

Form **990**
Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
COMMUNITY FOUNDATION OF WEST TEXAS

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
6102 82ND STREET NO 8B

City or town, state or province, country, and ZIP or foreign postal code
LUBBOCK, TX 79424

D Employer identification number
75-1709180

E Telephone number
(806) 762-8061

G Gross receipts \$ 18,716,822

F Name and address of principal officer
STEPHEN WARREN
6102 82ND STREET NO 8B
LUBBOCK, TX 79424

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW CFWTX ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1981

M State of legal domicile TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO ENHANCE THE LIVES OF ALL THE RESIDENTS OF THE TEXAS SOUTH PLAINS THROUGH COMMUNITY ENDOWMENTS

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	23
4 Number of independent voting members of the governing body (Part VI, line 1b)	23
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	6
6 Total number of volunteers (estimate if necessary)	100
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,580,179	6,837,194
9 Program service revenue (Part VIII, line 2g)	17,635	17,329
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,173,312	2,163,666
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,962	10,585
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,774,088	9,028,774
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,970,914	2,509,352
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	378,792	444,615
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 218,843		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	423,847	442,420
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,773,553	3,396,387
19 Revenue less expenses Subtract line 18 from line 12	1,000,535	5,632,387
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	42,056,134	43,923,325
21 Total liabilities (Part X, line 26)	2,178,705	2,072,785
22 Net assets or fund balances Subtract line 21 from line 20	39,877,429	41,850,540

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer: ***** Date: 2019-10-22

STEPHEN WARREN PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date 2019-10-22 Check if self-employed PTIN P01419700

Firm's name ▶ BOLINGER SEGARS GILBERT AND MOSS LLP Firm's EIN ▶ 75-0882037

Firm's address ▶ 8215 NASHVILLE AVENUE LUBBOCK, TX 79423 Phone no (806) 747-3806

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE COMMUNITY FOUNDATION OF WEST TEXAS ENHANCES THE LIVES OF ALL RESIDENTS OF THE TEXAS SOUTH PLAINS REGION, NOW AND FOR GENERATIONS TO COME, BY WORKING TOGETHER WITH OUR DONORS TO BUILD COMMUNITY ENDOWMENT, ADDRESS NEEDS THROUGH GRANTMAKING, AND PROVIDE LEADERSHIP ON KEY COMMUNITY ISSUES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 2,958,550 including grants of \$ 2,509,352) (Revenue \$ 17,329)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 2,958,550

Part IV 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	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? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule C, Part II	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? If "Yes," complete Schedule D, Part I	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? If "Yes," complete Schedule D, Part III	8		No
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, VII, VIII, IX, or X as applicable			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b 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		No
c 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	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
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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		No
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		No
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, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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	

Part IV Checklist of Required Schedules (continued)

		Yes	No
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	No
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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

Part V 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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

<p>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</p>	2a		6		
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>				2b	Yes
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>				3a	No
<p>b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i></p>				3b	
<p>4a 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)?</p>				4a	No
<p>b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>				5a	No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>				5b	No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>				5c	
<p>6a 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?</p>				6a	No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>				6b	
7 Organizations that may receive deductible contributions under section 170(c).					
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>				7a	Yes
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>				7b	Yes
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>				7c	No
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>				7e	No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>				7f	No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>				7g	
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>				7h	
8 Sponsoring organizations maintaining donor advised funds.					
<p>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>				8	No
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>				9a	No
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>				9b	No
10 Section 501(c)(7) organizations. Enter					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b				
11 Section 501(c)(12) organizations. Enter					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>				13a	
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	13b				
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>				14a	No
<p>b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i></p>				14b	
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>				15	No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>				16	No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 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? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 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? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b 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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization 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? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 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: Own website, Another's website, Upon request, Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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: STEPHEN WARREN 6102 82ND STREET STE 8B LUBBOCK, TX 79424 (806) 762-8061

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a			
	b Membership dues . . .	1b			
	c Fundraising events . . .	1c	149,460		
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,687,734		
	g Noncash contributions included in lines 1a - 1f \$		4,888,085		
	h Total. Add lines 1a-1f		6,837,194		

Program Service Revenue			Business Code				
	2a MANAGEMENT FEES		525990	13,529	13,529		
b WORKSHOP INCOME		611600	3,800	3,800			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			17,329				

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			945,064			945,064	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	(i) Real	(ii) Personal					
		b Less rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		b Less cost or other basis and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)			1,218,602			1,218,602
	8a Gross income from fundraising events (not including \$ 149,460 of contributions reported on line 1c) See Part IV, line 18	a						
		b Less direct expenses	b	38,890				
		c Net income or (loss) from fundraising events			10,585			10,585
	9a Gross income from gaming activities See Part IV, line 19	a						
b Less direct expenses		b						
c Net income or (loss) from gaming activities								
10a Gross sales of inventory, less returns and allowances	a							
	b Less cost of goods sold	b						
	c Net income or (loss) from sales of inventory							
11a Miscellaneous Revenue		Business Code						
b								
c								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See Instructions			9,028,774	17,329	0		2,174,251	

Part IX Statement of Functional Expenses

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

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

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
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,319,721	2,319,721		
2 Grants and other assistance to domestic individuals See Part IV, line 22	189,631	189,631		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	113,026	38,429	44,080	30,517
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	275,546	93,602	107,033	74,911
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	10,693	3,636	4,170	2,887
9 Other employee benefits	16,841	5,601	5,941	5,299
10 Payroll taxes	28,509	9,693	11,119	7,697
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	11,850	3,910	4,029	3,911
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	230,747	230,747		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,996			3,996
12 Advertising and promotion	6,280	660	16	5,604
13 Office expenses	25,710	8,673	4,830	12,207
14 Information technology	20,669	6,821	7,027	6,821
15 Royalties				
16 Occupancy	14,350	4,778	4,793	4,779
17 Travel	8,611	2,686	2,201	3,724
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	17,145	4,466	7,308	5,371
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	35,479	11,708	12,063	11,708
23 Insurance	5,210	1,735	1,740	1,735
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 HONORARY HERO'S FUND EX	25,000			25,000
b PROGRAM EXPENSE	17,817	17,817		
c DONOR & GRANTEE RECOGNI	7,701			7,701
d DUES & SUBSCRIPTIONS	5,377	1,344	2,420	1,613
e All other expenses	6,478	2,892	224	3,362
25 Total functional expenses. Add lines 1 through 24e	3,396,387	2,958,550	218,994	218,843
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	2,991,799	2	2,415,992
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	6,073
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	1,750,000
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 763,027		
	b Less accumulated depreciation	10b 136,902	661,604	10c 626,125
	11 Investments—publicly traded securities	38,402,731	11	39,125,135
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	42,056,134	16	43,923,325	
Liabilities	17 Accounts payable and accrued expenses	7,206	17	37,248
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	2,171,499	21	2,035,537
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,178,705	26	2,072,785
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	39,824,229	27	41,730,728
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets	53,200	29	119,812
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	39,877,429	33	41,850,540	
34 Total liabilities and net assets/fund balances	42,056,134	34	43,923,325	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,028,774
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,396,387
3	Revenue less expenses Subtract line 2 from line 1	3	5,632,387
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	39,877,429
5	Net unrealized gains (losses) on investments	5	-3,685,227
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	25,951
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	41,850,540

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 75-1709180

Name: COMMUNITY FOUNDATION OF WEST TEXAS

Form 990 (2018)

Form 990, Part III, Line 4a:

THE ORGANIZATION'S LARGEST PROGRAM IS GRANTMAKING APPROXIMATELY 41% OF GRANTS IN 2018 WERE DIRECTED BY THE BOARD OF DIRECTORS THROUGH FIELD OF INTEREST AND DISCRETIONARY FUNDS THAT ADDRESS VITAL COMMUNITY NEEDS IN THE SOUTH PLAINS REGION AND RESPOND TO EMERGING OPPORTUNITIES IN A WIDE RANGE OF CHARITABLE ORGANIZATIONS FOCUS AREAS INCLUDE BASIC NEEDS AND SELF SUFFICIENCY, EDUCATION AND YOUTH, CIVIC, SOCIAL AND ECONOMIC DEVELOPMENT, AND ARTS AND CULTURE 12% OF FUNDS DISTRIBUTED IN 2018 WERE FROM SCHOLARSHIP FUNDS THE REMAINING 47% OF GRANTS AUTHORIZED BY THE BOARD OF DIRECTORS IN 2018 WERE FROM DESIGNATED AND DONOR-ADVISED FUNDS

Form 990, Part III, Line 4b:

THE ORGANIZATION IS COMMITTED TO GROWING REGIONAL PHILANTHROPY THROUGH ITS NETWORK OF RURAL AFFILIATES IN 2018, THE COMMUNITY FOUNDATION AND ITS AFFILIATES IN PLAINVIEW/HALE COUNTY, POST/GARZA COUNTY, LEVELLAND/HOCKLEY COUNTY AND SLATON CONTINUED AN INITIATIVE TO DEEPEN COMMUNITY ENGAGEMENT AND PROMOTE THE ACCELERATED GROWTH OF ENDOWED ASSETS FOR THE BENEFIT OF THESE COMMUNITIES

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

(A) Name and Title	(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)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
CINDY WHITEHEAD CHAIRMAN	1 00	X		X				0	0	0
RODNEY CATES PAST CHAIRMAN	1 00	X		X				0	0	0
TIM PRIDMORE CHAIR ELECT	1 00	X		X				0	0	0
GREG FREEMAN SECRETARY/TREASURER	1 25	X		X				0	0	0
DIANN WINDHAM GRANTS COMMITTEE	2 00	X		X				0	0	0
TONY PRIVETT VP DONOR RELATIONS	2 00	X		X				0	0	0
ABEL CASTRO DIRECTOR	1 00	X						0	0	0
ANN-MARIE CARRUTH DIRECTOR	1 00	X						0	0	0
CARRIE ELLIS DIRECTOR	1 00	X						0	0	0
CHAD GRANT DIRECTOR	0 25	X						0	0	0

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

(A) Name and Title	(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)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRISTY HARTIN DIRECTOR	1 00	X						0	0	0
DON RUSHING DIRECTOR	1 00	X						0	0	0
JAMES CONWRIGHT DIRECTOR	1 00	X						0	0	0
JEFF KLOTZMAN DIRECTOR	0 30	X						0	0	0
KAREN WORLEY DIRECTOR	1 00	X						0	0	0
LINDA GAITHER 118 - 518 DIRECTOR	1 00	X						0	0	0
MARISA SCHEEF DIRECTOR	1 00	X						0	0	0
MARK MEURER DIRECTOR	1 00	X						0	0	0
MARK WARREN DIRECTOR	2 00	X						0	0	0
MARY MYERS 118 - 518 DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(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)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
MONT MCCLENDON DIRECTOR	1 00	X							0	0	0
NATALIE INDERMAN DIRECTOR	1 00	X							0	0	0
NORVAL POLLARD DIRECTOR	0 50	X							0	0	0
SANDY MARTINEZ DIRECTOR	1 00	X							0	0	0
TED RUSHING DIRECTOR	1 00	X							0	0	0
STEPHEN WARREN PRESIDENT	40 00			X					100,000	0	13,026

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

COMMUNITY FOUNDATION OF WEST TEXAS

Employer identification number

75-1709180

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	2,116,245	1,750,011	2,381,464	1,580,179	6,837,194	14,665,093
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,116,245	1,750,011	2,381,464	1,580,179	6,837,194	14,665,093
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)						5,341,153
6	Public support. Subtract line 5 from line 4						9,323,940

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2,116,245	1,750,011	2,381,464	1,580,179	6,837,194	14,665,093
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	723,491	784,918	611,419	793,632	945,064	3,858,524
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						18,523,617
12	Gross receipts from related activities, etc. (see instructions)					12	81,157

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	50.340%
15	Public support percentage for 2017 Schedule A, Part II, line 14	15	60.820%

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 under section 513						
4	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 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
c	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 (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the 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		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section 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? <i>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.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
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? <i>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.</i>		
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? <i>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.</i>		
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>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
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	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, 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 2018 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 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:

Software Version:

EIN: 75-1709180

Name: COMMUNITY FOUNDATION OF WEST TEXAS

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
COMMUNITY FOUNDATION OF WEST TEXAS

Employer identification number
75-1709180

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	67	228
2 Aggregate value of contributions to (during year)	2,188,707	4,676,403
3 Aggregate value of grants from (during year)	778,989	1,745,514
4 Aggregate value at end of year	12,280,321	29,570,219

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1** Purpose(s) of conservation easements held by the organization (check all that apply)
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____
- 4** Number of states where property subject to conservation easement is located ► _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i)** Revenue included on Form 990, Part VIII, line 1 ► \$ _____
- (ii)** Assets included in Form 990, Part X ► \$ _____
- 2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a** Revenue included on Form 990, Part VIII, line 1 ► \$ _____
- b** Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	39,877,429	35,847,203	34,356,919	34,805,610	32,636,329
b Contributions	6,893,413	1,600,776	2,415,407	1,804,263	2,169,221
c Net investment earnings, gains, and losses	-1,495,610	5,203,003	2,055,387	542,684	2,037,778
d Grants or scholarships	2,509,352	1,970,914	2,181,415	1,981,283	1,120,071
e Other expenditures for facilities and programs	696,346	602,323	667,171	744,390	833,445
f Administrative expenses	218,994	200,316	131,924	69,965	84,202
g End of year balance	41,850,540	39,877,429	35,847,203	34,356,919	34,805,610

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 0 %
 - b** Permanent endowment ▶ 100 000 %
 - c** Temporarily restricted endowment ▶ 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|-----|----|
| | Yes | No |
| (i) unrelated organizations | No | No |
| (ii) related organizations | No | No |
- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		131,691		131,691
b Buildings		565,033	94,172	470,861
c Leasehold improvements				
d Equipment		66,303	42,730	23,573
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶ 626,125

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(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 Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(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)	▶

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	5,371,852
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-3,685,227
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	28,305
e	Add lines 2a through 2d	2e	-3,656,922
3	Subtract line 2e from line 1	3	9,028,774
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	9,028,774

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements	1	3,424,692
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	28,305
e	Add lines 2a through 2d	2e	28,305
3	Subtract line 2e from line 1	3	3,396,387
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	3,396,387

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 75-1709180

Name: COMMUNITY FOUNDATION OF WEST TEXAS

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	AN AGENCY ENDOWMENT IS A TYPE OF DESIGNATED FUND ESTABLISHED BY A CHARITY AT THE COMMUNITY FOUNDATION OF WEST TEXAS FOR THE CHARITY'S OWN BENEFIT OR THE BENEFIT OF A RELATED ENTITY THAT IS, THE DONOR OR RESOURCE PROVIDER AND THE BENEFICIARY OR RECIPIENT IS THE SAME ENTITY COMMUNITY FOUNDATION OF WEST TEXAS HAS LEGAL OWNERSHIP OF FUNDS CONTRIBUTED TO AN AGENCY ENDOWMENT AS SUCH, COMMUNITY FOUNDATION OF WEST TEXAS BOARD HAS FIDUCIARY RESPONSIBILITY OVER THE FUNDS AGENCY ENDOWMENTS ARE ONLY MAINTAINED FOR PUBLIC CHARITIES AND OR GOVERNMENTAL UNITS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE ORGANIZATION'S ENDOWMENT FUNDS ARE ADMINISTERED EXCLUSIVELY FOR CHARITABLE PURPOSES WHICH ENHANCE PHILANTHROPY AND STRENGTHEN THE SENSE OF COMMUNITY WITHIN THE TEXAS SOUTH PLAINS AREA

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION HAS ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA THE PRIMARY TAX POSITION OF THE FOUNDATION IS ITS FILING STATUS AS A TAX EXEMPT ENTITY THE FOUNDATION DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ITS TAX POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE (IRS), OR OTHER STATE TAXING AUTHORITIES THE FOUNDATION IS NO LONGER SUBJECT TO EXAMINATIONS BY FEDERAL TAXING AUTHORITIES FOR YEARS BEFORE 2015 THE FOUNDATION RECOGNIZES INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES THERE WERE NO PENALTIES OR INTEREST RECOGNIZED DURING THE YEAR ENDED DECEMBER 31, 2018

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES REPORTED ON PART VIII LINE 8B 28,305

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES REPORTED ON PART VIII LINE 8B 28,305

**SCHEDULE G
(Form 990 or 990-EZ)**

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2018

**Open to Public
Inspection**

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
 Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION OF WEST TEXAS

Employer identification number
75-1709180

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.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** 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
- b** If "Yes," list the ten 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 or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 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

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a)Event #1	(b) Event #2	(c)Other events	(d)
		HEROES LUNCHEON (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	188,350			188,350
	2 Less Contributions	149,460			149,460
	3 Gross income (line 1 minus line 2)	38,890			38,890
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	22,064			22,064
	8 Entertainment				
	9 Other direct expenses	6,241			6,241
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				28,305
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				10,585

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶
 Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶
 Address ▶

16 Gaming manager information

Name ▶
 Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

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

Schedule I (Form 990)

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization COMMUNITY FOUNDATION OF WEST TEXAS

Employer identification number 75-1709180

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (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. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 99
3 Enter total number of other organizations listed in the line 1 table 1

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS FOR HIGHER EDUCATION SPECIFICALLY SCHOLARSHIPS FOR ATTENDING JUNIOR COLLEGES OR UNIVERSITIES	115	189,631			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	<p>THE COMMUNITY FOUNDATION OF WEST TEXAS MAKES GRANTS TO NON-PROFIT ORGANIZATIONS CAPABLE OF PROVIDING SERVICES FOR AREA RESIDENTS IN THE CASE OF DONOR-ADVISED FUND RECOMMENDATIONS, GRANTS CAN ALSO BE MADE FOR CHARITABLE PURPOSES OUTSIDE OF THE LUBBOCK AREA THE FOUNDATION WILL REVIEW THE CREDENTIALS OF ALL NON-PROFIT ORGANIZATIONS SEEKING GRANTS THIS REVIEW WILL INCLUDE VERIFICATION OF IRS RULING AND PROGRAM EVALUATIONS THAT DETAIL THE USE OF FUNDS GRANTED THE FOUNDATION IS OBLIGATED TO WITHHOLD OR RECALL GRANTS TO ORGANIZATIONS THAT CANNOT OR ARE UNWILLING TO PROVIDE APPROPRIATE DOCUMENTATION AND REPORTS THAT ENSURE APPROPRIATE USE OF FUNDS ADDITIONAL CRITERIA FOR EVALUATION OF REQUESTS FOR FUNDING FROM THE FOUNDATION'S UNRESTRICTED FUNDS MAY INCLUDE THE FOLLOWING 1 SCREENING FOR ELIGIBILITY HAS THE ORGANIZATION PROVIDED BASIC DOCUMENTATION, INCLUDING IRS DETERMINATION LETTER AND FINANCIAL STATEMENTS? IS THERE A CLEAR AND CONCISE PROPOSAL? DOES THE REQUEST MEET THE LEGAL REQUIREMENTS AND THE INTEREST AREAS OF THE COMMUNITY FOUNDATION OF WEST TEXAS? 2 ORGANIZATION STRENGTH IS THIS A CREDIBLE ORGANIZATION? WHAT IS ITS MISSION? WHAT IS ITS PROFESSIONAL STANDING WITHIN ITS COMMUNITY? WHAT IS ITS TRACK RECORD? WHO IS SERVED AND ARE THERE SIMILAR PROGRAMS IN THE SAME GEOGRAPHICAL AREA? IS THERE EVIDENCE OF COMMUNITY SUPPORT? 3 PEOPLE DO KEY PERSONNEL HAVE THE NECESSARY EXPERTISE TO UNDERTAKE THE PROPOSED PROGRAM AND CAPABILITY TO REACH THE OBJECTIVES? IS THE MANAGEMENT WELL-ORGANIZED? DOES THE BOARD COMPOSITION REFLECT AN APPROPRIATE DIVERSITY OF SKILLS AND BACKGROUNDS? 4 FINANCIAL CONDITION HOW DOES THE AGENCY MEET DAY-TO-DAY OPERATIONS? IS THERE A BROAD BASE OF SUPPORT? IF THERE IS AN OPERATIONAL DEFICIT, HOW DOES THE AGENCY INTEND TO MEET THE DEFICIT? DOES THE PROGRAM HAVE A CREDIBLE BUDGET? 5 IDENTIFIED NEED TO BE ADDRESSED HAS AN IMPORTANT PROBLEM OF WORKABLE DIMENSIONS BEEN PRESENTED AND DATA BEEN GIVEN TO SUBSTANTIATE THE PROBLEM? 6 PROGRAM OBJECTIVES WHAT WILL BE ACCOMPLISHED WITH THE PROPOSED FUNDING? ARE THE OBJECTIVES REALISTIC AND MEASURABLE? DO THEY RELATE TO THE STATED PROBLEM OR NEED? IF THIS IS A NEW ACTIVITY OR APPROACH, WHAT HAS BEEN LEARNED FROM RESEARCH OR A SIMILAR PROGRAM? 7 METHODS ARE THE PLANS SUFFICIENTLY DETAILED? IS THERE EVIDENCE GIVEN THAT SUPPORT THE PROPOSED RESULTS? IS THE TIMETABLE FOR IMPLEMENTATION REALISTIC? 8 EVALUATION IS THERE A PROCEDURE DESIGNED TO MEASURE ACCOMPLISHMENTS OR OBJECTIVES? 9 FUTURE/OTHER FUNDING WHAT OTHER FUNDING SOURCES HAVE BEEN IDENTIFIED? IF THE PROGRAM IS TO BE CONTINUED BEYOND THE GRANT PERIOD, IS A VERIFIABLE PLAN PRESENTED FOR FUTURE FINANCIAL SUPPORT? IF THE DUE DILIGENCE INVESTIGATION DETERMINES THAT THE PROSPECTIVE GRANTEE QUALIFIES FOR A GRANT DISTRIBUTION, THE PROPOSAL WILL BE PRESENTED TO THE GRANTS COMMITTEE FOR CONSIDERATION IF THE DUE DILIGENCE INVESTIGATION DETERMINES THAT THE PROSPECTIVE GRANTEE DOES NOT QUALIFY FOR A GRANT DISTRIBUTION, THE FOUNDATION WILL INFORM THE PROSPECTIVE GRANTEE, AND IF APPLICABLE, THE FUND ADVISOR WHO RECOMMENDED THE GRANT, OF THIS DECISION AND THE APPLICATION/RECOMMENDATION SHALL BE CONSIDERED REJECTED PROPOSALS ARE PRESENTED BY THE FOUNDATION STAFF TO THE GRANTS COMMITTEE GRANTS COMMITTEE RECOMMENDATIONS ARE THEN PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL STAFF AND THE GRANTS COMMITTEE MEMBERS WILL ANNUALLY REVIEW FUND AGREEMENTS THAT CLEARLY DESCRIBE DONOR INTENT AND THE PURPOSE FOR WHICH THE FUND WAS ESTABLISHED STAFF AND GRANTS COMMITTEE MEMBERS WILL DISCUSS SUITABLE GRANTEES FOR DONOR ADVISED, FIELD-OF-INTEREST AND UNRESTRICTED FUNDS AT EACH GRANTS COMMITTEE MEETING DONORS WILL BE ENCOURAGED TO REVIEW AGREEMENTS WITH THEIR PERSONAL ADVISORS DONORS WILL ALSO BE ORIENTED TO FOUNDATION ADMINISTRATIVE FEES AND PROCEDURES FOR RECOMMENDING GRANTS, AND THEY WILL RECEIVE SEMI-ANNUAL REPORTS THAT DETAIL FUND ACTIVITY FUND ADVISORS SHOULD EXPECT REGULAR COMMUNICATION FROM THE FOUNDATION, INCLUDING INFORMATION ON UNMET COMMUNITY NEEDS THAT COULD POSSIBLY BE SUPPORTED THROUGH THEIR FUNDS</p>

Additional Data

Software ID:
Software Version:
EIN: 75-1709180
Name: COMMUNITY FOUNDATION OF WEST TEXAS

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

(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
ALL SAINTS EPISCOPAL SCHOOL 3222 103RD STREET LUBBOCK, TX 79423	75-6004580	501C(3)	8,057				GENERAL SUPPORT AND MINI-GRANTS FOR TEACHERS
ALSTROM ANGELS CORP 5121 69TH STREET SUITE B1 LUBBOCK, TX 79424	80-0930101	501C(3)	6,698				GENERAL SUPPORT AND MILESTONES PARK

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

(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
AMERICAN WIND POWER CENTER 1701 CANYON LAKE DRIVE LUBBOCK, TX 79403	75-2509769	501C(3)	6,077				GENERAL SUPPORT
BALLET LUBBOCK 5702 GENOA AVENUE LUBBOCK, TX 79424	51-0163294	501C(3)	13,040				THE NUTCRACKER AND BALLET IN SCHOOLS

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

(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
BAYER MUSEUM OF AGRICULTURE PO BOX 505 LUBBOCK, TX 79408	75-2940167	501C(3)	13,674				GENERAL SUPPORT AND UNDERWOOD PULLMAN CAR
BIG BROTHERS BIG SISTERS 3416 KNOXVILLE AVENUE LUBBOCK, TX 79413	23-7041917	501C(3)	5,497				GENERAL SUPPORT

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

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BREEDLOVE FOODS INC 1818 N MLK LUBBOCK, TX 79403	26-2194373	501C(3)	7,203				GENERAL SUPPORT
BUCKNER CHILDREN AND FAMILY SERVICES 129 BRENTWOOD LUBBOCK, TX 79416	75-2571395	501C(3)	7,746				FAMILY PATHWAYS

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

(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
CASA OF THE SOUTH PLAINS INC 1215 AVENUE J SUITE 301 LUBBOCK, TX 79401	75-2482631	501C(3)	13,877				GENERAL SUPPORT AND LAPTOPS FOR ADVOCACY VOLUNTEERS AND STAFF
CATHOLIC CHARITIES DIOCESE OF LUBBOCK INC 102 AVENUE J LUBBOCK, TX 79401	75-1966688	501C(3)	18,596				PEP PROGRAM, EMERGENCY FUND AND GENERAL SUPPORT

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

(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
CATHOLIC FOUNDATION OF THE DIOCESE OF LUBBOCK PO BOX 98700 LUBBOCK, TX 79499	75-2773524	501C(3)	5,753				GENERAL SUPPORT AND CLERGY RETIREMENT FUND
CHILDREN'S ADVOCACY CENTER OF THE SOUTH PLAINS INC 720 TEXAS AVENUE LUBBOCK, TX 79401	75-2660920	501C(3)	15,362				GENERAL SUPPORT

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

(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
CHILDREN'S HOME OF LUBBOCK PO BOX 2824 LUBBOCK, TX 79408	75-1037480	501C(3)	7,929				GENERAL SUPPORT
CHRISTIAN SERVICE CENTER OF ABILENE 3185 N 10TH STREET ABILENE, TX 79603	36-4561080	501C(3)	15,250				GENERAL SUPPORT AND KITCHEN RENOVATION

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

(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
CITY OF LUBBOCK - ANIMAL SERVICES 3323 S E LOOP 289 LUBBOCK, TX 79404	75-6000590	CITY GOVERNMENT	13,147				FENCE FOR ANIMAL EXERCISE AREA AND SERVICES FOR LOST, ABANDONED AND INJURED ANIMALS
CITY OF PLAINVIEW 901 BROADWAY STREET PLAINVIEW, TX 79072	000000000	CITY GOVERNMENT	6,500				TRAVIS POND

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

(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
CITY OF SHALLOWATER PO BOX 246 SHALLOWATER, TX 79363	75-6004359	CITY GOVERNMENT	30,731				YOUNG CITY PARK TRAIL PROJECT
COLLEGE HILL ELEMENTARY PARENT TEACHER ASSOCIATION 707 CANYON PLAINVIEW, TX 79072	75-2734198	501C(3)	20,000				PLAYSCAPE

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

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COMMUNITIES IN SCHOOLS ON THE SOUTH PLAINS INC 1946 AVENUE Q 3RD FLOOR LUBBOCK, TX 79411	75-2819581	501C(3)	10,000				GENERAL SUPPORT AND EMERGENCY FUND FOR BASIC NEEDS AND HYGIENE ITEMS FOR LOW-INCOME STUDENTS
COMMUNITY HEALTH CENTER OF LUBBOCK 1610 5TH ST LUBBOCK, TX 79401	75-2424925	501C(3)	10,430				GENERAL SUPPORT AND BUILDING

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

(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
COMMUNITY PARTNERS OF LUBBOCK 1103 MLK BLVD LUBBOCK, TX 79403	75-2770812	501C(3)	5,000				THE RAINBOW ROOM
COVENANT HEALTH PLAINVIEW 2601 DIMMIT ROAD PLAINVIEW, TX 79027	75-2426010	501C(3)	8,000				COVENANT HEALTH PLAINVIEW RENOVATION/REMODELING PROJECT AND CAPITAL CAMPAIGN - BOARD ROOM

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

(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
COVENANT HEALTH SYSTEM FOUNDATION 3623 22ND PLACE LUBBOCK, TX 79410	75-2897026	501C(3)	142,500				CHILDREN'S HOSPITAL, JOE ARRINGTON CENTER, COMMUNITY DENTAL CLINIC
CROSSVIEW CHRISTIAN CAMP PO BOX 288 DICKENS, TX 79229	75-2879011	501C(3)	11,413				GENERAL SUPPORT AND SUMMER CAMP

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

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DOWNTOWN WOMEN'S CENTER 409 S MONROE STREET AMARILLO, TX 79101	20-0296282	501C(3)	5,150				GENERAL SUPPORT AND HAVEN HOUSE - CLIENT SERVICES
DREAM CENTER NEW LEGACY HOME FOR WOMEN 1111 30TH LUBBOCK, TX 79424	45-3991946	501C(3)	9,000				KITCHEN APPLIANCES

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

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EARLY LEARNING CENTERS OF LUBBOCK INC 1639 MAIN STREET LUBBOCK, TX 79401	75-0940023	501C(3)	5,540				EMERGENCY CHILDCARE ASSISTANCE
EAST LUBBOCK RESIDENT OWNED BUSINESS INITIATIVE 1702 PARKWAY DRIVE LUBBOCK, TX 79403	82-0600054	501C(3)	7,500				EAST LUBBOCK RESIDENT OWNED BUSINESS INITIATIVE

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

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FAMILY PROMISE OF LUBBOCK INC PO BOX 1258 LUBBOCK, TX 79408	75-2758106	501C(3)	13,797				GENERAL SUPPORT AND EDUCATION SUPPORT
FLATLANDS DANCE THEATRE PO BOX 93001 LUBBOCK, TX 79493	27-3201902	501C(3)	7,725				FLATLANDS DANCE THEATRE'S 9TH SEASON (2018-2019)

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

(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
FRIENDS OF THE LUBBOCK PUBLIC LIBRARY 1306 9TH STREET LUBBOCK, TX 79401	75-6063293	501C(3)	26,092				GENERAL OPERATING SUPPORT
FRISCO FAMILY SERVICES CENTER 8780 3RD STREET FRISCO, TX 75034	75-2530888	501C(3)	5,000				PSC BUILDING COMMUNITY COMMUNITY GARDEN

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

(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
GARZA COUNTY TRAILBLAZERS 205 E 10TH STREET POST, TX 79356	75-1743881	501C(3)	5,000				FEEDING HOMEBOUND SENIOR CITIZENS OF POST, TEXAS
HABITAT FOR HUMANITY 2910 AVE N LUBBOCK, TX 79411	75-2408749	501C(3)	14,021				GENERAL SUPPORT AND HOME CONSTRUCTION

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

(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
HIGH POINT VILLAGE 6223 CR 6300 LUBBOCK, TX 79416	61-1562223	501C(3)	29,899				GENERAL SUPPORT AND VAN
HOPE COMMUNITY OF SHALOM INC 2005 AVENUE T LUBBOCK, TX 79411	36-4504943	501C(3)	6,320				GENERAL SUPPORT AND ELEVATE HOPE

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

(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
HOSPICE OF LUBBOCK PO BOX 16800 LUBBOCK, TX 79490	75-2133781	501C(3)	15,331				GENERAL SUPPORT
LAKERIDGE UNITED METHODIST CHURCH 4701 82ND STREET LUBBOCK, TX 79424	75-1636559	501C(3)	23,414				GENERAL SUPPORT, MAINTENANCE AND REPAIR OF CHURCH FACILITIES, MISSIONS AND CHILDREN MINISTRY

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

(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
LAS CRUCES PUBLIC SCHOOLS FOUNDATION PO BOX 16214 LAS CRUCES, NM 88004	85-0456725	501C(3)	10,000				MINI-GRANTS FOR TEACHERS
LLANO ESTACADO SILVER STAR BOARD PO BOX 65195 LUBBOCK, TX 79464	26-4547583	501C(3)	5,409				HEATERS AND AIR CONDITIONERS FOR THE ELDERLY

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

(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
LOUISE HOPKINS UNDERWOOD CENTER FOR THE ARTS 511 AVENUE K LUBBOCK, TX 79401	75-2732616	501C(3)	22,502				GENERAL SUPPORT
LUBBOCK AREA UNITED WAY 1655 MAIN ST STE 101 LUBBOCK, TX 79401	75-0961812	501C(3)	26,716				GENERAL SUPPORT AND ENDOWMENT

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

(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
LUBBOCK ARTS ALLIANCE PO BOX 5092 LUBBOCK, TX 79408	23-7015858	501C(3)	40,000				ARTS FESTIVAL - CHILDREN'S AREA
LUBBOCK CHILDREN'S HEALTH CLINIC 302 N UNIVERSITY LUBBOCK, TX 79415	75-0968315	501C(3)	5,000				VACCINATION/LAB/PHARMACY ASSISTANCE

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

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LUBBOCK ENTERTAINMENT AND PERFORMING ARTS ASSOCIATION 1500 BROADWAY STE 902 LUBBOCK, TX 79401	46-1912406	501C(3)	11,133				BUDDY HOLLY HALL
LUBBOCK IMPACT 2707 34TH STREET LUBBOCK, TX 79410	26-1607120	501C(3)	25,827				GENERAL SUPPORT AND SOUP KITCHEN

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

(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
LUBBOCK INDEPENDENT SCHOOL DISTRICT 3425 118TH STREET LUBBOCK, TX 79423	75-1360736	SCHOOL	9,875				MINI-GRANTS FOR TEACHERS AND CLOTHING/HYGIENE ITEMS FOR CHILDREN IN NEED
LUBBOCK MEALS ON WHEELS INC 2304 34TH STREET LUBBOCK, TX 79411	75-1333736	501C(3)	18,431				GENERAL SUPPORT AND FOOD DRIVE

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

(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
LUBBOCK MOONLIGHT MUSICALS PO BOX 93522 LUBBOCK, TX 79493	20-3575558	501C(3)	7,201				2018 SUMMER SEASON
LUBBOCK SYMPHONY ORCHESTRA 601 AVENUE K LUBBOCK, TX 79401	75-6001993	501C(3)	11,578				GENERAL SUPPORT AND FAMILY CONCERT

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

(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
MARCH OF DIMES 2801 26TH STREET SUITE 300 LUBBOCK, TX 79410	13-1846366	501C(3)	5,000				GENERAL SUPPORT
MEADOWS MENTAL HEALTH POLICY INSTITUTE FOR TEXAS 2800 SWISS AVE DALLAS, TX 75204	46-3992618	501C(3)	200,000				COMPREHENSIVE MENTAL HEALTH NEEDS ASSESSMENT - LUBBOCK, TEXAS AREA

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

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MORRIS SAFE HOUSE 3240 NIGHTINGALE ROAD LUBBOCK, TX 79407	26-2804005	501C(3)	7,166				GENERAL SUPPORT AND MEDICAL SUPPORT FOR ANIMALS
MUSCULAR DYSTROPHY ASSOCIATION - EL PASO RIO GRANDE CHAPTER 5400 SUNCREST DR A5 EL PASO, TX 79912	13-1665552	501C(3)	6,000				SUMMER CAMPS

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

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NATIONAL COWBOY SYMPOSIUM & CELEBRATION PO BOX 6638 LUBBOCK, TX 79493	30-0375883	501C(3)	7,948				GENERAL SUPPORT AND 29TH ANNUAL EVENT
NCF CHARITABLE TRUST 11625 RAINWATER DRIVE SUITE 500 ALPHARETTA, GA 30009	20-4326440	501C(3)	20,000				PETERSON FUND #10865

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

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NEW WEST CONTEMPORARY ART MUSEUM PLAINVIEW (CAMP) 219 E 6TH STREET PLAINVIEW, TX 79072	81-4896903	501C(3)	14,000				PROGRAMMING 2018
OPEN DOOR 1918 13TH ST LUBBOCK, TX 79401	51-0687541	501C(3)	20,766				GENERAL SUPPORT

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

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PARENTING COTTAGE 3818 50TH STREET LUBBOCK, TX 79413	75-1806027	501C(3)	7,775				GENERAL SUPPORT AND CAR SEAT EDUCATION AND ASSISTANCE PROGRAM
PAUL'S PROJECT PO BOX 53891 LUBBOCK, TX 79424	47-2366074	501C(3)	10,000				GENERAL SUPPORT

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

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PAWS PET ADOPTION OF PLAINVIEW PO BOX 1605 PLAINVIEW, TX 79073	47-1313229	501C(3)	5,058				OPERATING SUPPORT FOR PERSONNEL AND VET CARE
PHI BETA KAPPA 1600 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20009	75-2585121	501C(7)	7,647				2018 HIGH SCHOOL EXCELLENCE AWARDS, COLLATERAL MATERIALS

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

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PLAINVIEW COMMUNITY CONCERT ASSOCIATION 1207 FLOYDADA STREET PLAINVIEW, TX 79072	75-1904485	501C(3)	20,000				FIVE STELLAR CONCERTS BY WORLD-RENOWNED PERFORMERS
POST ANIMAL REFUGE CENTER PO BOX 13 POST, TX 79356	27-1920764	501C(3)	11,000				VETERINARY EXPENSES AND FENCING

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

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POST ECONOMIC DEVELOPMENT CORPORATION PO BOX 69 POST, TX 79356	75-1982463	501C(3)	5,000				ECONOMIC DEVELOPMENT FOR POST/GARZA COUNTY
PRESBYTERIAN CHILDREN'S HOMES AND SERVICES 5920 W WILLIAM CANNON DR AUSTIN, TX 78749	75-0818172	501C(3)	6,000				LUBBOCK CHILD & FAMILY PROGRAM

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

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RACE TRACK CHAPLAINCY RUIDOSO DOWNS PO BOX 449 RUIDOSO DOWNS, NM 88346	23-7181877	501C(3)	5,000				GENERAL OPERATING SUPPORT
RANCHING HERITAGE ASSOCIATION BOX 43200 LUBBOCK, TX 79409	23-7047334	501C(3)	10,730				REPAIR OF THE BARTON HOUSE

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

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REFUGE SERVICES INC PO BOX 53684 LUBBOCK, TX 79453	75-2827710	501C(3)	12,558				GENERAL SUPPORT
RESCUED ANIMALS - SECOND CHANCE INC 4802 17TH ST LUBBOCK, TX 79416	46-1869439	501C(3)	6,121				HORSE REHABILITATION

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

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RESTORATION MINISTRIES OF WEST TEXAS 4414 82ND ST 212-332 LUBBOCK, TX 79424	81-5322932	501C(3)	35,000				GENERAL SUPPORT AND BUILDING SUPPLIES FOR FREE HOME REPAIR PROJECTS
RONALD MCDONALD HOUSE 3413 10TH STREET LUBBOCK, TX 79415	75-1915179	501C(3)	9,689				GENERAL SUPPORT AND NETWORK SERVER REPLACEMENT

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

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SALVATION ARMY - SOUTHERN TERRITORY 1424 NORTHEAST EXPRESSWAY NE BROOKHAVEN, GA 30329	58-0660607	501C(3)	13,732				GENERAL SUPPORT
SAVING GRACE PIT BULL RESCUE 5109 82ND STREET UNIT 7 - PMB 199 LUBBOCK, TX 79424	30-0642726	501C(3)	5,000				7TH ANNUAL PIT STOP

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

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SCIENCE SPECTRUM 2579 S LOOP 289 SUITE 250 LUBBOCK, TX 79423	75-2184555	501C(3)	9,882				GENERAL SUPPORT
SHRINERS HOSPITAL FOR CRIPPLED CHILDREN PO BOX 31356 TAMPA, FL 33631	36-2193608	501C(3)	10,657				GENERAL SUPPORT AND GALVESTON BURN INSTITUTE

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

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SOUTH PLAINS FOOD BANK 5605 MLK BLVD LUBBOCK, TX 79404	75-1904829	501C(3)	24,878				GENERAL SUPPORT
SOUTH PLAINS WILDLIFE REHABILITATION CENTER 3308 95TH STREET LUBBOCK, TX 79423	75-2468445	501C(3)	5,250				ANIMAL CARE

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

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SPECIAL OLYMPICS TEXAS - SOUTH PLAINS AREA 17 1804 RUTHERFORD LANE AUSTIN, TX 78754	74-1998367	501C(3)	6,000				SPECIAL OLYMPICS TEXAS - LUBBOCK/SOUTH PLAINS PROGRAM
SPRING CREEK MINISTRIES 5109 82ND ST STE 7-1211 LUBBOCK, TX 79424	46-2186193	501C(3)	11,094				GENERAL SUPPORT

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ST BENEDICT'S CHAPEL 1615 28TH STREET LUBBOCK, TX 79408	27-2070010	501C(3)	8,500				MISSION SUPPLIES TO FEED BODY AND SOUL
ST ELIZABETH UNIVERSITY PARISH 2305 MAIN STREET LUBBOCK, TX 79401	75-1699865	501C(3)	15,028				RAIDER CATHOLIC

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

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ST ELIZABETH'S CATHOLIC CHURCH 2305 MAIN STREET LUBBOCK, TX 79401	000000000	501C(3)	5,519				GENERAL SUPPORT
ST JOHN NEUMANN CATHOLIC CHURCH 5802 22ND STREET LUBBOCK, TX 79407	000000000	501C(3)	74,711				MORTGAGE RETIREMENT

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

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TEXAS BOYS RANCH PO BOX 5665 LUBBOCK, TX 79408	23-7292527	501C(3)	21,981				GENERAL SUPPORT, STAFF TRAINING AND SUMMER CAMP
TEXAS ENGINEERING FOUNDATION 1001 CONGRESS AVE SUITE 260 AUSTIN, TX 78701	74-6105653	501C(3)	5,500				FELLOW RECOGNITION

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

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TEXAS METHODIST FOUNDATION 11709 BOULDER LANE SUITE 100 AUSTIN, TX 78726	74-1363741	501C(3)	100,000				ENDOWMENT FOR MULUNGWISHI NUTRITION FOOD DISTRIBUTION CENTER TO HUNGRY CHILDREN - KATANGA METHODIST COMMUNITY OF MULUNGWISHI, DEMOCRATIC REPUBLIC OF CONGO
TEXAS SCOTTISH RITE HOSPITAL FOR CRIPPLED CHILDREN 2222 WELBORN STREET DALLAS, TX 75219	75-0818178	501C(3)	10,975				GENERAL SUPPORT

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TEXAS SOUTH PLAINS HONOR FLIGHT PO BOX 94787 LUBBOCK, TX 79493	46-3419332	501C(3)	6,472				HONOR FLIGHT - WASHINGTON DC TRIP FOR VETERANS
TEXAS TECH FOUNDATION INC PO BOX 45025 LUBBOCK, TX 79409	75-6043842	501C(3)	27,678				SCHOOL OF MUSIC, LIBRARIES, ARTS INITIATIVE, GENERAL OPERATING SUPPORT

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

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THE INSIDE OUT FOUNDATION 4630 50TH STREET SUITE 500 LUBBOCK, TX 79414	45-5597137	501C(3)	12,826				GENERAL SUPPORT, COMMUNITY ENDOWMENT CHALLENGE AND PROSTHETICS/WIG PRODUCTS AND SERVICES
UBIQUITOUS LABS TX 3841 50TH ST SUITE B LUBBOCK, TX 79413	47-4365918	501C(3)	5,000				INNOVATION PROJECT

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

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UPBRING PO BOX 140767 AUSTIN, TX 78754	74-1109745	501C(3)	5,000				NEIGHBORHOOD HOUSE
WALLACE THEATER 823 HOUSTON STREET LEVELLAND, TX 79336	47-4633578	501C(3)	8,808				GENERATION ZIGLAR LIVE TRAINING

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

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WEEKEND SNACK SACK PROGRAM PO BOX 54 SLATON, TX 79364	81-4858933	501C(3)	5,810				GENERAL SUPPORT
WEST TEXAS FOOD BANK 411 S PAGEDWOOD AVE ODESSA, TX 79761	75-2057692	501C(3)	5,500				PSC BUILDING COMMUNITY CANTRIBUTE

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

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WHARTON INDEPENDENT SCHOOL DISTRICT 2100 N FULTON WHARTON, TX 77488	000000000	501C(3)	17,000				PLASMA CUTTER
WOMEN'S PROTECTIVE SERVICES PO BOX 54089 LUBBOCK, TX 79453	75-1633066	501C(3)	27,258				GENERAL OPERATING SUPPORT

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YMCA PLAINVIEW 313 ENNIS PLAINVIEW, TX 79072	75-6041250	501C(3)	14,000				NEW SPIN BIKE AND GYM WINDOW PROJECT, BROWNFIELD YMCA MULTI-PURPOSE ROOM ADDITION
YWCA OF LUBBOCK 3101 35TH STREET LUBBOCK, TX 79413	75-0939427	501C(3)	12,425				GENERAL SUPPORT

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2018

▶ **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 Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION OF WEST TEXAS

Employer identification number
75-1709180

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	2	3,138,085	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 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 ▶ (<u>PROMISSORY NOTES</u>)	X	5	1,750,000	PROMISSORY NOTE BALA
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	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 is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

**Open to Public
Inspection**

Department of the Treasury

Name of the organization

COMMUNITY FOUNDATION OF WEST TEXAS

Employer identification number

75-1709180

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	DIRECTORS DON AND TED RUSHING HAVE A FAMILY RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	A COPY WILL BE PRESENTED TO THE BOARD FOR DISCUSSION, REVIEW AND APPROVAL PRIOR TO FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS AND STAFF ARE REQUIRED TO COMPLETE AND RETURN A STATEMENT EACH YEAR STATING THAT THEY HAVE READ THE CONFLICT OF INTEREST POLICY AND AGREE TO ABIDE BY ITS TERMS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD OF DIRECTORS USE THE FORM 990 OF OTHER TAX EXEMPT ORGANIZATIONS WHEN DETERMINING THE COMPENSATION OF THE PRESIDENT THE PRESIDENT IS THE ONLY EMPLOYEE THE ORGANIZATION HAS THAT MEETS THE IRS DEFINITION OF OFFICER OR KEY EMPLOYEE THE ORGANIZATION DOES NOT HAVE ANY OTHER EMPLOYEES WHO MEET THE IRS DEFINITION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE FOR VIEWING AT THE ORGANIZATION'S OFFICE THE ANNUAL REPORT AND AUDITED FINANCIAL STATEMENTS CAN ALSO BE FOUND ON THE ORGANIZATION'S WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION USES A COMMITTEE ASSIGNED BY THE BOARD TO OVERSEE THE FINANCIAL STATEMENT AUDIT AND FOR SELECTION OF THE INDEPENDENT AUDITOR