Austin Community Foundation For
The Capital Area
P.O. Box 5159
Austin, TX 78763

Internal Revenue Service Center
Ogden, UT 84201-0027

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2002

Open to Public Inspection

A For the 2002 calendar year, or tax year beginning , and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Austin Community Foundation For The Capital Area

Number and street (or P.O. box if mail is not delivered to street address): P.O. Box 5159 — Room/suite:

City or town, state or country, and ZIP + 4: Austin TX 78763

D Employer ID number 74-1934031

E Telephone number 512-472-4483

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ▶

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter no. of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," att. a list. See instr.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

G Web site: ▶

J Organization type (check only one) ▶ ☒ 501(c) (3) ◄ (insert no.) ☐ 4947(a)(1) **or** ☐ **527**

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

I Enter 4-digit GEN ▶

M Check ▶ ☒ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 15,894,202

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	9,760,868		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	**Total** (add lines 1a through 1c) (cash $ 5,464,266 noncash $ 4,296,602)			1d	9,760,868
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	
	5	Dividends and interest from securities			5	1,088,710
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶ See Stmt 1)			7	351,133

		(A) Securities		(B) Other
8a	Gross amount from sales of assets other than inventory	4,693,491	8a	
b	Less: cost or other basis and sales expenses	3,867,612	8b	
c	Gain or (loss) (attach schedule)	825,879	8c	

Revenue	d	Net gain or (loss) (combine line 8c, columns (A) and (B)) See Stmt 2			8d	825,879
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including $ ____ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (att. sch.) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	12,026,590
Expenses	13	Program services (from line 44, column (B))			13	11,488,209
	14	Management and general (from line 44, column (C))			14	252,337
	15	Fundraising (from line 44, column (D))			15	58,664
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	11,799,210
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	227,380
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	53,066,977
	20	Other changes in net assets or fund balances (attach explanation) See Stmt 3			20	-6,071,100
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	47,223,257

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Part II **Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) Stmt 4 (cash $ 10190079 non-cash $)	22	10,190,079	10,190,079		
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24				
25 Compensation of officers, directors, etc.	25				
26 Other salaries and wages	26	293,820	190,983	73,455	29,382
27 Pension plan contributions	27				
28 Other employee benefits	28	7,420	4,823	1,855	742
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	3,271	981	1,963	327
34 Telephone	34	5,627	1,688	3,376	563
35 Postage and shipping	35	6,890	2,067	4,134	689
36 Occupancy	36	22,330	6,699	13,398	2,233
37 Equipment rental and maintenance	37	4,557	1,367	2,734	456
38 Printing and publications	38	29,499	8,850	17,699	2,950
39 Travel	39				
40 Conferences, conventions, and meetings	40	10,087	3,026	6,052	1,009
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	5,758	1,727	3,455	576
43 Other expenses not covered above (itemize): a	43a				
b See Statement 5	43b	1,219,872	1,075,919	124,216	19,737
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 - 43). **Organizations completing columns (B)-(D), carry these totals to lines 13-15**	44	11,799,210	11,488,209	252,337	58,664

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ Yes ☒ No

If "Yes," enter **(i)** the aggregate amount of these joint costs $; **(ii)** the amount allocated to Program services $;

(iii) the amount allocated to Management and general $; and **(iv)** the amount allocated to Fundraising $

Part III **Statement of Program Service Accomplishments** (See page 24 of the instructions.)

What is the organization's primary exempt purpose?

▶ See Statement 6

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

		Program Service Expenses (Required for 501(c)(3) & (4) orgs., & 4947(a)(1) trusts; but optional for others.)
a	See Statement 7 (Grants and allocations $ 10,190,079)	11,488,209
b	(Grants and allocations $)	
c	(Grants and allocations $)	
d	(Grants and allocations $)	
e	Other program services (attach schedule) (Grants and allocations $)	
f	**Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	11,488,209

Part IV Balance Sheets (See page 24 of the instructions.)

		Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.			(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing			-224,875	45	-32,687
	46	Savings and temporary cash investments				46	11,254,437
	47a	Accounts receivable	47a				
	b	Less: allowance for doubtful accounts	47b			47c	
	48a	Pledges receivable	48a				
	b	Less: allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule) See Worksheet	51a	531,933			
	b	Less: allowance for doubtful accounts	51b		180,173	51c	531,933
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges				53	
	54	Investments-securities See Stmt 8 ▶ ☐ Cost ☐ FMV			39,311,795	54	33,739,022
	55a	Investments-land, buildings, and equipment: basis	55a	2,596,381			
	b	Less: accumulated depreciation (attach schedule) See Stmt 9	55b		2,596,381	55c	2,596,381
	56	Investments-other (attach schedule) See Stmt 10			9,259,360	56	412,702
	57a	Land, buildings, and equipment: basis	57a	56,232			
	b	Less: accumulated depreciation (attach schedule) See Stmt 11	57b	43,127	22,418	57c	13,105
	58	Other assets (describe ▶ See Stmt 12)			2,384,496	58	1,172,864
	59	**Total assets** (add lines 45 through 58) (must equal line 74)			53,529,748	59	49,687,757
Liabilities	60	Accounts payable and accrued expenses			314,771	60	132,445
	61	Grants payable			148,000	61	60,000
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)				64b	
	65	Other liabilities (describe ▶ See Stmt 13)				65	2,272,055
	66	**Total liabilities** (add lines 60 through 65)			462,771	66	2,464,500
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted			22,734,393	67	20,147,724
	68	Temporarily restricted				68	
	69	Permanently restricted			30,332,584	69	27,075,533
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72; column (A) **must** equal line 19; column (B) **must** equal line 21)			53,066,977	73	47,223,257
	74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)			53,529,748	74	49,687,757

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions.)

a	Total revenue, gains, & other support per audited financial statements ▶	a	7,989,992
b	Amounts included on line **a** but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $ 9,860		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): See Stmt 14 $ -4,046,458		
	Add amounts on lines **(1)** through **(4)** ▶	b	-4,036,598
c	Line **a** minus line **b** ▶	c	12,026,590
d	Amounts included on line 12, Form 990 but not on line **a:**		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines **(1)** and **(2)** ▶	d	
e	Total revenue per line 12, Form 990 (line **c** plus line **d**) ▶	e	12,026,590

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	11,810,068
b	Amounts included on line **a** but not on line 17, Form 990:		
(1)	Donated services and use of facilities $ 9,860		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify): See Stmt 15 $ 998		
	Add amounts on lines **(1)** through **(4)** ▶	b	10,858
c	Line **a** minus line **b** ▶	c	11,799,210
d	Amounts included on line 17, Form 990 but not on line **a:**		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines **(1)** and **(2)** ▶	d	
e	Total expenses per line 17, Form 990 (line **c** plus line **d**) ▶	e	11,799,210

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 26 of the instructions.)

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(If not paid, enter -0-.)**	**(D)** Contrib. to employee benefit plans & deferred compensation	**(E)** Expense account and other allowances
See Statement 16				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ **Yes** ☒ **No**
If "Yes," attach schedule-see page 26 of the instructions.

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Part VI Other Information (See page 27 of the instructions.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78a	Did the organization have unrelated business gross inc. of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b	If "Yes," enter the name of the organization ▶ Charitable Holdings and check whether it is ☒ exempt **or** ☐ nonexempt.			
81a	Enter direct or indirect political expenditures. See line 81 instr. 81a			
b	Did the organization file **Form 1120-POL** for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 9,860			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations. **a** Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c			
d	Section 162(e) lobbying and political expenditures 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) orgs. Enter: **a** Initiation fees and capital contributions included on line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) orgs. Enter: **a** Gross income from members or shareholders 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0			

90a List the states with which a copy of this return is filed ▶ None

b Number of employees employed in the pay period that includes March 12, 2002 (See instructions.) 90b 5

91 The books are in care of ▶ Executive Director Telephone no. ▶ 512-472-4483

Located at ▶ P.O. Box 5159 Austin, TX ZIP + 4 ▶ 78763

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041-** Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

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Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by sec. 512, 513, or 514 (C) Exclusion code	Excluded by sec. 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	1,088,710	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income			15	351,133	
100 Gain or (loss) from sales of assets other than inventory			18	825,879	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		2,265,722	0

105 Total (add line 104, columns (B), (D), and (E)) ▶ 2,265,722

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
N/A	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here

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

▶ Signature of officer Date

▶ Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶ Date 11/12/03 Check if self-employed ▶ ☐ Preparer's SSN or PTIN (See Gen. Instr. W)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Gindler, Chappell, Morrison & Co., P.C. EIN ▶ 74-2532710

100 E. Anderson Lane, Ste. 250

Austin, TX 78752 Phone no. ▶ 512-833-9600

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2002

Name of the organization: Austin Community Foundation For The Capital Area

Employer identification number: 74-1934031

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben. plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over $50,000 ▶	0			

Part II **Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 2 of the instr. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $ 50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over $50,000 for professional services ▶ 0		

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶$ ________ **(Must equal amount on line 38,** Part VI-A, or line **i** of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of exp. if more than $1,000)? See Stmt 17	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? (See **Note** below.)	3	X	
4	Do you have a section 403(b) annuity plan for your employees?	4		X

Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments. See Stmt 18

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	11,558,384	20,252,356	15,711,851	3,740,385	51,262,976
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross inc. from int., dividends, amounts received from pymt. on securities loans (section 512(a)(5)), rents, royalties, & unrelated busn. taxable inc. (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975	1,815,989	2,057,158	3,520,014	1,895,223	9,288,384
19 Net income from unrelated business activities not included in line 18					
20 Tax revn. levied for the organization's ben. & either paid to it or expended on its behalf					
21 The value of serv. or facl. furnished to the org. by a governmental unit without charge. Do not incl. the value of serv. or fac. generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of cap. assets					
23 Total of lines 15 through 22	13,374,373	22,309,514	19,231,865	5,635,608	60,551,360
24 Line 23 minus line 17	13,374,373	22,309,514	19,231,865	5,635,608	60,551,360
25 Enter 1% of line 23	133,744	223,095	192,319	56,356	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 1,211,027

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c 60,551,360

d Add: Amounts from column (e) for lines: 18 9,288,384 19 ______ 22 ______ 26b ______ ▶ 26d 9,288,384

e Public support (line 26c minus line 26d total) ▶ 26e 51,262,976

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 84.6603 %

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year: N/A

(2001) ...... (2000) ...... (1999) ...... (1998) ......

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year: N/A

(2001) ...... (2000) ...... (1999) ...... (1998) ......

c Add: Amounts from column (e) for lines: 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add: Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

Check ▶ **a** ☐ if the organization belongs to an affiliated group. Check ▶ **b** ☐ if you checked **"a"** and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		**(a)** Affiliated group totals	**(b)** To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table-			
If the amount on line 40 is- / **The lobbying nontaxable amount is-**			
Not over $500,000 / 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 / $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 / $175,000 plus 10% of the excess over $1,000,000 ▶	41		
Over $1,500,000 but not over $17,000,000 / $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 / $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2002	**(b)** 2001	**(c)** 2000	**(d)** 1999	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instr.) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines **c** through **h.**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No. 1545-0047

2002

Name of organization
Austin Community Foundation For The Capital Area

Employer identification number
74-1934031

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule. (Note:** Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General Rule and a Special Rule-see instructions.)

General Rule-

[ ] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

[ ] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than $1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.) . . . . . . ▶ $ ____________

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization: Austin Community Foundation For

Employer identification number: 74-1934031

Part I **Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	See Statement 19	$	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Form 990/990-PF	Other Notes and Loans Receivable For calendar year 2002, or tax year beginning , and ending	2002

Name	Employer Identification Number
Austin Community Foundation For The Capital Area	74-1934031

Form 990, Part IV, Line 51a - Additional Information

	Name of borrower	Relationship to disqualified person
(1)	Creswell	None
(2)	Gilani	None
(3)	R. E. Schroeder	None
(4)	Rawson Saunder	
(5)	Horton	
(6)	Jerico Partners, Ltd.	
(7)		
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	63,530	10/31/95	10/27/25	$423/month	7.000
(2)	39,000	4/19/96	1/01/06	$1000/quarter	9.000
(3)	37,895	3/17/87	8/28/03	annual	
(4)	50,000	12/28/01	12/31/03	Monthly payments of $375	9.000
(5)	50,000	7/25/01			5.000
(6)	400,000	8/14/02	8/13/07	Prin & acc int in lump sum	6.000
(7)					
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)		
(2)		
(3)		
(4)		
(5)		
(6)	Security agreements	
(7)		
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)		52,727	50,257	
(2)		17,000	15,463	
(3)		10,446	7,213	
(4)		50,000	50,000	
(5)		50,000		
(6)			409,000	
(7)				
(8)				
(9)				
(10)				
Totals		180,173	531,933	

Federal Statements

Statement 1 - Form 990, Part I, Line 7 - Other Investment Income

Description	Amount
	$ 351,133
Total	$ 351,133

Federal Statements

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
Various Sales of Investments	Purchase				$4,693,491	$3,867,612	$	$ 825,879
Total					$4,693,491	$3,867,612	$ 0	$ 825,879

Federal Statements

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
Unrealized loss	$-4,046,762
Other changes in net assets	-39,198
Cumulative effect of change in acctng principle	-1,985,140
Total	$-6,071,100

Federal Statements

Statement 4 - Form 990, Part II, Line 22 - Grants, Allocations, and Contributions

Description	Cash Contribution	Noncash Contribution
See attached statement 20	$10,190,079	$
Total	$10,190,079	$ 0

Statement 5 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	$	$	$	$
Expenses				
Insurance	5,489	1,647	3,293	549
Life insurance	3,612	1,084	2,167	361
Program expense	1,012,847	1,012,847		
Miscellaneous expenses	39,373	11,811	23,626	3,936
Membership subscriptions	13,940	4,182	8,364	1,394
Committee expense	1,237	371	742	124
Public information	23,740	7,122	14,244	2,374
Severance taxes	13,350	4,005	8,010	1,335
Taxes	28,940	8,682	17,364	2,894
Professional Fees	9,644	3,858	5,786	
Custodial/Management Fees	55,486	16,646	33,291	5,549
Computer software and maint.	12,214	3,664	7,329	1,221
Total	$ 1,219,872	$ 1,075,919	$ 124,216	$ 19,737

Statement 6 - Form 990, Part III - Organization's Primary Exempt Purpose

The support of civic, scientific, literary, educational, health, and social service programs in Travis County and Central Texas.

Statement 7 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

The foundation distributes funds to support civic, scientific, literary, educational, health, and social service programs in Travis County and Central Texas. Over 400 programs were supported in 2002.

Federal Statements

Statement 8 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
US and State Government			
U.S government and agency obligation	8,063,863	8,300,511	
Corporate Stock			
Equity securities	27,156,319	22,106,277	
Corporate Bonds			
Fixed income securities	4,091,613	3,332,234	
	39,311,795	33,739,022	

Statement 9 - Form 990, Part IV, Line 55 - Investments in Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
Land				
	$ 2,596,381	$	$ 2,596,381	$
Total	$ 2,596,381	$ 0	$ 2,596,381	$ 0

Statement 10 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
Money market funds	$ 8,388,457	$	
Other	870,903	412,702	
Total	$ 9,259,360	$ 412,702	

Statement 11 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
Furniture and Equipment				
	$ 77,604	$ 55,186	$ 56,232	$ 43,127
Total	$ 77,604	$ 55,186	$ 56,232	$ 43,127

Federal Statements

Statement 12 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
CSV of donated life insurance	$ 767,834	$ 824,135
Accrued interest receivable	74,340	54,205
Other assets	7,906	5,723
Contributions receivable	1,490,813	288,801
Receivable- Stock sale proceeds	43,603	
Total	$ 2,384,496	$ 1,172,864

Statement 13 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Funds held for others	$	$ 235,204
Funds held for others- agency endowm		2,036,851
Total	$ 0	$ 2,272,055

Federal Statements

Statement 14 - Form 990, Part IV-A - Other Revenue Included in Financial Statements

Description	Amount
Unrealized losses on investments	$-4,046,762
Revenues reported on Charitable Holdings' Form 990	304
Total	$-4,046,458

Statement 15 - Form 990, Part IV-B - Other Expenses Included in Financial Statements

Description	Amount
Expenses reported on Charitable Holdings' Form 990	$ 998
Total	$ 998

Statement 16 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

Name	Comp	Benefits	Expenses	Title	Average Hours	Address	City, State, Zip
Richard Slaughter	95,725	0	0	Exec. Dir.	40+	P.O. Box 5159	Austin, TX 78763
Dorothy Drummer	0	0	0	President	As Needed	P.O. Box 5159	Austin, TX 78763
Bettye Nowlin	0	0	0	Pres. Elect	As Needed	P.O. Box 5159	Austin, TX 78763
Judy Osborn	0	0	0	Vice Pres.	As Needed	P.O. Box 5159	Austin, TX 78763
Sherry Smith	0	0	0	Secretary	As Needed	P.O. Box 5159	Austin, TX 78763
Jeff Kodosky	0	0	0	Treasurer	As Needed	P.O. Box 5159	Austin, TX 78763
Ed Adams	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Mike Cook	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Richard Donoghue	0	0	0	Board Member	Emeritus	P.O. Box 5159	Austin, TX 78763
Mary Margaret Farabee	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
James Flieller	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Bob Gerrie	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Steve Guengerich	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Mary Herman	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Jan Hughes	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
George Meriwether	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Nona Niland	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763
Lodis Rhodes	0	0	0	Board Member	As Needed	P.O. Box 5159	Austin, TX 78763

Federal Statements

Statement 16 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued)

Name	Title	Average Hours	Comp	Benefits	Expenses	Address	City, State, Zip
Steve Saunders	Board Member	As Needed	0	0	0	P.O. Box 5159	Austin, TX 78763
Gene Sherman	Board Member	As Needed	0	0	0	P.O. Box 5159	Austin, TX 78763
Kerry Tate	Board Member	As Needed	0	0	0	P.O. Box 5159	Austin, TX 78763
Gerry Tucker	Board Member	As Needed	0	0	0	P.O. Box 5159	Austin, TX 78763
Pete Winstead	Board Member	As Needed	0	0	0	P.O. Box 5159	Austin, TX 78763

Federal Statements

Form 990, Part VI, Question 80 - Relation to other organizations

Name of related organization(s)
Charitable Holdings

Federal Statements

Statement 17 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of Exp

See Form 990, Part V

Statement 18 - Schedule A, Part III, Line 4b - Explanation of Grant / Loan Qualifications

The Board of Directors shall investigate and analyze facts to determine the most effective means for meeting the needs of Travis County and Central Texas through the distribuition of funds given for the exempt purpose of the foundation.