303003	301(0)(3)	10,103	 114/73	1. 2	II OK OFINEIOKE
COUNCIL OF THE SAN						OPERATING EXPENSES
ANTONIO STATE HOSPITAL						1
6711 S NEW BRAUNFELS						1
SAN ANTONIO, TX 78223						1

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

501(C)(3)

VOLUNTEER SERVICES

SACRAMENTO, CA 95811

1900 K STREET

74-1589603

N/A WEAVE INCORPORATED 94-2493158 501(C)(3) 12,601 O N/A ANNUAL DISTRIBUTION

10 485

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 74-2012897 501(C)(3) 50.000 N/A WILDLIFE RESCUE & O N/A INATIVE WILDLIFE REHABILITATION INC. REHABILITATION &

TREHABILITATION OF

INJURED OR ORPHANED BIRDS, FOWLS

PO BOX 369 KENDALIA, TX 78027							RELEASE
WINGS RESCUE CENTER	30-0931951	501(C)(3)	10,000	0	N/A	N/A	RESCUE AND

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

PO BOX 1912

ROCKPORT, TX 78381

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

·						
241 MENLO PARK, CA 94025						
WISDOM AND MONEY 1259 EL CAMINO REAL SUITE	47-5520977	501(C)(3)	5,500	0	N/A	SUPPORT GENERAL OPERATING EXPENSES

74-2601452 501(C)(3) 9.306 O N/A IN/A WOMAN'S CLUB OF SAN IFOR GENERAL ANTONIO OPERATING EXPENSES 1717 SAN PEDRO AVENUE

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

SAN ANTONIO, TX 78212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) WOMEN'S SYMPHONY LEAGUE 74-1882139 501(C)(3) 5,500 O N/A N/A FOR GENERAL OF ALICTIA ODED ATTRIC EVENIORS

ESTES PARK, CO 80511

PO BOX 5998 AUSTIN, TX 78763						OPERATING EXPENSES
YMCA OF THE ROCKIES 2515 TUNNEL ROAD	84-0404913	501(C)(3)	5,500	0	N/A	 TO SUPPORT THE

NEW YURT VILLAGE AT

IRANCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) YOAKUM ISD 74-6002585 501(C)(1) 400 0001 O N/A IN/A FOR GENERAL

PO BOX 737 YOAKUM, TX 77995		(-/(-/	,			OPERATING EXPENSES
YOUNG LIFESAN ANTONIO TX452 1150 N LOOP 1604 W SUITE 108-615	84-0385934	501(C)(3)	5,000	0	N/A	FOR GENERAL OPERATING BUDGET TX460-BLANCO, TX

SAN ANTONIO, TX 78248

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) YOUNG WOMEN'S CHRISTIAN 74-1143135 501(C)(3) 11.500 O N/A IN/A FOR GENERAL OPERATING EXPENSES ASSOCIATION

6756 MONTGOMERY DRIVE SAN ANTONIO, TX 78239						
YOUTH CODE JAM SAN ANTONIO 14439 NW MILITARY HWY SUITE 108 PMB	81-1634308	501(C)(3)	7,500	0	N/A	FAMILY SUPPOR

SAN ANTONIO, TX 78231

/ EDUCATIONAL DRT 509

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

YOUTH ORCHESTRAS OF SAN ANTONIO	74-1926713	501(C)(3)	51,801	0	N/A	N/A	TO SUPPORT ORCHESTRA MUSIC
106 AUDITORIUM CIRCLE							EDUCATION
SUITE 130							
SAN ANTONIO, TX 78205							

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49331	18097	050				
Sch	nedule J	Co	mpensati	ion Information	0	OMB No. 1545						
(Fori	m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization anguered "Yes" on Form 990, Bart IV, line 33										
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.										
-	tment of the Treasury	► Go to <u>www.irs.go</u> u		instructions and the latest inform	mation.	Open						
	al Revenue Service me of the organiza	lation		1	Employer identifica		ectio Imber					
	ANTONIO AREA FO				74-6065414							
Pa	rt I Questi	ons Regarding Compensat	ion		74-6065414							
	- Quissii	one regulating compensati					Yes	No				
1a				the following to or for a person liste y relevant information regarding the								
	First-class or charter travel Housing allowance or residence for personal use				personal use							
		companions		Payments for business use of person								
		nification and gross-up payments		Health or social club dues or initiation								
	☐ Discretion	ary spending account	Ш	Personal services (e.g., maid, chauf	feur, chef)							
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b						
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all ees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a? .										
	airectors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked on Lir	ne la?							
3				d to establish the compensation of the	ne							
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III.							
				Weither and law and a set of the								
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study								
		of other organizations	<u> </u>	Approval by the board or compensa	tion committee							
4	During the year	, did any person listed on Form 9	990, Part VII, Se	ction A, line 1a, with respect to the fi								
	related organiza	ition:										
a		ance payment or change-of-cont				4a	Yes					
b	•	r receive payment from, a supple	•	•		4b		No				
С	•			nsation arrangement?		4c		No_				
	,	, ,										
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.								
5		ed on Form 990, Part VII, Sectior ontingent on the revenues of:		the organization pay or accrue any								
а	The organization	1?				5a		No				
b		anization?				5b		No_				
6		ed on Form 990, Part VII, Sectior ontingent on the net earnings of:		the organization pay or accrue any								
а	The organization	1?				6a		No				
b						6b		No				
	· ·	6a or 6b, describe in Part III.										
7	payments not d	escribed in lines 5 and 6? If "Yes	," describe in Pa	the organization provide any nonfixed rt III		7		No				
8	subject to the in	nitial contract exception described	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de		8		Ne				
9	If "Yes" on line	8, did the organization also follov	v the rebuttable	presumption procedure described in	Regulations section	9		No_				
For F	Panerwork Redu	ction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No. 5	50053T Schedule		1 990)	2019				

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. (B) Breakdown of W-2 and/or 1099-MISC compensation (A) Name and Title (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(i)-(D)column (B) reported (ii) Bonus & incentive (i) Base (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 REBECCA BRUNE 198,341 (i) 22,660 177,598 11,200 4,829 0 414,628 COO (UNTIL 8/19/19) 0 0 0 0 0 0 0 (ii) 2 MARJORIE FRENCH 256,309 (i) 0 0 0 14,499 121 270,929 PRESIDENT/CEO 0 0 0 0 0 0 0 (ii) 3 REBECCA HELTERBRAND 187,169 (i) 1,306 0 6,950 10,751 206,176 0 VP OF STRATEGY AND INNOVATION 0 0 0 0 0 0 0 (ii) 4 LYNDA CABELL 194,858 (i) 79 1,306 0 5,807 202,050 0 CFO 0 0 0 0 0 0 0 (ii) 5 LISA BRUNSVOLD 149,123 (i) 1,307 0 5,964 9,844 0 166,238 VP OF DEVELOPMENT AND DONOR SERVICES 0 0 0 0 0 0 0 (ii) 6 ARENDA BURNS 145,509 (i) 1,421 0 5,826 10,751 163,507 0 VP OF HUMAN RESOURCES AND ORGANIZATI 0 (ii) 0 0 0 0 0 0

Schedule J (Form 990) 2019	Page 3						
Part III Supplemental Information							
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						
Return Reference Explanation							
ART I, LINE 4A REBECCA BRUNE RECEIVED A PAYMENT OF \$177,598 PURSUANT TO LINE 4A.							
	Schedule 1 (Form 990) 2019						

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493318097050 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** SAN ANTONIO AREA FOUNDATION 74-6065414 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 110 15,702,993 STOCK MARKET QUOTES 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, Χ 65,081,977 FMV or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . 1,117,500 FMV Real estate—Commercial . Real estate—Other . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► (GIFT CARDS) 54,200 FMV 26 Other ▶ (______) 27 Other ▶ (______) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
PART I, COLUMN (B):	REPORTING THE NUMBER OF CONTRIBUTIONS
	Schedule M (Form 990) (2019)

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -		DLN: 93493318097050
SCHEDUL Form 990 or EZ)	990- Complete to provide information for Form 990 or 990-EZ or to prov	On to Form 990 or 990-EZ or responses to specific questions on vide any additional information. m 990 or 990-EZ. <u>990</u> for the latest information.	OMB No. 1545-0047 2019 Open to Public Inspection
Iame l Bethe დნც AN ANTONIO ARE		Employer 74-60654	r identification number 14
Return Reference	e O, Supplemental Information	Explanation	
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE IS COMPOSED OF THE E IMMEDIATE PAST CHAIR, THE VICE CHAIR, THE PF N ADDITION, THE CHAIR MAY APPOINT ADDITIONAL CUTIVE COMMITTEE SHALL EXERCISE THE POWERS EN MEETINGS OF THE BOARD, PROVIDED, HOWEVE OR POLICY OF THE FOUNDATION WHICH HAS BEEN FURTHER LIMITED BY THE BOARD OF DIRECTORS A	RESIDENT, THE TREASURER, AND THE S DIRECTORS TO THE EXECUTIVE COMM S OF THE BOARD OF DIRECTORS IN THE ER, THAT IT SHALL HAVE NO POWER TO I ESTABLISHED BY THE BOARD, AND ITS	SECRETARY. I IITTEE. THE EXE E INTERVAL BETWE REVOKE ANY PRI

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	A DETAILED REVIEW OF THE FORM 990 WAS PERFORMED BY THE SAN ANTONIO AREA FOUNDATION'S AUDIT
PART VI,	FINANCE COMMITTEE. ALL COMMITTEE MEMBERS RECEIVED A COPY OF THE FORM 990. ONCE ACCEPTED B
SECTION B,	Y THE AUDIT/FINANCE COMMITTEE, A COPY OF THE FORM 990 WAS PROVIDED TO EACH MEMBER OF THE B
LINE 11B	OARD OF DIRECTORS BEFORE FILING WITH THE IRS.

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE SAN ANTONIO AREA FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY THAT REQUIRES AL L MEMBERS OF THE BOARD OF DIRECTORS TO ANNUALLY DISCLOSE POTENTIAL CONFLICTS OF THEMSELVES AND THEIR FAMILY MEMBERS ON A QUESTIONNAIRE. THE QUESTIONNAIRES ARE REVIEWED FOR CONFLICT S. ANY QUESTIONNAIRES THAT DISCLOSE POTENTIAL CONFLICTS ARE BROUGHT BEFORE THE BOARD OF DI RECTORS FOR REVIEW. NO MEMBER WITH A FINANCIAL CONFLICT SHALL EVALUATE OR VOTE ON ANY MATT ER IN WHICH HE OR SHE HAS A FINANCIAL CONFLICT OF INTEREST AND SHALL NOT USE HIS OR HER PE RSONAL INFLUENCE WITH OTHER RESPONSIBLE MEMBERS TO APPROVE OR DISAPPROVE ANY ACTION BY THE FOUNDATION RELATED TO THE MATTER. MEMBERS WHO HAVE AN EMOTIONAL CONFLICT OF INTEREST OR A N APPARENT CONFLICT OF INTEREST MAY CONTINUE TO PARTICIPATE IN THE DISCUSSION AND MAY VOTE ON THE MATTER IF NO FINANCIAL CONFLICT OF INTEREST EXISTS PROVIDED THAT THE MEMBER FIRST DISCLOSES HIS OR HER EMOTIONAL OR APPARENT CONFLICT OF INTERESTS.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE SAN ANTONIO AREA FOUNDATION USES THE CEO EVALUATION FORM RECEIVED FROM THE COUNCIL ON FOUNDATIONS. THE FOUNDATION PROVIDES THE EVALUATION DOCUMENT ALONG WITH THE ACCOMPLISHMENT REPORT TO EACH MEMBER OF THE BOARD OF DIRECTORS FOR COMPLETION. ALL REPLIES ARE SENT DIRE CTLY TO A SINGLE MEMBER OF THE GOVERNANCE COMMITTEE TO COMPILE IN A REPORT FOR THE COMMITT EE CHAIR TO REVIEW. THE GOVERNANCE COMMITTEE CHAIR MEETS WITH THE BOARD CHAIR TO REVIEW THE COMPILATION. THE COMPILATION IS THEN PRESENTED TO THE REMAINING MEMBERS OF THE BOARD OF DIRECTORS IN AN EXECUTIVE SESSION. THE BOARD CHAIR MEETS WITH THE CEO TO ADDRESS ANY ISSUE S. IN REGARD TO OTHER OFFICERS AND KEY EMPLOYEES, THE CEO PREPARES A HUMAN RESOURCES ANALY SIS THAT INCLUDES A COUNCIL ON FOUNDATIONS COMPENSATION SUMMARY WITH THE MOST RECENTLY AVA ILABLE BASE SALARIES. THE CEO USES THIS INFORMATION TO MAKE SALARY RECOMMENDATIONS FOR ALL STAFF, WHICH ARE REVIEWED AND APPROVED BY THE FINANCE COMMITTEE AND THE BOARD OF DIRECTOR S.

Return Explanation
Reference

FORM 990, PART VI, SECTION C, LINE 19

Explanation Return Reference

FORM 990. CHANGE IN VALUE OF SPLIT INTEREST 4,934,114. TRANSFERS 25.247. PART XI.

LINE 9:

990 Schedule O, Supplemental Information

Return Explanation

Reference	
FORM 990,	THE FINANCIAL STATEMENTS WERE AUDITED ON A CONSOLIDATED BASIS. THE AUDIT COMMITTEE ASSUMES
PART XII.	RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN

LINE 2C: INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493318097050 OMB No. 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2019 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** SAN ANTONIO AREA FOUNDATION 74-6065414 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (e) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. See Additional Data Table (a)
Name, address, and EIN of related organization (b) (g) Legal domicile (state Exempt Code section Direct controlling Section 512(b) Primary activity Public charity status or foreign country) (if section 501(c)(3)) (13) controlled entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2019

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. (d) (f) (i) (j) (k) (c) (e) (g) (h) (a) (b) Name, address, and EIN of Primary Direct Predominant Share of Share of Disproprtionate Code V-UBI General or Percentage Legal related organization activity domicile controlling income(related, total income end-of-year allocations? amount in box managing ownership unrelated, 20 of (state entity assets partner? Schedule K-1 excluded from (Form 1065) foreign tax under country) sections 512-514) Yes No Yes No Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (i) (a) (b) (c) (d) (e) (f) (g) (h) Share of total Share of end-of-Name, address, and EIN of Legal Direct controlling Type of entity Section 512 Primary activity Percentage related organization domicile (C corp, S (b)(13)entity income year ownership (state or foreign assets controlled corp, country) or trust) entity? Yes No (1) ERNEST B AND MARIE GRAHAM SCHOLARSHIP FUND SCHOLARSHIPS TX SAN ANTONIO 218,099 8,735,923 100.000 % No AREA FOUNDATION 303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 81-5050142 (2) CHARITABLE REMAINDER TRUSTS (2) TRUSTS ΤX SAN ANTONIO No AREA FOUNDATION 303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 (3)SANTIKOS THEATERS LLC S CORPORATION TX JOHN L SANTIKOS S No CHARITABLE 4630 N LOOP 1604 W STE 501 FOUNDATION SAN ANTONIO, TX 78249 82-3945393

(1)CITY EDUCATION PARTNERS

(4)CITY EDUCATION PARTNERS

(2) CULINARY HEALTH EDUCATION FOR FAMILIES

(3)JOHN L SANTIKOS CHARITABLE FOUNDATION

(5)JOHN L SANTIKOS CHARITABLE FOUNDATION

(6) RAPIER EDUCATIONAL FOUNDATION

Sale of assets to related organization(s) . . .

Name of related organization

Yes

1f

1g

1h

1j

1k

11 Yes

1m

1nl Yes

10 Yes

1p Yes

1q Yes

1r Yes

1s

Schedule R (Form 990) 2019

Method of determining amount involved

Yes

No

Page 3

1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 1a Yes **1**b

1c 1d 1e

В

В

С

S

(b)

Transaction type (a-s)

Amount involved

2,293,786

2,000,000

1,652,203

67.500

2,325,590

67,000

CASH

CASH

CASH

CASH

CASH

CASH

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

Lease of facilities, equipment, or other assets to related organization(s)

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant income	1	(e) re all partners section	(f) Share of total	(g) Share of end-of-year	(h) Disproprtions allocations	ate ?	(i) Code V-UBI amount in box	(j) General managir	or	(k) Percentag ownershi
		(state or foreign country)	(related, unrelated, excluded from tax under sections 512- 514)	0	501(c)(3) rganizations?	income	assets	unocations	20 of Schedule K-1 (Form 1065)		partner?		,
			514)	Yes	No		-	Yes	No		Yes	No	
					l				1	Schodule	e R (Forn	n 00	0) 2010

Schedule R (Form 990) 2019							
Part VII	Supplemental Information						
Provide additional information for responses to questions on Schedule R. (see instructions).							
Return Reference		Explanation					

Software ID: **Software Version:**

EIN: 74-6065414

Name: SAN ANTONIO AREA FOUNDATION

Form 990, Schedule R, Part II - Identification of Related	Tax-Exempt Organizati	ons					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(1 control entit	n 512 13) olled
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 38-3892964	ATTRACT PUBLIC CHARTER SCHOOLS TO SAN ANTONIO	ТХ	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	<u> </u>
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 47-4539590	CHARITABLE GRANTS	ТХ	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215	CHARITABLE GRANTS	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
74-2725791 303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 27-3574052	EDUCATIONAL SCHOLARSHIPS	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 20-5560721	CHARITABLE GRANTS	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 26-1103106	REAL PROPERTY MANAGEMENT	ТХ	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215	REAL PROPERTY MANAGEMENT	тх	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
26-1103393 303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 26-1103518	REAL PROPERTY MANAGEMENT	тх	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 20-4954092	REAL PROPERTY MANAGEMENT	тх	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215	REAL PROPERTY MANAGEMENT	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
26-1102511 303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215	REAL PROPERTY MANAGEMENT	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
26-1103030 303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 26-1103564	REAL PROPERTY MANAGEMENT	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 46-5154387	RAISE FUNDS FOR CARVER ACADEMY	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 74-1109731	MEDICAL AND CHARITY CARE	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 47-7326497	TO SUPPORT THE SAN ANTONIO AREA FOUNDATION	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 82-0660176	PROMOTE HEALTHY EATING	ТХ	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	
303 PEARL PARKWAY STE 114 SAN ANTONIO, TX 78215 61-1949322	STARTUP INTERNSHIPS	TX	501(C)(3)	LINE 12A, I	SAN ANTONIO AREA FOUNDATION	Yes	

(a) (b) (c) Name of related organization Transaction Amount Involved (d) type(a-s) Method of determining amount involved CITY EDUCATION PARTNERS В 2,293,786 CASH CULINARY HEALTH EDUCATION FOR FAMILIES В 2.000.000 CASH

Form 990, Schedule R, Part V - Transactions With Related Organizations

JOHN L SANTIKOS CHARITABLE FOUNDATION

RAPIER EDUCATIONAL FOUNDATION

JOHN L SANTIKOS CHARITABLE FOUNDATION	C	1,652,203	CASH
CITY EDUCATION PARTNERS	S	67,500	CASH

2,325,590

67,000

CASH

CASH