### PROTHRO, WILHELMI & COMPANY, P.L.L.C. 6855 OAK HILL BLVD. TYLER, TX 75703 903.534.8811

January 8, 2020

MITCH ANDREWS TYLER JUNIOR COLLEGE FOUNDATION PO BOX 9020 TYLER, TX 75711

Dear MITCH:

Your 2018 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. This return is due on or before January 15, 2020. No tax is payable with the filing of this return.

We have prepared your return(s) using the information that you provided. It is your responsibility to provide all the information required to prepare your returns. You represent that the information you have provided is accurate and complete to the best of your knowledge, and that you understand, and have complied with, the documentation requirements for your expenses and deductions. We have not audited or otherwise verified the information provided, although we may have asked for clarification on some of the information. Our work in connection with the preparation of your income tax return(s) does not include any procedures designed to discover errors or other irregularities, should any exist. You have the final responsibility for the income tax return(s) and, therefore, you should review them carefully before you sign them.

Please be sure to call us if you have any questions.

Sincerely,

Walter K. Wilhelmi

### Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Open to Public Inspection

Α	For the 2	U 18 calen	dar year, or tax year begii	nning 9/01	, 2018,	and ending	8/3	3 <b>1</b>	,	2019
В	Check if app	olicable:	С					D Employe	er identific	ation number
	Addres	s change	TYLER JUNIOR COI	LEGE FOUNDATIO	N			75-6	04682	16
	Name (	change	PO BOX 9020				F	E Telephor		
	Initial r	-	TYLER, TX 75711					903	510.2	2868
		urn/terminated					F	703.	J10.2	2000
	-							<b>C</b> o		20 774 715
	$\vdash$	led return	<b>F</b> N	1 10		l.		<b>G</b> Gross re		20,774,715.
	Applica	ation pending		al officer: MITCH AND	REWS		. ,			163 140
			SAME AS C ABOVE			'	If "No,"	subordinates attach a list.	inciuaea? (see instri	uctions) Yes No
<u> </u>	Tax-exem	npt status:	X 501(c)(3) 501(c) (	)◀ (insert no.)	4947(a)(1) or	527				
J	Websit	e:► WW	W.TJC.EDU/FOUNDA	TION		H	I(c) Group e	exemption nu	mber <b>&gt;</b>	
K		rganization:	X Corporation Trust	Association Other ►	LY	ear of formation	n: 1965	M St	ate of lega	al domicile: TX
Pa		Summar								_
			be the organization's miss							
a	RE	SOURCE	S OF TEXAS BY EN	COURAGING A PRO	OGRAM OF I	BENEFAC'	CORS T	O TYLE	R JUN	IIOR
ũ	CC	DLLEGE.								
Ë										
o S		eck this bo		on discontinued its oper					net asse	ts.
Ğ			oting members of the gove						3	25
တ္			dependent voting member						4	25
ië			of individuals employed i						5	0
Activities & Governance			of volunteers (estimate if						6	50
Ř			ed business revenue from					_	7a	0.
	<b>b</b> Ne	t unrelated	d business taxable income	from Form 990-1, line	38				7b	0.
	0 00	م مناب بازیام	and manta (Dort VIII line	. 1h)				rior Year	0.7	Current Year
<u>e</u>			and grants (Part VIII, line				13	,387,9	27.	17,010,670.
Revenue			vice revenue (Part VIII, lin					600 0	0.1	2 606 000
ě			ncome (Part VIII, column ( e (Part VIII, column (A), li					,602,8		3,606,082.
_			e – add lines 8 through 11				1.0	58,9		62,451.
			imilar amounts paid (Part					,049,7		20,679,203.
								<u>,748,5</u>	74.	4,252,924.
			I to or for members (Part I							
S	<b>15</b> Sal		er compensation, employe							
Expenses	<b>16a</b> Pro	ofessional	fundraising fees (Part IX,	column (A), line 11e)						
ę.	<b>b</b> Tot	al fundrais	sing expenses (Part IX, co	lumn (D), line 25) ►	2	5,801.				
Ш	<b>17</b> Oth	ner expens	ses (Part IX, column (A), I	ines 11a-11d, 11f-24e).				118,3	22.	105,163.
	<b>18</b> Tot	al expense	es. Add lines 13-17 (must	egual Part IX, column	(A), line 25)		2	,866,8		4,358,087.
	<b>19</b> Rev	venue less	s expenses. Subtract line	18 from line 12				,182,8		16,321,116.
- S			'					g of Current		End of Year
anc anc	<b>20</b> Tot	al assets	(Part X, line 16)					,216,6		80,030,172.
Λss. Bal	<b>21</b> Tot		es (Part X, line 26)				01	928,5		770,281.
Net Assets Fund Balanc	<b>22</b> Net		fund balances. Subtract I				6.2	•		,
Da		Signatur		ine 21 nom ine 20			63	,288,0	03.	79,259,891.
					-1			. I a suda da s		14 to 4
com	olete. Declar	ation of prepa	eclare that I have examined this ret arer (other than officer) is based on	all information of which prepa	rer has any knowled	nents, and to th lge.	e best of my	/ knowleage a	and belier,	it is true, correct, and
Siz	ın	Signatu	ire of officer				Dat	e		
Siç He	jii re	мтт	CH YNDDEMC				EVECII	TIVE D	тресч	י∩ם
			CH ANDREWS  r print name and title				EAECU		TKECI	LOR
			preparer's name	Preparer's signature		Date		Chack	if PT	
_				oparor o orginataro				Check	J	
Pa			R K. WILHELMI	HEINT & CONTE	. D. T. T. C	<u> </u>		self-employe	a P	00111966
Pre	eparer	Firm's name		HELMI & COMPAN	Y, P.L.L.(	J •				
US	e Only	Firm's addre	*****							2804360
			TYLER, TX 75					Phone no.	903.5	34.8811
Ma	the IRS	discuss th	is return with the prepare	r shown above? (see in	istructions)					X Yes No

Par		
1	Check if Schedule O contains a response or note to any line in this Part III	
1		A DDOGDAM OF
	TO STRENGTHEN THE HIGHER EDUCATIONAL RESOURCES OF TEXAS BY ENCOURAGING	A PROGRAM OF
	BENEFACTORS TO TYLER JUNIOR COLLEGE.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior	
2		□ Vaa Ⅵ Na
	Form 990 or 990-EZ?	Yes X No
2		□ Vaa ₩ Na
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as m Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other and revenue, if any, for each program service reported.	s, the total expenses,
	and revenue, it dry, for each program control reported.	
<i>1</i> a	(Code: ) (Expenses \$ 2,601,828. including grants of \$ 2,601,828.) (Revenue	<u>\$</u>
7 u	SUPPORT PROGRAMS AND PROJECTS TO PROMOTE THE MISSION OF TYLER JUNIOR CO	
	INCLUDING EXPENDITURES FOR ART, ATHLETICS, TECHNOLOGY, INTERNATIONAL GO	
	LIBRARY, NURSING AND OTHER ACADEMICS. IN ADDITION, THE FOUNDATION CONTR	
	FOR THE CONSTRUCTION OF THE NEW ROBERT M. ROGERS NURSING AND HEALTH SCI	FUCE BOILDING.
		<del>.</del>
4 b	(Code:) (Expenses \$ 1,651,096. including grants of \$ 1,651,096.) (Revenue	
	AWARDED MORE THAN 1200 SCHOLARSHIPS FROM PERMANENTLY AND TEMPORARILY RE	
	TO 760 TJC STUDENTS. THESE AWARDS MAKE IT POSSIBLE FOR MANY OF THE STUI	
	RECEIVE A COLLEGE EDUCATION WHICH THEY COULD NOT OTHERWISE AFFORD, HELF	ING THEM TO
	BECOME LEADERS IN THEIR COMMUNITY.	
4 c	: (Code: ) (Expenses \$ including grants of \$ ) (Revenue	\$
		·
	1 Other program convices (Describe in Schodule O.)	
4 d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4 e	• Total program service expenses ► 4,252,924.	

# Form 990 (2018) TYLER JUNIOR COLLEGE FOUNDATION Part IV | Checklist of Required Schedules

	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
ā	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
ŀ	o Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Χ
(	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.	11 c		X
C	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	X	
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
ł	was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
ŀ	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
<b>20</b> a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	Х	

# Form 990 (2018) TYLER JUNIOR COLLEGE FOUNDATION 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	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	<b>b</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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	<b>a</b> A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	contributions? If 'Yes,' complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part l</i>	33		Х
	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	Х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	<b>b</b> If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Note. All Form 990 filers are required to complete Schedule O.	38	Χ	
ra	Tt 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			
	Greek it ochequie o contains a response of note to any line in this Part V		Yes	No
1	<b>a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		103	110
	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c	X	

Form 990 (2018) TYLER JUNIOR COLLEGE FOUNDATION

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

			Yes	No
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
	a If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
	of 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
ı	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
(	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
•	services provided to the payor?	7 a	Χ	
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Χ	
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	_		v
	Form 8282?	7с		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7.		Х
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e 7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			71
	as required?	7 g		
ı	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	Х	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ı	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	10		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
	j			
	Denter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
		. 7 13		
13	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			

NANCY DAVIS PO BOX 9020

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . 25 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 25 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?..... 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . SEE SCH O Χ 4 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Did the organization have members or stockholders?..... 6 Χ 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ a The organization's CEO, Executive Director, or top management official...... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

TYLER TX 75711 903.510.2868

### 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.....

Χ

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

		(C)								
(A) Name and Title	(B) Average hours per	thar	Position (do not che than one box, unles is both an officer director/truste		ss perso and a ee)	on	(D)  Reportable compensation from the organization	(E)  Reportable compensation from	(F) Estimated amount of other compensation	
SEE SCHEDULE O	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) MARILYN ABEGG-GLASS	0									
DIRECTOR	0	Х						0.	0.	0.
(2) JEFF BUIE	0									_
DIRECTOR	0	Χ						0.	0.	0.
(3) SCOTT ELLIS	0									
DIRECTOR	0	Χ						0.	0.	0.
(4) KEVIN ELTIFE	0									
DIRECTOR	0	Χ						0.	0.	0.
(5) ANNETTE FINDLEY	0									
DIRECTOR	0	Χ						0.	0.	0.
(6) RUSTY FLETCHER	0									
DIRECTOR	0	Χ						0.	0.	0.
(7) LEE GIBSON	0									
DIRECTOR	0	Χ						0.	0.	0.
(8) LAVERNE GOLLOB	0									
DIRECTOR	0	Х						0.	0.	0.
(9) BILLIE HARTLEY	0									
DIRECTOR	0	Х						0.	0.	0.
(10) MARTIN HEINES	0									
DIRECTOR	0	Х						0.	0.	0.
(11) DR. PAUL LATTA	0									
DIRECTOR	0	Х						0.	0.	0.
(12) JIM LESTOR	0									
DIRECTOR	0	Х						0.	0.	0.
(13) MEL LOVELADY	0									
DIRECTOR	0	Х						0.	0.	0.
(14) ANDY NAVARRO	0							_	_	_
DIRECTOR	0	Χ						0.	0.	0.

**BAA** TEEA0107L 08/03/18 Form **990** (2018)

Part VII   Section A. Officers, Directors, Tre	ustees, (B)	Key	Em	plo) ک)	_	es,	and	d Highest Com □	pensated Emp	oyees	<b>(</b> conti	nued)
(A) Name and title	Average hours per week (list any hours for	offi	, unle cer ar	Pos check ess pe nd a c	sition more erson direct	than is both or/trus emple	h an tee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	amor com fr org	(F) stimated unt of oth pensation rom the janization	her on n
	related organiza - tions below dotted line)	ndividual trustee or director	nstitutional trustee	er •	Key employee	Highest compensated employee	er				d related anization	
(15) JOSEPH ORNELAS DIRECTOR	00	Х						0.	0.			0.
(16) LOUISE ORNELAS DIRECTOR	0	Х						0.	0.			0.
(17) PAUL OWEN DIRECTOR	0	Х						0.	0.			0.
(18) JIM PERKINS DIRECTOR	0	Х						0.	0.			0.
(19) SHERYL ROGERS PALMER DIRECTOR	0	Х						0.	0.			0.
(20) SAM ROOSTH DIRECTOR	0	X						0.	0.			0.
(21) FREDDIE SANCHEZ DIRECTOR	0	X						0.	0.			0.
(22) TOM SEALE DIRECTOR	0	Х						0.	0.		0	
(23) DR. SHERILYN WILLIS DIRECTOR	0	X						0.	0.		0.	
(24) JIMMY MURPHY DIRECTOR	0	X						0.	0.			0.
(25) DAVID MCCULLOUGH CHAIRMAN	2	Х		Х				0.	0.			0.
1 b Sub-total							<b>&gt;</b>	0.	0.	0.		0.
c Total from continuation sheets to Part VII, Secti							<b>&gt;</b>	0.	172,464.		41,7	
d Total (add lines 1b and 1c)					who	recei	ved	0. more than \$100.00	172,464.	ensatio	41,7	05.
from the organization • 0		.0.00								011001101		
											Yes	No
3 Did the organization list any <b>former</b> officer, direct on line 1a? If 'Yes,' complete Schedule J for such	ctor, or tru ch individu	stee ıal	, key	/ em	ıplo <u>y</u>	yee,	or h	nighest compensa	ted employee	. 3		Х
<b>4</b> For any individual listed on line 1a, is the sum o the organization and related organizations greate such individual	f reportab er than \$1	le co 50,0	mpe 00?	ensa If '}	ition <i>es,</i>	and com	oth <i>ple</i>	er compensation te Schedule J for	from	4		X
<ul><li>5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes</li></ul>	ie comper	satio	n fr	om	anv	unre	late	ed organization or	individual			X
Section B. Independent Contractors	<i>5, 66p.</i> 6						р			.   -	l l	
Complete this table for your five highest comper compensation from the organization. Report comper	nsated indensation for	epen the c	dent alen	t cor dar j	ntra year	ctors endi	tha ng v	it received more to with or within the or	nan \$100,000 of ganization's tax year			
(A) Name and business address							Description (	of services	(C) Compensation			
2 Total number of independent contractors (including \$100,000 of compensation from the organization		ited t	o tho	ose Ī	liste	d abo	ve)	who received more	than			

#### Form 990

### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

TYLER JUNIOR COLLEGE FOUNDATION

Employler Identification number

75-6046816

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												
(A)	(B)			(0	;)			(D)	(E)	(F)		
Name and Title	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
BILLY HIBBS JR VICE CHAIRMAN	2	Х		Х				0.	0.	0.		
LAURA HYDE TREASURER	0 0	Х		Х				0.	0.	0.		
VERNA HALL	0											
SECRETARY MITCH_ANDREWS	0 40	Х		X				0.	0.	0.		
EXECUTIVE DIR. SHELBY GOULD	0 40			Х				0.	105,602.	15,000.		
<u>C00</u>	0			Χ				0.	66,862.	26,705.		
		-										
		_										
		-										
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		•										
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		•										
		•										
		-										
		+										

		Check if Schedule O contains a response or note to any	y line in this Part V	III		
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c 167,576.  Related organizations 1d  Government grants (contributions) 1e  All other contributions, gifts, grants, and similar amounts not included above 1f 16,843,094.  Noncash contributions included in lines 1a-1f: \$ 475,426.  Total. Add lines 1a-1f	17,010,670.			
<u>a</u>		Business Code	1770107070.			
Œ	2 a					
æ	b					
<u>e</u> .	С					
Š.	d					
Program Service Revenue	е					
gra	f	All other program service revenue				
Æ	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest and				
	_	other similar amounts)	1,731,019.			1,731,019.
	4	Income from investment of tax-exempt bond proceeds >				
	5	Royalties	62,451.			62,451.
	6 2	Gross rents				
		Less: rental expenses				
		Rental income or (loss)				
		Net rental income or (loss)				
		Gross amount from sales of (i) Securities (ii) Other				
	/ a	assets other than inventory 1,875,063.				
	b	Less: cost or other basis and sales expenses				
	С	Gain or (loss) 1,875,063.				
		Net gain or (loss)	1,875,063.			1,875,063.
enne	8 a	Gross income from fundraising events (not including \$ 167,576. of contributions reported on line 1c).	=, ,			
Other Reven		•				
7	h	30,011				
Ě		Less: direct expenses				
O.		Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less returns and allowances a				
	b	Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory▶				
		Miscellaneous Revenue Business Code				
	11 a					
	b					
	C	Allertheaman				
	-	All other revenue				
		Total Add lines 11a-11d	00 600 000			2 662 522
	12	<b>Total revenue.</b> See instructions ▶	20,679,203.	0.	0.	3,668,533.

#### 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).

Do l	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,601,828.	2,601,828.	30	2140
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,651,096.	1,651,096.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	, ,	, ,		
4 5 6	Benefits paid to or for members	0.	0.	0.	0.
	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
á	Management				
ŀ	<b>)</b> Legal				
	Accounting	17,100.		17,100.	
	Lobbying	11/1001		11/1001	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column	22 222		22.222	
10	(A) amount, list line 11g expenses on Schedule O.)	30,998.		30,998.	05.001
	Advertising and promotion	26,827.		1,026.	25,801.
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	4,225.		4,225.	
21	Payments to affiliates	,		·	
22	Depreciation, depletion, and amortization				
23	Insurance	6,161.		6,161.	
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.)	,,,,,,,		2,222	
á	REAL ESTATE TAXES	7,716.		7,716.	
	ONTRACT_SERVICES	7,600.		7,600.	
(	OTHER EXPENSE	4,536.		4,536.	
(	i				
•	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,358,087.	4,252,924.	79,362.	25,801.
26		,,	, , , , , , ,	.,	.,

### Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part >	<b>〈</b>		
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing.		1	351,491.
	2	Savings and temporary cash investments.		2	2,075,752.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,583,105.	4	4,532,070.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined und section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L.	der '	6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	881,755.	9	624,159.
	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D	·		
		Less: accumulated depreciation	720,442.	10 c	726,290.
	11	Investments – publicly traded securities.	·	11	70,932,013.
	12	Investments – other securities. See Part IV, line 11		12	745,728.
	13	Investments – program-related. See Part IV, line 11	,	13	71077201
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	42,669.
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	,	16	80,030,172.
	17	Accounts payable and accrued expenses	827,823.	17	669,412.
	18	Grants payable		18	,
	19	Deferred revenue	100,731.	19	100,869.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third partie and other liabilities not included on lines 17-24). Complete Part X of Schedu		25	
	26	<b>Total liabilities.</b> Add lines 17 through 25.		26	770,281.
ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and completines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets		27	13,057,501.
Bal	28	Temporarily restricted net assets.	-, ,	28	
힏	29	Permanently restricted net assets	46,791,560.	29	66,202,390.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
fet	33	Total net assets or fund balances	63,288,063.	33	79,259,891.
_	34	Total liabilities and net assets/fund balances.		34	80,030,172.

Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				🗍				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,	679,	203.				
2	Total expenses (must equal Part IX, column (A), line 25)	2		358,					
3	Revenue less expenses. Subtract line 2 from line 1	3		321,					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		288,					
5	Net unrealized gains (losses) on investments	5		349,					
6	Donated services and use of facilities	6		,					
7	7 Investment expenses								
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.				
10									
_	column (B))	10	79,	259,	<u>891.</u>				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain								
	in Schedule O.								
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	ed on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis			,					
	<b>b</b> Were the organization's financial statements audited by an independent accountant?		2	b X					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:	ate							
	X 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?		2	c X					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.								
3	<b>a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single								
3	Audit Act and OMB Circular A-133?		3	а	X				
	<b>b</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								
2 A /	Λ TEEA0112L 08/03/18		Eas	m aan	(2010)				

#### **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

2018

Open to Public Inspection

Name	Name of the organization Employer identification number								
TYLER JUNIOR COLLEGE FOUNDATION 75-6046816									
Par			<u> </u>			<u>' '                                  </u>	tions.		
	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 <b>section 170(b)(1)(A)(i)</b> .								
2	A school described in <b>section</b>	• • • • • • • • • • • • • • • • • • • •	•		•				
3	A hospital or a cooperative h								
4	A medical research organiza	ation operated in conju	inction with a hospital	describe	d in <b>sec</b>	tion 170(b)(1)(A)(iii). E	nter 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 gov	ernment or governme	ntal unit described in s	ection 1	<b>70(b)(</b> 1)	(A)(v).			
7	An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial p (Complete Part II.)	art of its support from a	governm	ental uni	it or from the general pub	olic described		
8	A community trust described	in section 170(b)(1)(	A)(vi). (Complete Part	l.)					
9	An agricultural research organ or university or a non-land-gra university:								
10	An organization that normally from activities related to its investment income and unre June 30, 1975. See section	exempt functions—sub lated business taxable	oject to certain exception in the community in the commun	ns, and	(2) no i	more than 33-1/3% of it	ts support from gross		
11	An organization organized a		•	ety. See	section	1 509(a)(4).			
12	X An organization organized a or more publicly supported or	organizations describe	d in section 509(a)(1)	r <b>sectio</b>	on 509(a	)(2). See section 509(a)	at the purposes of one <b>(3).</b> Check the box in		
а	lines 12a through 12d that do Type I. A supporting organization(s) the power to re	ion operated, supervise	d, or controlled by its sur	ported o	organizat	ion(s), typically by giving	the supported		
	complete Part IV, Sections	A and B.	a majority of the alrecto	15 01 1145	01000 01 1	ine supporting organization	on. Tou must		
t	Type II. A supporting organizemanagement of the supporting must complete Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organization	having control or on(s). <b>You</b>		
c	Type III functionally integrated organization(s) (see instruction)	l. A supporting organizations). <b>You must comp</b>	ion operated in connection olete Part IV, Sections	n with, a	nd functio	onally integrated with, its	supported		
c	Type III non-functionally integrated. The instructions). You must com	organization generally	must satisfy a distribu	nnection tion req	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see		
e		zation received a writte	en determination from	the IRS	that it is	a Type I, Type II, Type	e III functionally		
f							1		
	Provide the following information		d organization(s).						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the tion listed poverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
				103	110				
(A)	TYLER JUNIOR COLLEGE	75-6002676	2	Х		2,601,828.	0.		
<u> </u>	TIEBLE CONTON COLLEGE	70 0002070				2,001,020.	· ·		
(B)									
-									
(C)	(C)								
(D)									
(E)	E)								
Tota	 I					2,601,828.	0.		

### 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 fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support			,	•			
Cale	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total	
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support		•	•	•			
Cale	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ		structions)			12	-	
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	nird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ □	
Sec	tion C. Computation of Pu	blic Support P	Percentage				<u> </u>	
14	Public support percentage for 20	018 (line 6, colum	n (f) divided by li	ne 11, column (f))	)	14	%	
15	Public support percentage from	2017 Schedule A,	Part II, line 14.			15	%	
16a	<b>33-1/3% support test—2018.</b> If t and <b>stop here.</b> The organization	he organization d qualifies as a pul	id not check the l blicly supported o	box on line 13, an	d line 14 is 33-1/3	3% or more, check	this box	
b	and stop here. The organization qualifies as a publicly supported organization.  b 33-1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
17a	10%-facts-and-circumstances to more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance	es' test, check this	box and stop her	re. Explain in Part	VI how	
b	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	est—2017. If the or meets the 'facts-a d-circumstances'	rganization did no and-circumstance test. The organiz	ot check a box on es' test, check this ation qualifies as	line 13, 16a, 16b, box and <b>stop he</b> r a publicly support	, or 17a, and line 1 re. Explain in Part ted organization	15 is 10% VI how the ►	
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	tructions ►	

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.)

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. ( 11.)			
Calend	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7
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						
	<b>Total.</b> Add lines 1 through 5 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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b.  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.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·				
	tion C. Computation of Pul					, ,	
	Public support percentage for 20	•			•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					1 1	
17	Investment income percentage for	•	• • •	-			0,0
18	Investment income percentage fi						%
	<b>33-1/3% support tests—2018.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐
	<b>33-1/3% support tests—2017.</b> If t line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization	, check this box	and <b>stop here.</b> The	e organization qu	ialifies as a public	ly supported organ	nization ►

#### Part IV Supporting Organizations

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

#### **Section A. All Supporting Organizations**

<b>3</b> EC	tion A. An Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Х	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		X
38	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		X
ŀ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
(	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		X
ŀ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
(	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI,</b> including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		X
ł	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		
(	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b> .	6		X
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		X
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		X
98	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> .	9a		X
ŀ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		X
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9с		X
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)? If 'Yes,' answer 10b below.	10a		X
	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		
<b>ΣΛΛ</b>	Schodulo A (Form 99)	n no	\n E7\	2010

Pa	irt iv Supporting Organizations (Continued)			
			Yes	No
	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?	11a		Х
	<b>b</b> A family member of a person described in (a) above?	11b		Х
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		Х
Se	ction B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
•	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
	otion of Type it capporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
	of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Χ	
	organization's governing documents in enection the date of notification, to the extent not previously provided:	•	Λ	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant			
J	voice in the organization's investment policies and in directing the use of the organization's income or assets at			
	all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		Х
Se	ction E. Type III Functionally Integrated Supporting Organizations			
	otion 21 19po in 1 unotionally 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 X The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
	<b>b</b> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ารtruc	tions).	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported organizations and explain</b> 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.  SEE PART VI	2a	X	
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  SEE PART VI	2b	X	
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	<b>b</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>	3b		

Sche	edule A (Form 990 or 990-EZ) 2018	l	75-60	46816 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.
Sec	tion 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		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
á	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e <b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). Schedule A (Form 990 or 990-EZ) 2018

Page 7

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion 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	<b>Total annual distributions.</b> Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
<b>b</b> Excess from 2015			
c Excess from 2016			
d Excess from 2017			
<b>e</b> Excess from 2018			

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

### PART IV, SECTION E, LINE 2A - IDENTIFY SUPPORTED ORGS. AND EXPLAIN HOW ACTIVITIES FURTHERED EXEMPT PURPOSES

THE TYLER JUNIOR COLLEGE FOUNDATION WAS ORGANIZED AND INCORPORATED ON JANUARY 18, 1965 FOR THE PURPOSE OF STIMULATING VOLUNTARY PRIVATE SUPPORT FROM ALUMNI, PARENTS, FRIENDS, CORPORATIONS, FOUNDATIONS AND OTHERS FOR THE BENEFIT OF TYLER JUNIOR COLLEGE. THE FOUNDATION EXISTS TO RAISE AND MANAGE PRIVATE RESOURCES TO SUPPORT THE MISSION AND PRIORITIES OF THE COLLEGE AND TO PROVIDE OPPORTUNITIES FOR STUDENTS.

#### PART IV. SECTION E. LINE 2B - REASONS FOR THE ORGANIZATION'S POSITION

THE FOUNDATION IS DEDICATED TO ASSISTING THE COLLEGE IN BUILDING ENDOWMENT AND IN ADDRESSING, THROUGH FINANCIAL SUPPORT, THE LONG-TERM ACADEMIC AND OTHER PRIORITIES OF THE COLLEGE. THE TWO MAIN FORMS OF FINANCIAL SUPPORT TO THE COLLEGE ARE IN GRANTS MADE DIRECTLY TO THE COLLEGE AND IN SCHOLARSHIPS TO INDIVIDUALS SO THAT THEY ARE ABLE TO ATTEND THE COLLEGE.

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

	TYLER JUNIOR COLLEGE FOUNDAT			75-6046816	
rt I	Organizations Maintaining Donor A Complete if the organization answer	Advised Funds or Othe ered 'Yes' on Form 990	er Similar Funds . Part IV. line 6.	or Accounts.	
		(a) Donor advised f	· · · · · · · · · · · · · · · · · · ·	(b) Funds and other acco	ounts
Tota	Il number at end of year	(a) Bollot davisou i	arias	(a) i unas una outror acce	Janes
	egate value of contributions to (during year)				
	egate value of grants from (during year)				
	regate value at end of year				
	the organization inform all donors and donor the organization's property, subject to the organization's				No
Did to	the organization inform all grantees, donors, charitable purposes and not for the benefit of termissible private benefit?	and donor advisors in writir the donor or donor advisor,	ng that grant funds ca or for any other pur	an be used only pose conferring	□ No
t II	Conservation Easements.				
( II	Complete if the organization answer	ered 'Yes' on Form 990	. Part IV. line 7.		
Purp	pose(s) of conservation easements held by the				
	Preservation of land for public use (e.g., rec	_ ·		nistorically important land ar	ea
	Protection of natural habitat	·		certified historic structure	
H	Preservation of open space	L			
Com	plete lines 2a through 2d if the organization held day of the tax year.	d a qualified conservation cont	ribution in the form of	a conservation easement on the	ne
	-			Held at the End of th	e Tax Ye
Tota	I number of conservation easements			2 a	
Tota	l acreage restricted by conservation easeme	ents		2 b	
Num	nber of conservation easements on a certified	d historic structure included	in (a)	2 c	
	nber of conservation easements included in (cture listed in the National Register			2 d	
	ber of conservation easements modified, transferer ►	erred, released, extinguished,	or terminated by the or	rganization during the	
,	ber of states where property subject to conserva	ation easement is located ►			
	s the organization have a written policy rega		a. inspection, handlin	g of violations.	
	enforcement of the conservation easements				No
Staff	f and volunteer hours devoted to monitoring, ins	pecting, handling of violations,	, and enforcing conserv	vation easements during the year	ear
Amoi	unt of expenses incurred in monitoring, inspecti	ng, handling of violations, and	enforcing conservation	n easements during the year	
Does and	s each conservation easement reported on li section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the rec	quirements of section	n 170(h)(4)(B)(i) <b>Yes</b>	☐ No
inclu	art XIII, describe how the organization reports or ude, if applicable, the text of the footnote to servation easements.			21 11 2 12 1	1. 6
rt III	Organizations Maintaining Collect Complete if the organization answer	ions of Art, Historical <sup>-</sup> ered 'Yes' on Form 990	<b>Treasures, or Otl</b> , Part IV, line 8.	ner Similar Assets.	
art. h	e organization elected, as permitted under S nistorical treasures, or other similar assets held art XIII, the text of the footnote to its financia	for public exhibition, education	n, or research in furthe	statement and balance shee rance of public service, provide	t works o
histo follo	e organization elected, as permitted under S rical treasures, or other similar assets held for p wing amounts relating to these items:	oublic exhibition, education, or	research in furtherand	ee of public service, provide the	orks of ar
(i) F	Revenue included on Form 990, Part VIII, lin	e 1			
	Assets included in Form 990, Part X				
If the	e organization received or held works of art, hist unts required to be reported under SFAS 11	orical treasures, or other simila 6 (ASC 958) relating to thes	ar assets for financial e items:	gain, provide the following	
Reve	enue included on Form 990, Part VIII, line 1.				
	ets included in Form 990 Part X			►\$	

Part III Organizations Mainta	ining Conections	o or Art, mistorica	ir rreasures, or C	Miler Sillillar ASS	<b>: (C</b>	אווווווע	ieu)		
3 Using the organization's acquisition items (check all that apply):	, accession, and other	records, check any of	the following that are	a significant use of its o	ollectio	n			
a Public exhibition		<b>d</b> Loan or ex	change programs						
b Scholarly research									
c Preservation for future gener	rations								
	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in								
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or receive han to be maintained	donations of art, his as part of the organ	torical treasures, or o	other similar assets	Yes		No		
Part IV Escrow and Custodia	l Arrangements.	Complete if the o	organization ansv	vered 'Yes' on For	m 99	ົງ, Par	t IV,		
line 9, or reported an	amount on Form	990, Part X, line	21.						
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian or oth	er intermediary for c	ontributions or other	assets not included	Yes	Г	No		
<b>b</b> If 'Yes,' explain the arrangement						L			
		, 3		/	Amoun	t			
<b>c</b> Beginning balance				1 c					
<b>d</b> Additions during the year				1 d					
e Distributions during the year				1 e					
f Ending balance				1 f					
2a Did the organization include an a	amount on Form 990,	Part X, line 21, for e	scrow or custodial ad	count liability?	Yes		No		
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. Check h	ere if the explanation	n has been provided	on Part XIII	<del>.</del>	[			
Part V   Endowment Funds. C									
4.5	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back		Four year			
<b>1 a</b> Beginning of year balance	61,031,315.	48,339,809.	45,357,337.	43,006,612.			,696.		
<b>b</b> Contributions	17,106,182.	13,445,919.	3,875,189.	2,800,994.	3	<u>, 667,</u>	,333.		
c Net investment earnings, gains, and losses	3,319,245.	2,913,255.	3,470,151.	2,461,612.		-206,	,403.		
<b>d</b> Grants or scholarships	4,252,924.	2,748,574.	3,843,576.	3,307,587.			,235.		
e Other expenditures for facilities									
and programs	200,675.	176,314.	205,823.	86,033.			,178.		
f Administrative expenses	2,855,490.	742,780.	313,469.	-481,739.			,399.		
g End of year balance	74,147,653.	61,031,315.	48,339,809.	45,357,337.	43	<u>, 006,</u>	,612.		
<ul><li>2 Provide the estimated percentage</li><li>a Board designated or quasi-endowm</li></ul>	-	end balance (line rg	, column (a)) neld as	•					
<b>b</b> Permanent endowment	89.28%	0.12.0							
c Temporarily restricted endowmer		%							
The percentages on lines 2a, 2b, a		_							
, -	·								
<b>3a</b> Are there endowment funds not in to organization by:	the possession of the o	rganization that are he	eld and administered for	or the	ſ	Yes	No		
(i) unrelated organizations					3a(i)	Х			
(ii) related organizations					3a(ii)		X		
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ated organizations lis	ted as required on So	chedule R?		3b				
4 Describe in Part XIII the intended	d uses of the organiza	ation's endowment fu	inds.						
Part VI Land, Buildings, and	Equipment.								
Complete if the organi	ization answered	'Yes' on Form 99	0, Part IV, line 1	1a. See Form 990	), Par	t X, li	ne 10.		
Description of property		t or other basis (by vestment)	O) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue		
<b>1 a</b> Land	,	·	726,290.			726	,290.		
<b>b</b> Buildings			,						
c Leasehold improvements									
<b>d</b> Equipment									
e Other									
Total. Add lines 1a through 1e. (Colum	nn (d) must equal For	m 990, Part X, colun	nn (B), line 10c.)				,290.		
BAA				Schedu	ıle D (F	orm 990	J) 2018		

Schedule D (Form 990) 2018

Part VII Investments – Other Securities.	N/ 1 E 00	N/A
		0, 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)		
(1)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶		37 / 3
Part VIII Investments — Program Related.	'Yes' on Form 99	N/A 0, 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)	(b) Book Value	(S) metriod of valuation, cost of one of year market value
(1)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶		
Part IX Other Assets.	N/A	A
		0, Part IV, line 11d. See Form 990, Part X, line 15
	scription	(b) Book value
(1)		
<u>(2)</u> (3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (E	3) line 15.)	▶
Part X Other Liabilities.		
Complete if the organization answered 'Yes' on F		·
(a) Description of liability (1) Federal income taxes	(b) Book value	
(1) Federal income taxes (2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.).	. ▶	
2 Lightith, for conservation for monitions. In Dank VIII magnitude the test of the fee		

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.

	<del>`</del>		
Part XI Reconciliation of Revenue per Audited Financial Statemen		eturn.	
Complete if the organization answered 'Yes' on Form 990, F			
1 Total revenue, gains, and other support per audited financial statements		1	20,425,427.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	<b>2a</b> -349,288.		
<b>b</b> Donated services and use of facilities	2 b		
c Recoveries of prior year grantsd Other (Describe in Part XIII.) SEE PART XIII	2 c		
d Other (Describe in Part XIII.) SEE PART XIII	2d 95,512.		
e Add lines 2a through 2d		2 e	-253,776.
3 Subtract line 2e from line 1		3	20,679,203.
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	4 a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	20,679,203.
Part XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	Return	1.
Complete if the organization answered 'Yes' on Form 990, F	Part IV, line 12a.		
Total expenses and losses per audited financial statements		1	4,453,599.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			, ,
a Donated services and use of facilities	2 a		
<b>b</b> Prior year adjustments	2 b		
c Other losses.	2 c		
d Other (Describe in Part XIII.) SEE PART XIII	2d 95,512.		
e Add lines 2a through 2d.		2 e	95,512.
3 Subtract line 2e from line 1.		3	4,358,087.
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	4 a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b.		4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	4,358,087.
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 2, 5, and 0: Part III, lines 1a and 4:	Part IV lines 1h and 2h: Par	+ \ /	

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

#### **PART X - FIN 48 FOOTNOTE**

NOTE 1 - FEDERAL INCOME TAX STATUS

THERE WERE NO UNCERTAIN TAX POSITIONS FOR WHICH THE FOUNDATION BELIEVES A LIABILITY SHOULD BE RECORDED AS OF AUGUST 31,2019 AND 2018.

### SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

DONATIONS	ТО	FUND	EVENTS.	\$ 95,512.
			TOTAL	\$ 95,512.

BAA Schedule D (Form 990) 2018

# SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S

DONATIONS TO FUND EVENTS..... 

BAA Schedule D (Form 990) 2018 TEEA3305L 10/10/18

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

Department of the Treasury Internal Revenue Service

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number TYLER JUNIOR COLLEGE FOUNDATION 75-6046816 **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No 1 2 3 5 6 7 9 10 Total. 0. 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.

Schedule G (Form 990 or 990-EZ) 2018 TYLER JUNIOR COLLEGE FOUNDATION 75-6046816 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. (d) Total events **(b)** Event #2 (c) Other events (a) Event #1 (add column (a) GOLF TOURN. LEGENDS OF TJC NONE through column (c) (event type) (event type) (total number) REVENUE **1** Gross receipts..... 147,807. 115,281. 263,088. 2 Less: Contributions..... 96,282 71,294. 167,576. **3** Gross income (line 1 minus line 2)..... 51,525. 43,987 95,512. 6 Rent/facility costs..... 7 Food and beverages ..... Other direct expenses..... 43,987. 51,525. 95,512. 10 Direct expense summary. Add lines 4 through 9 in column (d)..... 95,512. Net income summary. Subtract line 10 from line 3, column (d)..... Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add column (a) through column (c)) REVENUE (a) Bingo bingo/progressive bingo (c) Other gaming Gross revenue..... **2** Cash prizes..... D X P E N C T S Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No 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? **b** If 'No,' explain:

Yes

**b** If 'Yes,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

Sch	edule G (Form 990 or 990-EZ) 2018 TYLER JUNIOR COLLEGE FOUNDATION	75-6046	5816	Page <b>3</b>
	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 t administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility.	13a		%
ı	<b>b</b> An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and recor			
	Name ►			
	Address ►			
ı	a Does the organization have a contract with a third party from whom the organization receives gaming revenue if if 'Yes,' enter the amount of gaming revenue received by the organization   and of gaming revenue retained by the third party   for if 'Yes,' enter name and address of the third party:	nue? the amour	ш	No
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►	- – – – -		
	Gaming manager compensation ► \$			
	Description of services provided ►			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ı	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year ► \$	n the		
Pai	Supplemental Information. Provide the explanations required by Part I, line 2b, c and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.	olumns ( ny additi	(iii) and ( ional	v);

#### SCHEDULE I (Form 990)

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TYLER JUNIOR COLLEGE FOUNDATION

Employer identification number

						1:0 001001	
Part I General Information on G							
1 Does the organization maintain records the selection criteria used to award to	he grants or assistand	ce?			or assistance, and		X Yes No
2 Describe in Part IV the organization's pr	rocedures for monitorin	g the use of grant fu	ands in the United States.				
Part II Grants and Other Assista	nce to Domestic	<b>Organizations</b>	and Domestic Gove	ernments. Comple	ete if the organiza	ation answered 'Y	'es' on
Form 990, Part IV, line 21							
1 (a) Name and address of organization or government	<b>(b)</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) TYLER JUNIOR COLLEGE							
P. O. BOX 9020					REPLACEMENT		INSTITUTIONAL
TYLER, TX 75711			2,216,586.	385,242.	COST	DONATED GOODS	SUPPORT
(2)							
(3)							
<u>(4)</u>							
(5)							
<u>(5)</u>							
(6)							
<u></u>							
(7)							
·							
(8)							
2 Enter total number of section 501(c)(	(3) and government o	rganizations listed	in the line 1 table				0
3 Enter total number of other organizat	tions listed in the line	1 table					1

can be duplicated if additional sp		<b>Jais.</b> Complete ii tr	ie organization an	swered res on Form	990, Part IV, line 22. Part III
(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 ACADEMIC SCHOLARSHIPS	760	1,651,096.			
2					
3					
4					
5					

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

BAA Schedule I (Form 990) (2018)

## SCHEDULE M (Form 990)

Name of the organization

**Noncash Contributions** 

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service ► Go to www.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Types of Property  (a) Check if applicable contributions or items contributed on Form 990, Part VIII, line 1g  1 Art — Works of art. X 1 8,000. REPLACE C 2 Art — Historical treasures. S 1 800ks and publications. S Clothing and household goods X 853. REPLACE C 5 Cars and other vehicles X 1 23,000. COMPARABL 7 Boats and planes. S Intellectual property.	d) determining ibution amounts
Check if applicable contributions or items contributed Part VIII, line 1g  1 Art — Works of art.  2 Art — Historical treasures.  3 Art — Fractional interests.  4 Books and publications.  5 Clothing and household goods.  Check if applicable contribution or items contribution amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contributions amounts reported on Form 990, Part VIII, line 1g  Method of contribut	
2 Art — Historical treasures. 3 Art — Fractional interests. 4 Books and publications. 5 Clothing and household goods. 6 Cars and other vehicles. 7 Boats and planes.	OST
2 Art — Historical treasures	
4 Books and publications.  5 Clothing and household goods.  K 853. REPLACE C  6 Cars and other vehicles.  X 1 23,000. COMPARABL  7 Boats and planes.	
5 Clothing and household goods. X 853. REPLACE C 6 Cars and other vehicles. X 1 23,000. COMPARABL 7 Boats and planes.	
6 Cars and other vehicles X 1 23,000. COMPARABL 7 Boats and planes	
7 Boats and planes	OST
·	E SALES
8 Intellectual property	
9 Securities – Publicly traded	
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.         X         1         183,773.         APPRAISAL	1
18 Collectibles.	
19 Food inventory.         X         5         9,600. REPLACE C	OST
20 Drugs and medical supplies	
21 Taxidermy.	
22 Historical artifacts	
23 Scientific specimens	
24 Archeological artifacts	
25 Other► SEE PART II	
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	
	Yes No
20 Desire the constitution and in the constitution and an artist in Dest I time 1 through 00 that	
<b>30a</b> 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? <b>30a</b>	V
b If 'Yes,' describe the arrangement in Part II.	X
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Х
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell	
noncash contributions?	X
<ul><li>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.</li></ul>	

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

Schedule M (Form 990) 2018

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.

#### SCH M, PART I, LINES 25-28 OTHER NON-CASH CONTRIBUTIONS

DESCRIPTION	APPL?	NUMBER OF CONTR.	REVENUE ON FORM 990, PART VIII	METHOD OF DETER. REV.
AUTO PARTS EQUIPMENT GIFT CARDS AUTO PARTS PRINTING CART SPONSOR TENT SPONSOR EQUIP/SUPPLIES PRIZES	X X X X X X X X	1 1 1 1 1 1 4 41	25,000. 5,265. 1. 2,000. 3,500. 1,000.	COST REPLACE COST

#### **SCHEDULE M - ADDITIONAL INFORMATION**

NUMBER OF CONTRIBUTIONS REPORTED REFERS TO THE NUMBER OF DONATIONS OF A DISTINCT

TYPE GIVEN BY EACH INDIVIDUAL. MULTIPLE IDENTICAL GIFT CARDS GIVEN BY THE SAME DONOR

WERE COUNTED AS 1 CONTRIBUTION.

BAA TEEA4602L 10/22/18 Schedule M (Form 990) 2018

#### 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.

Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TYLER JUNIOR COLLEGE FOUNDATION

Employer identification number

75-6046816

#### FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS

DURING THE FISCAL YEAR, THE BOARD OF DIRECTORS APPROVED 5 RESOLUTIONS. ALL 5 RESOLUTIONS WERE SIGNED AND NOTARIZED ON 11 APRIL, 2019.

RESOLUTION 25 AUTHORIZES THE INVESTMENT COMMITTEE TO MAKE ALL DECISIONS RELATED TO INVESTMENTS, INVESTMENT MANAGERS, AND THE FOUNDATION'S INVESTMENT POLICY.

RESOLUTION 26 AUTHORIZES THE EXECUTIVE COMMITTEE TO MANAGE THE BUSINESS AND AFFAIRS OF THE FOUNDATION BETWEEN THE BOARD'S REGULAR SEMI-ANNUAL MEETINGS.

RESOLUTION 27 SETS THE FOUNDATION'S ENDOWMENT SPENDING RATE FOR THE ACADEMIC YEAR 2019-2020 AT 4.0% OF MARKET VALUE BASED ON A TWELVE QUARTER ROLLING AVERAGE BETWEEN 9/1/2015 AND 8/31/2018.

RESOLUTION 28 AUTHORIZES THE INVESTMENT COMMITTEE TO ALLOCATE UP TO \$1,000,000 IN ENDOWMENT EARNINGS IN EXCESS OF THE SPEND RATE TO SUPPORT TJC PROMISE SCHOLARSHIPS.

RESOLUTION 29 AUTHORIZES THE EXECUTIVE COMMITTEE TO SELECT AND ENTER A LOAN

AGREEMENT WITH A FINANCIAL INSTITUTION SPECIFICALLY AND ONLY FOR THE PURPOSE OF

UNDERWRITING PLEDGES OF NO MORE THAN \$7.5 MILLION TOWARD NEW CONSTRUCTION OF THE

ROGERS PALMER PERFORMING ARTS CENTER.

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE IRS FORM 990 IS REVIEWED BY THE CHIEF FINANCIAL OFFICER FOR THE FOUNDATION AND THE EXECUTIVE DIRECTOR OF THE FOUNDATION. THE PRESIDENT OF THE FOUNDATION AND THE EXECUTIVE COMMITTEE REVIEW THE FORM PRIOR TO SUBMISSION TO THE IRS. THE FORM 990 IS

Name of the organization

TYLER JUNIOR COLLEGE FOUNDATION

Employer identification number
75-6046816

#### FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE FOUNDATION MONITORS ENFORCEMENT OF THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS. ALL BOARD MEMBERS MUST SIGN A CONFLICT OF INTEREST STATEMENT DISCLOSING ANY POTENTIAL CONFLICTS OF INTEREST.

#### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

DOCUMENTS ARE AVAILABLE UPON REQUEST.

#### FORM 990, PART VII - COMPENSATION EXPLANATION

#### **MITCH ANDREWS**

COMPENSATION IS PROVIDED BY TYLER JUNIOR COLLEGE OF WHICH TYLER JUNIOR COLLEGE FOUNDATION IS A FUNCTIONALLY-INTEGRATED ORGANIZATION

#### SHELBY GOULD

COMPENSATION IS PROVIDED BY TYLER JUNIOR COLLEGE OF WHICH TYLER JUNIOR COLLEGE FOUNDATION IS A FUNCTIONALLY-INTEGRATED ORGANIZATION

#### **SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** 

► 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.

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

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TYLER JUNIOR COLLEGE FOUNDATION

Employer identification number 75-6046816

(a) Name, address, and EIN (if applicable) of disregarded e	entity	<b>(b)</b> Primary ac	ctivity	Legal dom or foreign	c) icile (state n country)	To	(d) otal income	End-c	(e) of-year assets	Direc	<b>(f)</b> ct contro entity	olling
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
Part II Identification of Related Tax-Exempt O had one or more related tax-exempt org	<b>rganizatio</b> janizations	ons. Complete s during the ta	if the org	janization	answered	d 'Yes	on Form 99	0, Par	t IV, line 34,	becau	se it	
(a) Name, address, and EIN of related organization	Prima	(b) ary activity	Legal dom or foreign	c) icile (state i country)	(d) Exempt Code section		(e) Public charity status (if section 501(c)(3))		s Direct controlling entity		controlled entity	
(1) TYLER_JUNIOR_COLLEGEPO_BOX_9020TYLER, TX_7571175-6002676	HIGHER	EDUCATION	Т	'X					N/A		Yes	No X
(2) TYLER JUNIOR COLLEGE PO BOX 9020 TYLER, TX 75711 75-6002676		EDUCATION		'X					N/A			X
<u>(3)</u>												
<u>(4)</u>												

Part III	<b>Identification of Related Organizations Taxable as a Partnership.</b> because it had one or more related organizations treated 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 par	thership during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	<b>(g)</b> Share of end-of-year assets	Dispr	h) ropor- nate ations?	amount in box 20 of Schedule K-1 (Form	Gene mana parti	ral or	<b>(k)</b> Percentage ownership
		country)		512-514)			Yes	No	1065)	Yes	No	
(1)												
(2)												
(3)												
	(5.1.1.2							l .				

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>(b)</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	Sec 512 controlled	) (b)(13) d entity?
		country)	entity	or trust)				Yes	No
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(2)									
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(3)									
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	1	1		1		1	1	1	<u> </u>

(5) TYLER JUNIOR COLLEGE

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

Yes No

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

During the tax year, and the organization engage in any of the following transactions with one or more related organizations lis	sted in Parts II-IV?									
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1 a		X					
<b>b</b> Gift, grant, or capital contribution to related organization(s)			1k	X						
c Gift, grant, or capital contribution from related organization(s).			10		X					
d Loans or loan guarantees to or for related organization(s)			10		X					
e Loans or loan guarantees by related organization(s)			1ε		Χ					
f Dividends from related organization(s)			1f		Х					
g Sale of assets to related organization(s)			1ç	X						
h Purchase of assets from related organization(s)			1ŀ		X					
i Exchange of assets with related organization(s)			1i		Х					
j Lease of facilities, equipment, or other assets to related organization(s)										
					X					
k Lease of facilities, equipment, or other assets from related organization(s)			11		Х					
I Performance of services or membership or fundraising solicitations for related organization(s).										
m Performance of services or membership or fundraising solicitations by related organization(s).										
m Performance of services or membership or fundraising solicitations by related organization(s)										
o Sharing of paid employees with related organization(s)										
5 . 5 . 6				X						
p Reimbursement paid to related organization(s) for expenses			1	,	Х					
q Reimbursement paid by related organization(s) for expenses.				_	X					
				•						
r Other transfer of cash or property to related organization(s)			11		Х					
s Other transfer of cash or property from related organization(s)				;	X					
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered	ed relationships and trans	saction thresholds.		<u></u>	<del></del>					
(a) Name of related organization	<b>(b)</b> Transaction	<b>(c)</b> Amount involved	Method o	(d)						
Name of related organization	type (a-s)	Amount involved		t deterr It involv						
	3/2 (2. 5)									
(1) TYLER JUNIOR COLLEGE	В	2,216,586.	CVCT							
1) IILER JUNIOR COLLEGE	О	2,210,300.	CASII							
(2) TYLER JUNIOR COLLEGE	G	183,773.	APPRAL	SAL						
(3) TYLER JUNIOR COLLEGE	N	146,290.	COST							
(4) TYLER JUNIOR COLLEGE	0	657,058.	COST							

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385,242.FMV

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, unre- lated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		Are all partners		Are all partners		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(1 01111 1 0 0 0 )	Yes	No	i I				
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	_																
(2)																	
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	_																
(2)																	
(3)	-																
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**BAA** TEEA5004L 06/07/18 Schedule **R** (Form 990) 2018

#### Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

#### **PART VII - SUPPLEMENTAL INFORMATION**

RELATED PARTY SERVICES PROVIDED:

TYLER JUNIOR COLLEGE PROVIDES SUBSTANTIALLY ALL ADMINISTRATIVE STAFF AND SUPPLIES TO THE FOUNDATION AT NO COST. COST TO TYLER JUNIOR COLLEGE FOR STAFF AND SUPPLIES WAS \$803,348. THIS IS REFLECTED IN PART V, LINES 1(N) AND 1(O)