

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
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

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

C Name of organization
TEXAS WOMEN'S FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
8150 NORTH CENTRAL EXPY NO 110

City or town, state or province, country, and ZIP or foreign postal code
DALLAS, TX 75206

D Employer identification number
75-2048261

E Telephone number
(214) 525-5310

G Gross receipts \$ 31,143,061

F Name and address of principal officer:
ROSLYN DAWSON THOMPSON
8150 NORTH CENTRAL EXPY NO 110
DALLAS, TX 75206

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.TXWF.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1985

M State of legal domicile: TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TEXAS WOMEN'S FOUNDATION INVESTS IN THE POWER OF WOMEN AND GIRLS TO DRIVE POSITIVE CHANGE.

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)	47
4 Number of independent voting members of the governing body (Part VI, line 1b)	47
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	27
6 Total number of volunteers (estimate if necessary)	296
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 39	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	8,218,229	16,829,973
9 Program service revenue (Part VIII, line 2g)	219,375	466,259
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	746,881	3,376,372
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-249,527	-184,716
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,934,958	20,487,888
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,330,610	7,983,493
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)	2,097,761	2,286,591
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,071,483		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,091,879	2,001,753
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	8,520,250	12,271,837
19 Revenue less expenses. Subtract line 18 from line 12	414,708	8,216,051
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	36,315,412	43,148,545
21 Total liabilities (Part X, line 26)	3,623,085	4,843,297
22 Net assets or fund balances. Subtract line 21 from line 20	32,692,327	38,305,248

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 2020-11-24

ROSLYN DAWSON THOMPSON PRESIDENT AND CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date 2020-11-24	Check <input type="checkbox"/> if self-employed	PTIN P01218925
Firm's name ▶ MOSS ADAMS LLP			Firm's EIN ▶ 91-0189318	
Firm's address ▶ 6565 AMERICAS PARKWAY NE STE 600 ALBUQUERQUE, NM 87110			Phone no. (505) 878-7200	

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:

TEXAS WOMEN'S FOUNDATION DRIVES SOCIAL AND ECONOMIC CHANGE FOR WOMEN AND GIRLS THROUGH THREE STRATEGIC PILLARS: ECONOMIC SECURITY, LEADERSHIP AND EMPOWERING WOMEN'S PHILANTHROPY. OUR ACTIONS ARE BASED ON CORE VALUES OF INTEGRITY, INCLUSIVITY, AND INTENTIONALITY.

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 \$ 2,123,798 including grants of \$ 1,843,908) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ 1,794,534 including grants of \$ 761,753) (Revenue \$ 466,259)
See Additional Data

4c (Code:) (Expenses \$ 3,990,920 including grants of \$ 3,645,259) (Revenue \$)
See Additional Data

(Code:) (Expenses \$ 2,339,210 including grants of \$ 1,732,573) (Revenue \$)
OTHER MISSION EXPENSES INCLUDES ANY GRANT OR OPERATIONAL EXPENSES THAT DO NOT SPECIFICALLY FIT IN THE CATEGORIES ABOVE. EXAMPLES WOULD INCLUDE GRANTS TARGETED AT DOMESTIC VIOLENCE OR SEX TRAFFICKING GRANTS, MISCELLANEOUS DONOR ADVISED FUND GRANTS, AND GENERAL PROGRAM EXPENSES THAT DO NOT FIT IN THE OTHER CATEGORIES.

4d Other program services (Describe in Schedule O.)
(Expenses \$ 2,339,210 including grants of \$ 1,732,573) (Revenue \$)

4e Total program service expenses ▶ 10,248,462

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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	Yes	
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		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	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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		No
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	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	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		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		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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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		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		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		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)		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	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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	Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete Schedule J	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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)? If "Yes," complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes

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	41
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	Yes

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question ID, question text, and response area. Includes sections for employees reported (2a-3b), foreign country information (4a-4b), prohibited tax shelter transactions (5a-5c), annual gross receipts and charitable contributions (6a-6b), organizations receiving deductible contributions (7a-7d), sponsoring organizations (8-9), and section 501(c)(7), (12), and (29) organizations (10-13c). Also includes questions about charitable trusts (12a-12b), health insurance issuers (13a-13c), indoor tanning services (14a-14b), remuneration (15), and excise tax (16).

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 (47), 1b (47), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 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:

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(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			
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(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			
See Additional Data Table										

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	1,017,686	0	81,377

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **6**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MARSHA CLARK & ASSOCIATES 4631 PINE VALLEY DRIVE FRISCO, TX 75034	FACILITATION AND COACHING FOR WOMEN'S LE	246,781
LDWW GROUP MARKETING & COMMUNICATIONS LP 1444 OAK LAWN AVENUE SUITE 119 DALLAS, TX 75207	MARKETING AND WEB CREATIVE SERVICES	170,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **2**

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, related organizations, government grants, and other contributions.

Table for Program Service Revenue with columns for Business Code and revenue amounts. Rows include 2a PROGRAM REVENUE (900099, 466,259) and 2b-2f for other program service revenue.

Table for Other Revenue with multiple columns for sub-categories. Rows include 3 Investment income (688,701), 4 Income from investment of tax-exempt bond proceeds, 5 Royalties, 6a-6c Rental income, 7a-7c Gain from sales of assets, 8a-8c Net income from fundraising events (-187,216), 9a-9c Net income from gaming activities, 10a-10c Net income from sales of inventory, and 11a-11d Miscellaneous Revenue (2,500).

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	7,983,493	7,983,493		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	770,079	349,040	76,845	344,194
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	1,242,923	586,730	260,022	396,171
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	30,545	18,588	5,778	6,179
9 Other employee benefits	100,648	43,845	17,686	39,117
10 Payroll taxes	142,396	61,087	21,728	59,581
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	33,966		33,966	
d Lobbying	676	676		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	140,924		140,924	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	698,714	599,452	80,304	18,958
12 Advertising and promotion	13,480	9,109	3,393	978
13 Office expenses	192,140	82,200	67,209	42,731
14 Information technology	219,928	96,856	65,581	57,491
15 Royalties				
16 Occupancy	125,136	51,399	52,344	21,393
17 Travel	102,480	87,912	6,051	8,517
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	91,309	75,753	13,277	2,279
20 Interest	12,046		12,046	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	72,159	30,144	29,469	12,546
23 Insurance	15,786		15,786	
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 OTHER EVENT EXPENSES	93,534	84,674	375	8,485
b SPONSORSHIPS OF NON-PRO	61,779	42,514	11,458	7,807
c PEO FEES	54,878	23,542	8,374	22,962
d IN KIND	29,597	12,704	6,837	10,056
e All other expenses	43,221	8,744	22,439	12,038
25 Total functional expenses. Add lines 1 through 24e	12,271,837	10,248,462	951,892	1,071,483
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	2,379,521	1	4,155,542
	2 Savings and temporary cash investments	1,667,577	2	377,834
	3 Pledges and grants receivable, net	4,746,729	3	2,702,926
	4 Accounts receivable, net	105,408	4	109,082
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	149,790	9	152,569
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	286,428		
	b Less: accumulated depreciation	55,359		
		22,414	10c	231,069
	11 Investments—publicly traded securities	25,663,433	11	32,943,827
	12 Investments—other securities. See Part IV, line 11	110,111	12	102,929
	13 Investments—program-related. See Part IV, line 11	200,000	13	150,000
	14 Intangible assets	131,821	14	87,157
15 Other assets. See Part IV, line 11	1,138,608	15	2,135,610	
16 Total assets. Add lines 1 through 15 (must equal line 34)	36,315,412	16	43,148,545	
Liabilities	17 Accounts payable and accrued expenses	469,646	17	458,699
	18 Grants payable	2,556,159	18	1,950,048
	19 Deferred revenue	296,362	19	362,345
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	300,918	23	1,099,593
	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	0	25	972,612
	26 Total liabilities. Add lines 17 through 25	3,623,085	26	4,843,297
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	13,702,196	27	20,201,850
	28 Net assets with donor restrictions	18,990,131	28	18,103,398
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	32,692,327	32	38,305,248	
33 Total liabilities and net assets/fund balances	36,315,412	33	43,148,545	

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	20,487,888
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,271,837
3	Revenue less expenses. Subtract line 2 from line 1	3	8,216,051
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32,692,327
5	Net unrealized gains (losses) on investments	5	-2,606,941
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,811
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	38,305,248

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: 75-2048261

Name: TEXAS WOMEN'S FOUNDATION

Form 990 (2019)

Form 990, Part III, Line 4a:

WOMEN'S ECONOMIC SECURITY: TEXAS WOMEN'S FOUNDATION WORKS TO STRENGTHEN THE ECONOMIC SECURITY OF WOMEN AND GIRLS IN TEXAS BY INVESTING IN SOLUTIONS THAT GET TO THE ROOT CAUSES OF WOMEN'S ECONOMIC INSECURITY AND REVERSE THEM. THE FOUNDATION ADVANCES A TIME-TESTED, EVIDENCE-BASED MODEL THAT PROVIDES WOMEN AND GIRLS WITH KNOWLEDGE AND TOOLS TO MANAGE THEIR FINANCES; TRAINING THAT BUILDS THEIR FINANCIAL CAPABILITY AND IMPROVES THEIR JOB OPPORTUNITIES; AND ACCESS TO CRITICAL WORK SUPPORTS -- EDUCATION, CHILD CARE, HEALTH CARE AND HOUSING THAT ARE ESSENTIAL TO ECONOMIC SECURITY. THE FOUNDATION PRODUCES ORIGINAL RESEARCH, AS WELL AS LEVERAGES LEADING RESEARCH FROM ORGANIZATIONS AROUND THE WORLD, TO GUIDE OUR GRANTING, INFORM OUR DONORS AND PARTNERS, AND STRENGTHEN OUR CREDIBLE VOICE FOR WOMEN AND GIRLS. RESEARCH GUIDES OUR PRIORITIZATION OF ISSUES, OUR ADVOCACY STRATEGIES AND, ULTIMATELY, THE FINANCIAL AND HUMAN RESOURCES WE INVEST WITH OUR COMMUNITY PARTNERS. DURING THE YEAR ENDED JUNE 30, 2020, TEXAS WOMEN'S FOUNDATION'S INVESTED \$2.1M IN ECONOMIC SECURITY GRANTS, RESEARCH AND PROGRAMS.

Form 990, Part III, Line 4b:

WOMEN'S LEADERSHIP: TEXAS WOMEN'S FOUNDATION SEEKS TO ADVANCE AND INCREASE THE NUMBER OF WOMEN IN LEADERSHIP POSITIONS IN ALL SECTORS BY PRESENTING LEADERSHIP FORUMS, ELEVATING THE VOICES OF WOMEN LEADERS, DEVELOPING DIRECT PROGRAMMING AND ENGAGING IN ADVOCACY AROUND WOMEN'S LEADERSHIP. DURING THE YEAR ENDED JUNE 30, 2020, TEXAS WOMEN'S FOUNDATION INVESTED \$1.8M IN LEADERSHIP GRANTS AND PROGRAMS THAT IMPACTED WOMEN AND GIRLS.

Form 990, Part III, Line 4c:

EMPOWERING WOMEN'S PHILANTHROPY: TEXAS WOMEN'S FOUNDATION ADVANCES POSITIVE SOCIAL AND ECONOMIC CHANGE THROUGH FOCUSING THE COLLECTIVE GIVING OF WOMEN AND MEN ACROSS TEXAS. THE FOUNDATION BELIEVES THE MOST MEANINGFUL WAY TO STIMULATE POSITIVE CHANGE AND MOVE THE NEEDLE ON WOMEN'S ISSUES IS FOR WOMEN TO WORK TOGETHER TO CREATE A LASTING IMPACT. THROUGH SPEAKING ENGAGEMENTS, FACILITATED WORKSHOPS AND RETREATS BY KNOWLEDGEABLE, EXPERIENCED EXPERTS, WE EMPOWER WOMEN TO BE ENGAGED PHILANTHROPISTS AND ADVOCATES FOR EQUITY, LEARNING HOW TO ALIGN THEIR GIVING, FROM THEIR FIRST GIFTS TO BUILDING A LIFETIME LEGACY OF GIVING. THE FOUNDATION ALSO SUPPORTS DONOR ADVISED FUNDS AND GIVING CIRCLES TO ENGAGE INDIVIDUALS, AND GROUPS WITH SHARED INTERESTS, IN THEIR PHILANTHROPIC JOURNEYS. DURING THE YEAR ENDED JUNE 30, 2020, TEXAS WOMEN'S FOUNDATION INVESTED \$4M IN DONOR ADVISED FUND AND GIVING CIRCLE GRANTS AND EDUCATIONAL PROGRAMS.

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			
SHONN S BROWN DIRECTOR, CHAIR	4.00	X		X				0	0	0
CHERYL ALSTON DIRECTOR, SECRETARY	4.00	X		X				0	0	0
MICHELLE M HUDSON DIRECTOR, TREASURER	4.00	X		X				0	0	0
CAREN K LOCK DIRECTOR, PAST CHAIR	4.00	X		X				0	0	0
ELIZABETH HEALY DIRECTOR, CHAIR ADVOCACY COMMITTEE	4.00	X						0	0	0
DEBBIE ROLLINS DIRECTOR, CHAIR AUDIT COMMITTEE	4.00	X						0	0	0
SHAWNA D WILSON DIRECTOR, CHAIR GOVERNANCE COMMITTEE	4.00	X						0	0	0
BEVERLY GOULET DIRECTOR, CHAIR INVESTMENT ADVISORY COMMITTEE	4.00	X						0	0	0
TONI MUNOZ-HUNT DIRECTOR, CHAIR PROGRAMS COMMITTEE	4.00	X						0	0	0
V BONNER ALLEN DIRECTOR	2.00	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			
ANGELINE L BAIN DIRECTOR	2.00	X						0	0	0
PHYLLIS F BERNSTEIN DIRECTOR	2.00	X						0	0	0
JENNIFER BIRY DIRECTOR	2.00	X						0	0	0
LAEL BRODSKY DIRECTOR	2.00	X						0	0	0
CHRYSTA CASTANEDA DIRECTOR	2.00	X						0	0	0
BONNIE CLINTON DIRECTOR	2.00	X						0	0	0
EFFIE B DENNISON DIRECTOR	2.00	X						0	0	0
STACEY DORE DIRECTOR	2.00	X						0	0	0
SARA G DURAN DIRECTOR	2.00	X						0	0	0
SAMANTHA DWINELL DIRECTOR	2.00	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			
HILDA C GALVAN DIRECTOR	2.00	X						0	0	0
MARY HATCHER DIRECTOR	2.00	X						0	0	0
HATTIE HILL DIRECTOR	2.00	X						0	0	0
WEI WEI JEANG DIRECTOR	2.00	X						0	0	0
DEBRA HUNTER JOHNSON DIRECTOR	2.00	X						0	0	0
KERI A KAISER DIRECTOR	2.00	X						0	0	0
MARGARET KELIHER DIRECTOR	2.00	X						0	0	0
SARA MADSEN MILLER DIRECTOR	2.00	X						0	0	0
CYNTHIA G MARSHALL DIRECTOR	2.00	X						0	0	0
LAURA MAXWELL DIRECTOR	2.00	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			
PATRICIA L MILLER DIRECTOR	2.00	X						0	0	0
SARAH K MILLER DIRECTOR	2.00	X						0	0	0
LISA MONTGOMERY DIRECTOR	2.00	X						0	0	0
NEENA NEWBERRY DIRECTOR	2.00	X						0	0	0
LAURA S NIETO DIRECTOR	2.00	X						0	0	0
CARRIE F PARSONS DIRECTOR	2.00	X						0	0	0
ELIZABETH C PHILLIPS DIRECTOR	2.00	X						0	0	0
PRIYA RATHOD DIRECTOR	2.00	X						0	0	0
DIANE H REEVES DIRECTOR	2.00	X						0	0	0
JANE A ROSE DIRECTOR	2.00	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			
VIRGINIA ROSE DIRECTOR	2.00	X						0	0	0
DIANNE C SASLAW DIRECTOR	2.00	X						0	0	0
JUDY SHERMAN DIRECTOR	2.00	X						0	0	0
KAREN J SIMON DIRECTOR	2.00	X						0	0	0
LISSA SMITH DIRECTOR	2.00	X						0	0	0
CHARMAINE TANG DIRECTOR	2.00	X						0	0	0
RACHEL VINSON DIRECTOR	2.00	X						0	0	0
ROSLYN DAWSON THOMPSON PRESIDENT & CEO	45.00			X				328,788	0	20,138
DENA JACKSON COO	45.00			X				192,525	0	21,210
DAWN HOOPER VP - FINANCE & OPERATIONS	45.00			X				166,301	0	12,221

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			
ASHLEY LINDSAY ASSOCIATE VP - ANNUAL GIVING	45.00					X		124,056	0	15,092
MARY VALADEZ ASSOCIATE VP - GRANTS	45.00					X		101,526	0	8,327
LAUREN BLITZER ASSOCIATE VP - PROGRAMS	45.00					X		104,490	0	4,389

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
TEXAS WOMEN'S FOUNDATION

Employer identification number
75-2048261

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) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
 If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	4,661,357	6,709,826	6,500,104	8,218,229	16,829,973	42,919,489
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	4,661,357	6,709,826	6,500,104	8,218,229	16,829,973	42,919,489
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) . . .						11,484,995
6 Public support. Subtract line 5 from line 4.						31,434,494

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .	4,661,357	6,709,826	6,500,104	8,218,229	16,829,973	42,919,489
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .	537,206	477,909	548,071	612,066	688,701	2,863,953
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.) . . .					2,500	2,500
11 Total support. Add lines 7 through 10						45,785,942
12 Gross receipts from related activities, etc. (see instructions)					12	2,599,303
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	68.660 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	80.920 %

16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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? <i>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.</i>		
	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
	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)? <i>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.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
	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? <i>If "Yes," provide detail in Part VI.</i>		
	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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	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))? <i>If "Yes," provide detail in Part VI.</i>		
	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? <i>If "Yes," provide detail in Part VI.</i>		
	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? <i>If "Yes," provide detail in Part VI.</i>		
	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)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	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>	Yes	No
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 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

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

Additional Data

Software ID:

Software Version:

EIN: 75-2048261

Name: TEXAS WOMEN'S FOUNDATION

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 C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization TEXAS WOMEN'S FOUNDATION	Employer identification number 75-2048261
------------------------------------------------------	----------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ _____

3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	676	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0	
c Total lobbying expenditures (add lines 1a and 1b)	676	
d Other exempt purpose expenditures	11,199,678	
e Total exempt purpose expenditures (add lines 1c and 1d)	11,200,354	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	710,018	
g Grassroots nontaxable amount (enter 25% of line 1f)	177,505	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount			582,808	710,018	1,292,826
b Lobbying ceiling amount (150% of line 2a, column(e))					1,939,239
c Total lobbying expenditures			3,113	676	3,789
d Grassroots nontaxable amount			145,702	177,505	323,207
e Grassroots ceiling amount (150% of line 2d, column (e))					484,811
f Grassroots lobbying expenditures			3,113	676	3,789

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

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

Name of the organization
TEXAS WOMEN'S FOUNDATION

Employer identification number
75-2048261

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	53	
2 Aggregate value of contributions to (during year)	11,214,172	
3 Aggregate value of grants from (during year)	5,752,561	
4 Aggregate value at end of year	17,154,980	

- 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 |
|---------------------------------------------------|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f 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	13,468,639	13,509,173	11,583,558	11,162,912	11,635,956
b Contributions	383,808	400,517	1,368,249	111,408	208,132
c Net investment earnings, gains, and losses	366,682	100,408	1,027,713	894,368	-102,182
d Grants or scholarships	521,131	541,459	415,914	534,288	544,732
e Other expenditures for facilities and programs					
f Administrative expenses			54,433	50,842	34,239
g End of year balance	13,697,998	13,468,639	13,509,173	11,583,558	11,162,935

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 12.000 %
 - b** Permanent endowment ▶ 77.000 %
 - c** Temporarily restricted endowment ▶ 11.000 %
- 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 | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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				
b Buildings				
c Leasehold improvements				
d Equipment		286,428	55,359	231,069
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				231,069

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.)	972,612

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	17,768,390
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-2,606,941
b	Donated services and use of facilities	2b	176,020
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	49,032
e	Add lines 2a through 2d	2e	-2,381,889
3	Subtract line 2e from line 1	3	20,150,279
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	140,924
b	Other (Describe in Part XIII.)	4b	196,685
c	Add lines 4a and 4b	4c	337,609
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	20,487,888

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	12,155,469
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	176,020
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	4,958
e	Add lines 2a through 2d	2e	180,978
3	Subtract line 2e from line 1	3	11,974,491
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	140,924
b	Other (Describe in Part XIII.)	4b	156,422
c	Add lines 4a and 4b	4c	297,346
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	12,271,837

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: 75-2048261

Name: TEXAS WOMEN'S FOUNDATION

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	ENDOWMENT PURPOSES INCLUDE FUNDING FOUNDATION GRANTING AND OPERATIONS.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	<p>THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE UNITED STATES INTERNAL REVENUE CODE (IRC) ACCORDING TO THE UNITED STATES INTERNAL REVENUE SERVICE (IRS) DETERMINATION LETTER DATED OCTOBER 1985. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR FEDERAL INCOME TAX. GAAP REQUIRES THE EVALUATION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE FOUNDATION'S FINANCIAL STATEMENTS TO DETERMINE WHETHER THE TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. TAX POSITIONS NOT DEEMED TO MEET THE MORE LIKELY THAN NOT THRESHOLD WOULD BE RECORDED AS A TAX BENEFIT OR EXPENSES IN THE CURRENT YEAR. A RECONCILIATION IS NOT PROVIDED HEREIN, AS THE BEGINNING AND ENDING AMOUNTS OF UNRECOGNIZED BENEFITS ARE ZERO, WITH NO INTERIM ADDITIONS, REDUCTIONS, OR SETTLEMENTS. HOWEVER, THE CONCLUSIONS REGARDING THE UNCERTAINTY IN INCOME TAXES WILL BE SUBJECTIVE TO REVIEW AND MAY BE ADJUSTED AT A LATER DATE BASED ON FACTORS INCLUDING, BUT NOT LIMITED TO, ONGOING ANALYSIS OF TAX LAWS, REGULATIONS, AND INTERPRETATIONS THEREOF. THE FOUNDATION'S INFORMATIONAL RETURNS FILED IN THE U.S. FEDERAL JURISDICTION ARE GENERALLY SUBJECT TO EXAMINATION FOR THREE YEARS AFTER THE LATER OF THE DUE DATE OR DATE OF FILING.</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 44,074. LOSS ON SALE OF ASSETS 4,958.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	AGENCY FUND CONTRIBUTIONS 196,685.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	LOSS ON SALE OF ASSETS 4,958.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	AGENCY GRANTS 156,422.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2019

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 TEXAS WOMEN'S FOUNDATION

Employer identification number 75-2048261

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... 2b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (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. Includes a Total row at the bottom.

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) Total events
	LUNCHEON (event type)	(event type)	(total number)	(add col. (a) through col. (c))
1 Gross receipts	1,281,754			1,281,754
2 Less: Contributions	1,158,004			1,158,004
3 Gross income (line 1 minus line 2)	123,750			123,750
Direct Expenses	4 Cash prizes			
	5 Noncash prizes	38,700		38,700
	6 Rent/facility costs	195,426		195,426
	7 Food and beverages	57,500		57,500
	8 Entertainment			
	9 Other direct expenses	19,340		
10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				310,966
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-187,216

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 as Filed, 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

2019

**Open to Public
Inspection**

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.

Department of the
Treasury
Internal Revenue Service

Name of the organization

TEXAS WOMEN'S FOUNDATION

Employer identification number

75-2048261

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 161

3 Enter total number of other organizations listed in the line 1 table ▶ 0

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)					
(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:	THE FOUNDATION ENSURES THAT GRANTEE ORGANIZATIONS MAINTAIN THEIR 501(C) ELIGIBILITY AND CONTINUE TO OPERATE THEIR ORGANIZATIONS IN A MANNER THAT ADVANCES THE OBJECTIVES OF THE TEXAS WOMEN'S FOUNDATION. ADDITIONALLY, AS A CONDITION OF FUNDING, AND AS OUTLINED IN THE GRANT AGREEMENT, THE FOUNDATION REQUIRES GRANT RECIPIENTS TO PROVIDE A FINAL WRITTEN REPORT AT THE CONCLUSION OF THE GRANT, DOCUMENTING THE USE OF FUNDS AS WELL AS PROJECT OUTCOMES. REQUIREMENTS MAY VARY AND ARE DETERMINED BASED ON THE INDIVIDUAL SIZE, SCOPE AND SOURCE OF EACH GRANT.

Additional Data

Software ID:
Software Version:
EIN: 75-2048261
Name: TEXAS WOMEN'S FOUNDATION

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
29 PIECES 423 W JEFFERSON BLVD DALLAS, TX 75208	34-2038797	501(C)(3)	40,000				OPERATING
ABERG CENTER FOR LITERACY 5100 ROSS AVE DALLAS, TX 75206	02-0706898	501(C)(3)	10,000				PROGRAM

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
ADVOCATES FOR COMMUNITY TRANSFORMATION (ACT) 1335 INWOOD ROAD DALLAS, TX 75247	27-0178272	501(C)(3)	20,000				PROGRAM
AGAPE CLINIC 4104 JUNIUS STREET DALLAS, TX 75246	14-1847977	501(C)(3)	15,000				OPERATING

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
AGAPE RESOURCE & ASSISTANCE CENTER INC PO BOX 861664 PLANO, TX 750861664	75-2942035	501(C)(3)	30,000				OPERATING
ASIAN & PACIFIC ISLANDER AMERICAN SCHOLARSHIP FUND 2025 M STREET NW SUITE 610 WASHINGTON, DC 20036	57-1192973	501(C)(3)	15,000				PROGRAM

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
AT LAST INC 405 E OVERTON ROAD DALLAS, TX 75216	61-1765722	501(C)(3)	10,000				PROGRAM
BAYLOR HEALTH CARE SYSTEM FOUNDATION 3600 GASTON AVE BARNETT TOWER STE 100 DALLAS, TX 75246	75-1606705	501(C)(3)	50,000				OPERATING

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
BIG THOUGHT 1409 S LAMAR STREET SUITE 1015 DALLAS, TX 75215	75-2170035	501(C)(3)	12,500				PROGRAM
BIONEERSCOLLECTIVE HERITAGE INSTITUTE 215 LINCOLN AVENUE 202 SANTA FE, NM 87501	85-0432731	501(C)(3)	30,000				PROGRAM

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
BONTON ENTERPRISES FUND AT DALLAS FOUNDATION 2612 VALENTINE ST DALLAS, TX 75215	75-2890371	501(C)(3)	25,000				OPERATING
BOYS & GIRLS CLUBS OF GREATER DALLAS INC 4816 WORTH STREET DALLAS, TX 75246	75-1152657	501(C)(3)	20,000				PROGRAM

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
BRIDGE BREAST CENTER INC DBA BRIDGE BREAST NETWORK 4000 JUNIUS ST DALLAS, TX 75246	75-2436606	501(C)(3)	30,000				OPERATING
BRIGHT FUTURE FOUNDATION FOR EAGLE COUNTY P O BOX 2558 AVON, CO 81620	84-0938374	501(C)(3)	15,000				OPERATING

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
BRIGHTER TOMORROWS INC PO BOX 532151 GRAND PRAIRIE, TX 75053	75-2291809	501(C)(3)	20,000				PROGRAM
CATHOLIC CHARITIES DIOCESE OF FORT WORTH 249 WEST THORNHILL DRIVE FORT WORTH, TX 76115	75-0808769	501(C)(3)	15,000				PROGRAM

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
CENTER FOR REPRODUCTIVE RIGHTS INC 199 WATER STREET FLOOR 22 NEW YORK, NY 10038	13-3669731	501(C)(3)	26,000				OPERATING
CENTER FOR TRANSFORMING LIVES 512 W 4TH STREET FORT WORTH, TX 76102	75-0829389	501(C)(3)	40,000				PROGRAM

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
CHETNA PO BOX 832802 RICHARDSON, TX 750832692	20-2359084	501(C)(3)	20,000				PROGRAM
CHILDCAREGROUP 1420 W MOCKINGBIRD LN STE 300 DALLAS, TX 75247	75-0800634	501(C)(3)	200,000				\$150,000 FOR OPERATING, \$50,000 FOR PROGRAM

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 ADVOCACY CENTER FOR DENTON COUNTY 1854 CAIN DR LEWISVILLE, TX 75077	75-2559765	501(C)(3)	20,000				OPERATING
CHILDREN'S CHORUS OF GREATER DALLAS 325 N ST PAUL STE 2020 DALLAS, TX 75201	75-2705431	501(C)(3)	10,000				PROGRAM

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
CHOCOLATE MINT FOUNDATION 201 EXECUTIVE WAY DESOTO, TX 75115	27-1589053	501(C)(3)	10,000				PROGRAM
CIRCUIT TRAIL CONSERVANCY FUND AT DALLAS FOUNDATION 3963 MAPLE AVE SUITE 390 DALLAS, TX 75219	75-2890371	501(C)(3)	58,333				OPERATING

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 HOUSE 830 E CENTRAL EXPRESSWAY SUITE 350 PLANO, TX 75074	75-2213291	501(C)(3)	7,500				OPERATING
CITY YEAR INC 1201 MAIN STREET SUITE 1300 DALLAS, TX 75202	22-2882549	501(C)(3)	35,000				PROGRAM

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
COMMUNITIES FOUNDATION OF TEXAS INC 5500 CARUTH HAVEN DALLAS, TX 752258146	75-0964565	501(C)(3)	30,000				PROGRAM
COMMUNITIES IN SCHOOLS DALLAS REGION INC 1341 W MOCKINGBIRD LANE SUITE 1000E 1000E DALLAS, TX 75247	75-2044117	501(C)(3)	50,000				PROGRAM

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 OUTREACH HOUSING 3436 LIVINGSTON LANE CARROLLTON, TX 75007	47-1872559	501(C)(3)	25,000				PROGRAM
COMPELLING WHY PO BOX 742463 DALLAS, TX 75374	27-3537158	501(C)(3)	25,000				PROGRAM

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

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CRISTO REY DALLAS HIGH SCHOOL INC 1064 N ST AUGUSTINE DALLAS, TX 75217	46-3737066	501(C)(3)	129,150				PROGRAM
CROHN'S AND COLITIS FOUNDATION 12801 N CENTRAL EXPRESSWAY SUITE 530 DALLAS, TX 75243	13-6193105	501(C)(3)	10,000				OPERATING

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

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CROW MUSEUM OF ASIAN ART OF THE UNIVERSITY OF TEXAS AT DALLAS 2010 FLORA STREET DALLAS, TX 75201	75-1305566	501(C)(3)	10,000				PROGRAM
CULTURAL HERITAGE RESEARCH INC 292 NEWBURY ST SUITE 146 BOSTON, MA 02115	83-4568531	501(C)(3)	8,500				OPERATING

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

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DALLAS AFTERSCHOOL NETWORK 3900 WILLOW STREET STE 110 DALLAS, TX 75226	76-0838983	501(C)(3)	181,000				\$11,000 FOR OPERATING, \$170,000 FOR PROGRAM
DALLAS AREA INTERFAITH SPONSORING COMMITTEE 1104 LUPO DRIVE DALLAS, TX 75207	75-2409130	501(C)(3)	50,000				PROGRAM

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

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DALLAS BLACK DANCE THEATRE PO BOX 131290 DALLAS, TX 753131290	75-1756215	501(C)(3)	7,000				OPERATING
DALLAS CHAMBER SYMPHONY PO BOX 795548 DALLAS, TX 753795548	45-3543901	501(C)(3)	15,000				OPERATING

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

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DALLAS CHINESE COMMUNITY CENTER 400 N GREENVILLE AVE 12 RICHARDSON, TX 75081	75-2456463	501(C)(3)	20,000				PROGRAM
DALLAS HOLOCAUST MUSEUM 300 N HOUSTON DALLAS, TX 75202	75-2113723	501(C)(3)	32,500				\$7,500 FOR OPERATING, \$25,000 FOR PROGRAM

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

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DALLAS METHODIST HOSPITALS FOUNDATION INC 1441 N BECKLEY AVENUE PO BOX 655999 655999 DALLAS, TX 752655999	75-1548343	501(C)(3)	50,000				PROGRAM
DALLAS SYMPHONY ASSOCIATION 2301 FLORA STREET SUITE 300 DALLAS, TX 75201	75-0705442	501(C)(3)	25,000				OPERATING

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

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DFW HUB CENTER FOR HEALTH 13630 COBBLESTONE DRIVE FARMERS BRANCH, TX 75244	81-4122782	501(C)(3)	7,500				OPERATING
DOWNWINDERS AT RISK EDUCATION FUND 1808 S GOOD LATIMER EXPY DALLAS, TX 75266	75-2643308	501(C)(3)	50,000				PROGRAM

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

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EDUCATIONAL FIRST STEPS 2815 GASTON AVENUE DALLAS, TX 75226	75-2334053	501(C)(3)	130,550				\$5,500 FOR OPERATING, \$125,000 FOR PROGRAM
EQUAL JUSTICE USA INC 81 PROSPECT STREET BROOKLYN, NY 11201	26-1316408	501(C)(3)	100,000				PROGRAM

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

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FACES OF GIVING INC DONORS OF COLOR NETWORK 36 S PORTLAND AVE BROOKLYN, NY 11217	81-1676971	501(C)(3)	275,000				\$25,000 FOR OPERATING, \$250,000 FOR PROGRAM
FAITH IN TEXAS - PICO 1111 W MOCKINGBIRD LN STE 595 DALLAS, TX 75247	47-3005234	501(C)(3)	15,450				\$450 FOR OPERATING, \$15,000 FOR PROGRAM

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

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FAMILY COMPASS (FORMERLY CHILD ABUSE PREVENTION CENTER) 4210 JUNIUS STREET DALLAS, TX 75246	75-2400158	501(C)(3)	25,000				PROGRAM
FAMILY GATEWAY INC 711 S ST PAUL STREET DALLAS, TX 75201	75-2105579	501(C)(3)	5,500				OPERATING

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

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FAMILY PLACE PO BOX 7999 DALLAS, TX 752099998	75-1590896	501(C)(3)	26,000				\$6,000 FOR OPERATING, \$20,000 FOR PROGRAM
FIRST3YEARS 15851 DALLAS PARKWAY 106 ADDISON, TX 75001	75-2067421	501(C)(3)	50,000				OPERATING

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

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FRIENDS OF BARACK OBAMA MALE LEADERSHIP ACADEMY 4730 S LANCASTER RD DALLAS, TX 75216	45-4884806	501(C)(3)	30,000				OPERATING
GEORGETOWN UNIVERSITY INSTITUTE FOR CONSTITUTIONAL ADVOCACY 600 NEW JERSEY AVE NW WASHINGTON, DC 20001	53-0196603	501(C)(3)	20,000				OPERATING

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

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GIRLS INCORPORATED OF METROPOLITAN DALLAS 2040 EMPIRE CENTRAL DRIVE DALLAS, TX 75235	75-1305705	501(C)(3)	8,500				PROGRAM
GIRLSTART 320 DECKER DRIVE SUITE 100 IRVING, TX 75062	31-1595414	501(C)(3)	25,000				PROGRAM

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

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HEALING HANDS MINISTRIES INC 8515 GREENVILLE AVENUE STE N-112 BOX 25 DALLAS, TX 75243	65-1259379	501(C)(3)	20,000				PROGRAM
HEALTH SERVICES OF NORTH TEXAS INC 4401 N INTERSTATE 35 UNIT 312 DENTON, TX 762073318	75-2252866	501(C)(3)	30,000				PROGRAM

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

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HEART HOUSE PO BOX 823162 DALLAS, TX 753823162	75-2898097	501(C)(3)	20,000				PROGRAM
HEART OF COURAGE 7441 MARVIN D LOVE FREEWAY SUITE 301 DALLAS, TX 75237	81-3117972	501(C)(3)	8,628				PROGRAM

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

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HOCKADAY SCHOOL 11600 WELCH ROAD DALLAS, TX 75229	75-0800650	501(C)(3)	10,000				OPERATING
HOPE CLINIC OF MCKINNEY 505 TITUS ST MCKINNEY, TX 75069	81-3813928	501(C)(3)	17,500				OPERATING

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

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HOPEFUL SOLUTIONS 6209 HIGHLAND HILLS DR APT 146 DALLAS, TX 752415101	51-0556312	501(C)(3)	13,128				\$3,128 FOR OPERATING, \$10,000 FOR PROGRAM
HUMAN RIGHTS INITIATIVE OF NORTH TEXAS INC 2801 SWISS AVENUE DALLAS, TX 75204	75-2842602	501(C)(3)	296,050				\$251,050 FOR OPERATING, \$45,000 FOR PROGRAM

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IGNITE 5201 OCONNOR BLVD 100 IRVING, TX 75039	38-3819049	501(C)(3)	80,525				\$55,525 FOR OPERATING, \$25,000 FOR PROGRAM
ILOOKLIKELOVEINC P O BOX 151596 DALLAS, TX 75315	81-0807264	501(C)(3)	7,878				OPERATING

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INSPIRING TOMORROW'S LEADERS INC PO BOX 398167 DALLAS, TX 75339	90-0672495	501(C)(3)	13,128				\$3,128 FOR OPERATING, \$10,000 FOR PROGRAM
INTERFAITH FAMILY SERVICES PO BOX 720206 DALLAS, TX 753720206	75-2028254	501(C)(3)	25,525				\$525 FOR OPERATING, \$25,000 FOR PROGRAM

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JANE'S DUE PROCESS INC PO BOX 685137 AUSTIN, TX 787685137	75-2917844	501(C)(3)	10,000				OPERATING
JUNIOR PLAYERS GUILD 12225 GREENVILLE AVENUE SUITE 1020 DALLAS, TX 75243	75-6061082	501(C)(3)	23,750				\$1,250 FOR OPERATING, \$22,500 FOR PROGRAM

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KID NET FOUNDATION DBA JONATHAN'S PLACE PO BOX 140085 DALLAS, TX 75214	75-2389331	501(C)(3)	25,000				PROGRAM
KIPP TEXAS INC (DALLAS-FORT WORTH) PO BOX 674443 DALLAS, TX 752674443	82-0578155	501(C)(3)	500,000				PROGRAM

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KNOX COLLEGE OFFICE OF ADVANCEMENT BOX K 230 2 EAST SOUTH STREET GALESBURG, IL 61401	37-0673513	501(C)(3)	25,000				OPERATING
LADDER ALLIANCE INC 1100 HEMPHILL STREET SUITE 302 FORT WORTH, TX 76104	06-1674011	501(C)(3)	40,000				PROGRAM

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LEADERSHIP ISD 1800 N LAMAR ST DALLAS, TX 75202	45-2794224	501(C)(3)	10,000				OPERATING
LITERACY ACHIEVES (FOUNDED AS VICKERY MEADOW LEARNING CENTER) 4144 N CENTRAL EXPRESSWAY SUITE 702 702 DALLAS, TX 75204	75-2708992	501(C)(3)	55,525				\$525 FOR OPERATING, \$50,000 FOR PROGRAM

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

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LIVING HOPE SERVICES DBA HOUSE OF REBIRTH 3403 SHELLEY BLVD SUITE A100 DALLAS, TX 75207	46-2766751	501(C)(3)	5,525				\$525 FOR OPERATING, \$5,000 FOR PROGRAM
LONE STAR JUSTICE ALLIANCE 1411 WEST AVE STE 200 AUSTIN, TX 78701	82-2345921	501(C)(3)	81,500				\$6,500 FOR OPERATING, \$75,000 FOR PROGRAM

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LUTHERAN SOCIAL SERVICES OF THE SOUTH INC DBA UPBRING 8305 CROSS PARK DRIVE AUSTIN, TX 78754	74-1109745	501(C)(3)	50,000				OPERATING
MERCY STREET INC 3801 HOLYSTONE STREET DALLAS, TX 75212	45-0536344	501(C)(3)	10,000				PROGRAM

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METHODIST JUSTICE MINISTRY OF FIRST UNITED METHODIST CHURCH 750 W 5TH STREET FORT WORTH, TX 761023621	20-4204172	501(C)(3)	29,050				PROGRAM
METRO DALLAS HOMELESS ALLIANCE 2816 SWISS AVENUE DALLAS, TX 75204	75-2461679	501(C)(3)	35,000				OPERATING

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METROCREST SERVICES DBA METROCREST SOCIAL SERVICES 13801 HUTTON DR SUITE 150 FARMERS BRANCH, TX 75234	75-1548334	501(C)(3)	31,050				\$1,050 FOR OPERATING, \$30,000 FOR PROGRAM
MI ESCUELITA PRESCHOOL INC 4231 MAPLE AVENUE DALLAS, TX 75219	75-1728505	501(C)(3)	25,000				PROGRAM

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MOMENTOUS INSTITUTE 106 EAST 10TH ST DALLAS, TX 75203	75-1855620	501(C)(3)	30,000				PROGRAM
MOSAIC FAMILY SERVICES INC 12225 GREENVILLE AVENUE 800 DALLAS, TX 75243	75-2484565	501(C)(3)	56,000				\$6,000 FOR OPERATING, \$50,000 FOR PROGRAM

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

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MUSLIM AMERICAN LEADERSHIP ALLIANCE 47 WEST DIVISION STREET ROOM 159 CHICAGO, IL 60610	47-3812096	501(C)(3)	37,500				OPERATING
NATIONAL COUNCIL OF JEWISH WOMEN GREATRER DALLAS SECTION 6025 ROYAL LANE STE 219-9 DALLAS, TX 75230	75-0800635	501(C)(3)	13,330				OPERATING

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NEST FOUNDATION 137 N LARCHMONT BLVD 427 LOS ANGELES, CA 90004	20-1168581	501(C)(3)	100,000				PROGRAM
NEW FRIENDS NEW LIFE P O BOX 192378 DALLAS, TX 75219	75-2820473	501(C)(3)	10,000				PROGRAM

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NEW YORK WOMEN'S FOUNDATION 39 BROADWAY 23RD FLOOR NEW YORK, NY 10006	13-3457287	501(C)(3)	20,000				OPERATING
NEXUS RECOVERY CENTER INC 8733 LA PRADA DALLAS, TX 75228	23-7169388	501(C)(3)	10,000				OPERATING

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NOMI NETWORK P O BOX 42 NEW YORK, NY 10156	80-0290896	501(C)(3)	25,000				OPERATING
NORTH DALLAS SHARED MINISTRIES 2875 MERRELL ROAD DALLAS, TX 75229	75-1908563	501(C)(3)	15,000				OPERATING

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NORTH TEXAS PUBLIC BROADCASTING INC 3000 HARRY HINES BLVD DALLAS, TX 75201	75-2084961	501(C)(3)	10,000				OPERATING
NTARUPT FUND OF THE DALLAS FOUNDATION 624 N GOOD-LATIMER STE 100 DALLAS, TX 75204	75-2890371	501(C)(3)	32,000				\$2,000 FOR OPERATING, \$32,000 FOR PROGRAM

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

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OFICINA LEGAL DEL PUEBLO UNIDO INC DBATEXAS CIVIL RIGHTS PROJECT 1405 MONTOPOLIS DRIVE AUSTIN, TX 787413438	74-1995879	501(C)(3)	20,000				OPERATING
OP-ED PROJECT 175 VARICK STREET NEW YORK, NY 10014	27-2877151	501(C)(3)	30,000				PROGRAM

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OUR LADY OF PERPETUAL HELP SCHOOL 7625 CORTLAND AVE DALLAS, TX 75235	30-0439313	501(C)(3)	20,000				OPERATING
OUTCRY THEATRE INC 1915 N CENTRAL EXPRESSWAY 120 PLANO, TX 75075	81-3537233	501(C)(3)	10,000				OPERATING

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PAMPER LAKE HIGHLANDS 10228 EAST NW HWY STE 55 DALLAS, TX 75238	46-5752673	501(C)(3)	35,525				\$525 FOR OPERATING, \$35,000 FOR PROGRAM
PARKLAND FOUNDATION 1341 W MOCKINGBIRD LN STE 1100E DALLAS, TX 75247	75-2089180	501(C)(3)	500,000				OPERATING

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(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
PAUL QUINN COLLEGE 3837 SIMPSON STUART RD DALLAS, TX 75241	74-1238438	501(C)(3)	10,000				PROGRAM
PEACEJAM FOUNDATION 11200 RALSTON RD ARVADA, CO 80004	84-1349666	501(C)(3)	35,000				PROGRAM

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
PER SCHOLAS 211 N ERVAY STREET SUITE 700 DALLAS, TX 75248	04-3252955	501(C)(3)	35,000				PROGRAM
PLAN INTERNATIONAL USA INC 155 PLAN WAY WARWICK, RI 02886	13-5661832	501(C)(3)	120,000				OPERATING

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
PLANNED PARENTHOOD OF GREATER TEXAS 7424 GREENVILLE AVENUE SUITE 206 DALLAS, TX 75231	52-1243220	501(C)(3)	45,650				\$5,000 FOR OPERATING, \$40,650 FOR PROGRAM
POETIC PO BOX 132633 DALLAS, TX 75313	82-2526057	501(C)(3)	33,000				PROGRAM

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
PRESBYTERIAN COMMUNITIES AND SERVICES FOUNDATION 12467 MERIT DRIVE THIRD FLOOR DALLAS, TX 75251	75-1910084	501(C)(3)	50,000				OPERATING
PROMISE HOUSE INC 224 W PAGE AVENUE DALLAS, TX 75208	75-2180083	501(C)(3)	7,500				PROGRAM

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
PWA COALITION OF DALLAS INC DBA AIDS SERVICES OF DALLAS PO BOX 4338 DALLAS, TX 752080338	75-2144518	501(C)(3)	20,000				PROGRAM
QUALITY OF LIFE FOUNDATION FOR METROPOLITAN DALLAS 500 N AKARD STREET SUITE 2600 DALLAS, TX 75201	23-7360214	501(C)(3)	11,000				PROGRAM

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
RAINBOW DAYS INC 8150 N CENTRAL EXPRESSWAY SUITE M1003 DALLAS, TX 75206	75-1844908	501(C)(3)	25,000				PROGRAM
REBECCA BENDER INITIATIVE 560 NE F STREET A628 GRANTS PASS, OR 97526	45-5100719	501(C)(3)	15,990				PROGRAM

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
RESOURCE CENTER OF DALLAS INC 5750 CEDAR SPRINGS ROAD DALLAS, TX 75219	75-1892059	501(C)(3)	41,050				\$1,050 FOR OPERATING, \$40,000 FOR PROGRAM
REVIVE DALLAS SMALL BUSINESS RELIEF FUND AT COMMUNITIES FOUNDATION OF TEXAS 5500 CARUTH HAVEN LANE DALLAS, TX 75225	75-0964565	501(C)(3)	25,000				PROGRAM

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
ROSA ES ROJO INC BOX 250435 PLANO, TX 75025	81-3557997	501(C)(3)	36,050				PROGRAM
SENIOR CITIZENS OF GREATER DALLAS INCDBA THE SENIOR SOURCE 3910 HARRY HINES DALLAS, TX 75219	75-1085555	501(C)(3)	12,000				PROGRAM

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
SHELTER FOR ABUSED WOMEN & CHILDREN INC PO BOX 10102 NAPLES, FL 34101	59-2752895	501(C)(3)	6,000				OPERATING
SHELTER MINISTRIES OF DALLAS DBA GENESIS WOMEN'S SHELTER 4411 LEMMON AVENUE SUITE 201 DALLAS, TX 75219	75-1881365	501(C)(3)	20,000				PROGRAM

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
SOUTHERN METHODIST UNIVERSITY PO BOX 750100 DALLAS, TX 75275	75-0800689	501(C)(3)	171,650				\$1,650 FOR OPERATING, \$170,000 FOR PROGRAM
SOUTHWESTERN MEDICAL FOUNDATION REAGAN PLACE AT OLD PARKLAND 3963 MAPLE AVE SUITE 100 DALLAS, TX 75219	75-0945939	501(C)(3)	10,000				OPERATING

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
ST MARK'S SCHOOL OF TEXAS 10600 PRESTON RD DALLAS, TX 752304000	75-0827460	501(C)(3)	10,000				OPERATING
ST PHILIP'S SCHOOL & COMMUNITY CENTER 1600 PENNSYLVANIA AVENUE DALLAS, TX 75215	75-1097360	501(C)(3)	62,500				PROGRAM

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
ST SIMONS AFTER SCHOOL PO BOX 700324 DALLAS, TX 75370	23-7088135	501(C)(3)	20,000				OPERATING
ST VINCENT DE PAUL PHARMACY 5750 PINELAND DR STE 280 DALLAS, TX 75220	26-3273175	501(C)(3)	50,000				OPERATING

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
ST VINCENT DE PAUL THRIFT STORES OF NORTH TEXAS 3052 W NORTHWEST HIGHWAY DALLAS, TX 75220	26-0080930	501(C)(3)	30,000				OPERATING
TCU NEELEY SCHOOL OF BUSINESS NEELEY SCHOOL OF BUSINESS TCU BOX 298530 FORT WORTH, TX 76129	75-0827465	501(C)(3)	160,000				\$60,000 FOR OPERATING, \$100,000 FOR PROGRAM

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
TEACH FOR AMERICA INC- DALLAS FORT WORTH REGION 600 N PEARL ST STE 2300 DALLAS, TX 75201	13-3541913	501(C)(3)	10,000				OPERATING
TEACHING TRUST 1349 EMPIRE CENTRAL DR STE 400 DALLAS, TX 752474033	27-2485117	501(C)(3)	155,000				OPERATING

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
TEXAS COUNTS POOLED FUND AT COMMUNITIES FOUNDATION OF TEXAS 5500 CARUTH HAVEN DALLAS, TX 752258146	75-0964565	501(C)(3)	10,000				PROGRAM
TEXAS EQUAL ACCESS FUND P O BOX 227336 DALLAS, TX 75222	11-3736286	501(C)(3)	10,000				OPERATING

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
TEXAS HOSPITAL ASSOCIATION FOUNDATION 1108 LAVACA STREET SUITE 700 AUSTIN, TX 78701	26-0597324	501(C)(3)	10,000				PROGRAM
TEXAS MUSLIM WOMEN'S FOUNDATION PO BOX 863388 PLANO, TX 75086	20-3060929	501(C)(3)	15,000				PROGRAM

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
TEXPROTECTS 1341 W MOCKINGBIRD LN STE 560W DALLAS, TX 75247	44-1332547	501(C)(3)	205,000				OPERATING
THE MAGDALEN HOUSE INC 1302 REDWOOD CIRCLE DALLAS, TX 75218	75-2178327	501(C)(3)	50,000				OPERATING

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
THE WOMEN'S CENTER OF TARRANT COUNTY 1723 HEMPHILL FORT WORTH, TX 76110	75-1501868	501(C)(3)	51,050				PROGRAM
TIDES FOUNDATION PO BOX 29903 SAN FRANCISCO, CA 941290903	51-0198509	501(C)(3)	10,000				OPERATING

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
TRAFFICK911 4575 CLAIRE CHENNAULT DR ADDISON, TX 75001	27-1111529	501(C)(3)	30,000				PROGRAM
TRAUMA SUPPORT SERVICES OF TEXAS INC 210 S CEDAR RIDGE DR C-100 DUNCANVILLE, TX 75116	26-0469778	501(C)(3)	127,500				PROGRAM

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
TRINITY RIVER MISSION 2060 SINGLETON BLVD SUITE 104 DALLAS, TX 75212	75-6055203	501(C)(3)	30,000				PROGRAM
TRUST FOR PUBLIC LAND 325 N ST PAUL 2210 DALLAS, TX 75201	23-7222333	501(C)(3)	125,000				OPERATING

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
UNDER 1 ROOF 7501 CHESTERFIELD DR UNIT 206 DALLAS, TX 75237	80-0765001	501(C)(3)	10,000				PROGRAM
UNION GOSPEL MISSION 3211 IRVING BLVD DALLAS, TX 75247	75-6003612	501(C)(3)	10,000				PROGRAM

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
UNITED TO LEARN 5310 HARVEST HILL RD STE 190 DALLAS, TX 75230	82-2121965	501(C)(3)	100,000				OPERATING
UNIVERSITY OF NORTH TEXAS AT DALLAS 7300 UNIVERSITY HILLS BLVD DALLAS, TX 75241	45-3072303	501(C)(3)	100,000				PROGRAM

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
UNIVERSITY OF NORTH TEXAS FOUNDATION 801 NORTH TEXAS BLVD149 311250 DENTON, TX 76203	23-7232618	501(C)(3)	10,000				OPERATING
URBAN TEACHER CENTER INC 1800 WASHINGTON BLVD SUITE 411 BALTIMORE, MD 21230	27-0989006	501(C)(3)	100,000				PROGRAM

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
VAIL HEALTH SERVICES FOUNDATION PO BOX 1529 VAIL, CO 81658	74-2505662	501(C)(3)	100,000				OPERATING
WESLEY-RANKIN COMMUNITY CENTER 3100 CROSSMAN AVENUE DALLAS, TX 75212	75-0808775	501(C)(3)	33,000				PROGRAM

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
WILKINSON CENTER PO BOX 720248 DALLAS, TX 753720248	75-2712117	501(C)(3)	35,956				PROGRAM
WINGS 2603 INWOOD RD DALLAS, TX 75235	75-0800699	501(C)(3)	81,000				PROGRAM

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
WOMEN MOVING MILLIONS 19 FULTON ST STE 301 NEW YORK, NY 10038	45-2576859	501(C)(3)	20,000				OPERATING
WOMEN'S FOUNDATION OF MINNESOTA 105 5TH AVE S SUITE 300 MINNEAPOLIS, MN 55401	41-1635761	501(C)(3)	21,500				OPERATING

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
WOMEN'S FUNDING NETWORK 57 POST ST SUITE 801 MECHANICS INSTITUTE SAN FRANCISCO, CA 94104	41-1685134	501(C)(3)	25,000				OPERATING
WORLD AFFAIRS COUNCIL OF DALLAS FT WORTH 325 N ST PAUL ST SUITE 4200 DALLAS, TX 75201	75-0855628	501(C)(3)	175,000				OPERATING

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
WOVEN HEALTH CLINIC (FORMERLY ON EAGLES WINGS INC DBA METRO 1 MEDICAL PKWY PLAZA 1 STE 149 FARMERS BRANCH, TX 75234	75-2616002	501(C)(3)	127,500				PROGRAM
YEAR UP INC 701 ELM STREET SUITE 400 DALLAS, TX 75202	04-3534407	501(C)(3)	30,000				PROGRAM

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
YOUNG WOMEN'S PREPARATORY NETWORK 1722 ROUTH STREET SUITE 720 DALLAS, TX 75201	47-0902114	501(C)(3)	50,000				PROGRAM
ZAN WESLEY HOLMES JR COMMUNITY OUTREACH CENTER 4600 SPRING AVE DALLAS, TX 75210	27-0054084	501(C)(3)	10,000				PROGRAM

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
ZONTA INTERNATIONAL FOUNDATION 1211 W 22ND ST STE 900 OAK BROOK, IL 60523	36-3396932	501(C)(3)	10,000				OPERATING

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TEXAS WOMEN'S FOUNDATION

Employer identification number
75-2048261

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input checked="" type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2 Yes									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a No	4b No								
	4c No									
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a No	5b No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a No	6b No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7 Yes									
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8 No									
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROSLYN DAWSON THOMPSON PRESIDENT & CEO	(i)	265,238	62,810	740	13,520	6,618	348,926	0
	(ii)	0	0	0	0	0	0	0
2 DENA JACKSON COO	(i)	192,337	0	188	8,562	12,648	213,735	0
	(ii)	0	0	0	0	0	0	0
3 DAWN HOOPER VP - FINANCE & OPERATIONS	(i)	163,663	2,500	138	5,603	6,618	178,522	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	ALL EMPLOYEES CAN EXPENSE \$120/YEAR FOR HEALTH CLUB DUES. THE CEO HAS A FUND FOR DISCRETIONARY GRANTING, BUT NOT GENERAL EXPENSES OTHER THAN REGULAR BUDGETING.
PART I, LINE 7	BONUSES ARE AWARDED FOR MEETING ORGANIZATIONAL GOALS. THE BONUSES ARE APPROVED BY THE PRESIDENT AND CEO AND THE COMPENSATION COMMITTEE OF THE BOARD.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TEXAS WOMEN'S FOUNDATION

Employer identification number
75-2048261

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	X		212	FMV
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	10	338,252	FMV
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 ▶ (FOOD/EVENT SPACE)	X	4	5,658	
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** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 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 didn't 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
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SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

TEXAS WOMEN'S FOUNDATION

Employer identification number

75-2048261

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND SUBJECT TO REVIEW BY THE FOUNDATION'S BOARD OF DIRECTORS. THE FORM 990 IS REVIEWED PRIOR TO FILING FOR COMPLETENESS, ACCURACY OF DISCLOSURES AND FINANCIAL DATA.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE TEXAS WOMEN'S FOUNDATION HAS A CONFLICT OF INTEREST POLICY IN PLACE. ANNUALLY, FORMS ARE DISTRIBUTED AT THE ANNUAL BOARD RETREAT FOR SIGNATURE AND COLLECTION. IN ADDITION, BOARD MEMBERS ARE ASKED TO DISCLOSE ANY CONFLICTS OF INTEREST FOR EVERY GRANT VOTE. SHOULD A CONFLICT OF INTEREST ARISE, THAT INDIVIDUAL IS NOT ALLOWED TO VOTE ON THE MATTER INVOLVED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE FOUNDATION EVALUATES THE PROPRIETY OF EXECUTIVE COMPENSATION, WHICH IS SET BY INDEPENDENT PERSONS, IN RELATION TO THEIR PERFORMANCE, AS WELL AS IN RELATION TO COMPENSATION PAID BY ORGANIZATIONS OF SIMILAR SCOPE AND ACTIVITIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE MOST RECENT FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CHANGE IN VALUE OF SPLIT-INTERST AGREEMENT 44,074. AGENCY FUNDS -40,263.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
TEXAS WOMEN'S FOUNDATION

Employer identification number

75-2048261

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)CHARITABLE REMAINDER TRUSTS (1)	CHARITABLE REMAINDER TRUST	TX	N/A	T					No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation