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November 13, 2020

Alamo Colleges Foundation, Inc. 2222 North Alamo Street San Antonio, TX 78215

Attached is the "Public Disclosure Copy" of your 2019 Federal Return of Organization Exempt from Income Tax.

Under IRS Regulations, a tax exempt organization must:

- -- Make its annual information returns (but not the list of contributor names, addresses, and donation amounts) and its application for recognition of exemption available for public inspection at its offices (or at a reasonable location of your choice if you don't have an office).
- Make each annual information return available for a period of 3 years beginning on the date the return was required to be filed or is actually filed, whichever is later.
- Provide a copy without charge, other than a reasonable fee for reproduction and actual postage costs, of all or any part of any return or application required to be made available for public inspection to any individual who makes a request for such copy in person or in writing.
- If you have questions about "public disclosures," contact our office for a copy of the regulations.



Return of Organization Exempt From Income Tax

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



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

AF	or th	e 2019 calendar year, or tax year beginning and	ending								
B c a	heck if pplicab	le: C Name of organization		D Employer identifie	cation number						
	Addre										
	Name	Doing business as	74-24225	89							
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number							
	Final return			210-485-							
	termii ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,030,117.						
	Amen	SAN ANTONIO, IX 78215		H(a) Is this a group re							
	Applie diag	F Name and address of principal officer: STILLIA MARLOW DOL		for subordinates	? Yes X No						
	pendi	ZZZZ N. ALAMO STREET, SAN ANTONIO, TX	78215	H(b) Are all subordinates in	cluded? Yes No						
		empt status: 🚺 501(c)(3) 🚺 501(c) ()◀ (insert no.) 🗌 4947(a)(1) d	or 📃 527	If "No," attach a	list. (see instructions)						
_		te: WWW.ALAMO.EDU/FOUNDATION		H(c) Group exemptio							
		f organization: 🚺 Corporation 🔄 Trust 🔄 Association 📄 Other 🕨	L Year	of formation: 1984	I State of legal domicile: ${f T}{f X}$						
Pa	rt I	Summary									
đ	1	Briefly describe the organization's mission or most significant activities: TO DI									
ů Ľ		STRENGTHEN THE DISTRICTS CAPACITY TO EMPO	WER FO	DR SUCCESS T	HE DIVERSE						
Governance	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass							
ove	3	Number of voting members of the governing body (Part VI, line 1a)			13						
Ō	4	Number of independent voting members of the governing body (Part VI, line 1b)		13							
es 6	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		0							
vitie	6	Total number of volunteers (estimate if necessary)		6	15						
Activities &	7a	Total unrelated business revenue from Part VIII, column (C), line 12			0.						
_	b	Net unrelated business taxable income from Form 990-T, line 39		7b	0.						
				Prior Year	Current Year						
Ð	8	Contributions and grants (Part VIII, line 1h)		3,340,311.	3,162,988.						
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.						
sev.	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		471,874.	912,804.						
Ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,812,185.	4,075,792.						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,779,499.	2,559,854.						
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.						
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.						
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
xpe		Total fundraising expenses (Part IX, column (D), line 25)	0.								
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		139,916.	133,624.						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,919,415.	2,693,478.						
	19	Revenue less expenses. Subtract line 18 from line 12		892,770.	1,382,314.						
s or			Be	ginning of Current Year	End of Year						
Assets d Balanc	20	Total assets (Part X, line 16)		25,886,207.	30,829,192.						
t As	21	Total liabilities (Part X, line 26)		0.	0.						
ING		Net assets or fund balances. Subtract line 21 from line 20		25,886,207.	30,829,192.						
Pa	irt II	Signature Block									

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

Sign		Signature of	officer					Date			
Here		SHEILA	MARLOW	DUE, EXE	ECUTIVE DI	RECTOR					
		Type or print	name and title								
	Print	t/Type prepare	r's name		Preparer's signat	ure	Date	Check	PTIN		
Paid	JEI	NIFER	SIEMER		JENNIFER	SIEMER	11/11	/20 self-employed	P01263648		
Preparer			CLIFTONL					Firm's EIN ▶ 41	-0746749		
Use Only	Firm	's address 🕨	9901 IH-	10 WEST	STE 350						
		•	SAN ANTO	NIO, TX	78230			Phone no. (210) 298-7900		
May the IF	RS dis	scuss this re	turn with the pre	parer shown ab	ove? (see instruct	ions)			X Yes No		
932001 01-2	B32001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019)										

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2019) ALAMO COLLEGES FOUNDATION, INC. 74-2422589 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	PROVIDE POST-SECONDARY EDUCATION SHCOLARSHIPS AND OTHER EDUCATIONAL
	SUPPORT TO AND FOR STUDENTS IN THE ALAMO COLLEGES.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,116,642. including grants of \$ 2,116,642.) (Revenue \$)
	GRANTS AND ALLOCATIONS TO STUDENTS IN THE ALAMO COLLEGES FOR
	SCHOLARSHIPS AND EDUCATIONAL SUPPORT.
4b	(Code:) (Expenses \$443,212. including grants of \$443,212.) (Revenue \$)
	GRANTS AND ALLOCATIONS TO THE ALAMO COLLEGES TO MAINTAIN, DEVELOP,
	INCREASE AND EXTEND FACILITIES & SERVICES.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
Ηu	
4	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 2,559,854.
4e	Total program service expenses ► 2,559,854. Form 990 (2019)
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Form	990	(2019)

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		v
6	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			- 21
0	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	-		
5	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 donor-restricted endowments			
	or in 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, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
a	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			
		14b		х
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			~~
10	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	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		X
20a	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	
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			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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
04-	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	040		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year to defease	240		
U	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.10		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
~~	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
31	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	31		- 23
52		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
0.	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 15			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1-	X	
032004	(gambling) winnings to prize winners?	Eorm		l (2019)
552004		1 0111		(2013)

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Form 990				FOUNDATION,		
Part V	Statements	Regarding	Other IRS Fili	ngs and Tax Comp	pliance	(continued)

					Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a	C					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)						
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?							
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O							
4a	a 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 a	accour	t)?	4a		X		
b	If "Yes," enter the name of the foreign country		. (55.15)					
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					v		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b		X X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction file "Yes" to line 5a or 5b, did the organization file Form 8886-T?			50 50				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th			50				
0a				6a		x		
b	any contributions that were not tax deductible as charitable contributions?							
~	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	provided to the payor?	7a		Х		
b				7b				
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired					
	to file Form 8282?			7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontrac	t?	7e		X X		
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g								
h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by th	e					
~				8				
9	Sponsoring organizations maintaining donor advised funds.			0.				
a b				9a 9b				
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:			90				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	1				
11	Section 501(c)(12) organizations. Enter:			1				
а		11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		4				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	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.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	1					
	organization is licensed to issue qualified health plans	13b		-				
	Enter the amount of reserves on hand	13c	l	44-		X		
				14a				
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedu</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			14b				
15	excess parachute payment(s) during the year?			15		x		
	If "Yes," see instructions and file Form 4720, Schedule N.			15				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t inco	ne?	16		х		
	If "Yes," complete Form 4720, Schedule O.							

Form **990** (2019)

932005 01-20-20

Form 990 (2	2019)
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ALAMO COLLEGES FOUNDATION, INC.

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

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X

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 on Schedule O. See instructions.

Sec	tion A. Governing Body and Management					
			13		Yes	No
па	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		-		
	If there are material differences in voting rights among members of the governing body, or if the governing					
h	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent	1b	13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		1	1		
2				2		x
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the			<u> </u>		- 23
5				3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched a	at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\hfill \hfill \h$			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	, -				
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva	al by in	dependent			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45.		x
	The organization's CEO, Executive Director, or top management official			15a		X
a	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			15b		
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	mont w	vith a			
iud				16a		x
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			100		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-				
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure			1.010		
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, a	nd 990)-T (Section 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			.,		
	X Own website Another's website X Upon request Other (explain	n on S	chedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	d finano	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks an	d records			
	SHEILA MARLOW DUE - 210-485-0044					
	2222 N. ALAMO STREET, SAN ANTONIO, TX 78215					
932006	01-20-20			Form	9 90	(2019)
	6					

Form **990** (2019) 2019.05000 ALAMO COLLEGES FOUNDATION 058-0202

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, 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.

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

Employees, and Independent Contractors

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

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

(A)	(B)	(C)		(C)			(D)	(E)	(F)	
Name and title	Average	rage Position (do not check more than one						Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an		compensation	compensation	amount of			
	week		cer an I	id a d	irecto	or/trus T	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC)		organization and related
	below	lual tr	tional		nploy	st con	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) MICHAEL BELDON	2.00									
CHAIRMAN - EMERITUS		Х						0.	0.	0.
(2) ANTHONY WHITE	2.00									
CHAIRMAN		Х		Х				0.	0.	0.
(3) PAMELA BAIN	2.00									
VICE - CHAIRMAN		Х		Х				0.	0.	0.
(4) ROBERT ZEIGLER	2.00									
TREASURER		Х		Х				0.	0.	0.
(5) PAULA MCGEE	2.00									
SECRETARY		Х		Х				0.	0.	0.
(6) MICHAEL BARRY	2.00									
DIRECTOR		Х						0.	0.	0.
(7) CHRIS CORSO	2.00									
DIRECTOR		Х						0.	0.	0.
(8) JANIE GONZALEZ	2.00									
DIRECTOR		Х						0.	0.	0.
(9) HALL HAMMOND	2.00									
DIRECTOR		Х						0.	0.	0.
(10) KEN APPLEGATE	2.00									
DIRECTOR		Х						0.	0.	0.
(11) YVONEE KATZ	2.00									
DIRECTOR		Х						0.	0.	0.
(12) PHILIP LEININGER	2.00								0	0
DIRECTOR	2 00	Х					<u> </u>	0.	0.	0.
(13) DAVID JOHNSON DIRECTOR	2.00	v						0	0	0
(14) MARTHA TIJERINA	2.00	Х						0.	0.	0.
DIRECTOR	2.00	x						0.	0.	0.
(15) CHARLES WENDER	2.00	^						0.	0.	0.
DIRECTOR	2.00	x						0.	0.	0.
								0.	0.	U •
932007 01-20-20				_	-					Form 990 (2019)

Form 990 (2019)

ALAMO COLLEGES FOUNDATION, INC.

74-2422589 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Page 7

Form 990 (2019) ALAMO CO						-			74-24	1225	589	Pa	age 8
Part VII Section A. Officers, Directors, Trus	stees, Key Emp (B)	oloye	ees,			ghes	t C		, ,			(Г)	
(A) Name and title	Average hours per week	box,	not c , unles	C Posi heck r ss per nd a di	ition more rson is	than o s both	n an	(D) Reportable compensation from	(E) Reportable compensatio from related		an	(F) timate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	ƙey em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS	I	fr org and	pensa om the anizati d relate anizatio	e ion ed
		-	_		<u>×</u>								
										-+			
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Part V								0.		0.			0.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but r compensation from the organization 							o re	-	000 of reportable				0
												Yes	No
3 Did the organization list any former officer			-	•	-		Ŭ		-		3		Х
line 1a? If "Yes," complete Schedule J for sFor any individual listed on line 1a, is the s										···	3		
and related organizations greater than \$15											4		Х
5 Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," cor					-			-			5		Х
Section B. Independent Contractors													
Complete this table for your five highest co the organization. Report compensation for	-									ensati	ion fro	m	
(A) Name and business			ONE					(B) Description of s		C	(C ompei	;) nsatioi	n
2 Total number of independent contractors (including but no	ot lin	nitec	d to t	thos	e lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organ	zation 🕨				0)						000	

932008 01-20-20

Form **990** (2019)

		(2019) ALAMO COLLEGES FOU	NDATION,	INC.		74-2422	589 Page 9
Pa	rt VI	I Statement of Revenue					
		Check if Schedule O contains a response or note to	any line in this Pa	art VIII			
					(B)	(C) Unrelated	(D) Revenue excluded
			Total re	evenue	Related or exempt function revenue	business revenue	from tax under
							sections 512 - 514
s S	1 :	Federated campaigns 1a 100	,073.				
ant	k		<u> </u>				
S D							
Łs,	c		,995.				
ilar İlar	C		.,				
ns,	e	3 (1 1 1					
er S	f	All other contributions, gifts, grants, and					
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included above 1f 2,757	,920.				
dt	ç	Noncash contributions included in lines 1a-1f					
ရ ပိ	ŀ	Total. Add lines 1a 1f	🕨 3,1	62,988.			
		Business	s Code				
ø	2 a	·					
vic	k						
Ser							
E N							
Be	6						
Program Service Revenue		All other program service revenue					
_							
	3						
	3	Investment income (including dividends, interest, and	7	31,585.			731 595
		other similar amounts)		51,505.			731,585.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
		(i) Real (ii) Pers	sonal				
	6 a						
	k	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	c	Net rental income or (loss)	🕨				
	7 a	Gross amount from sales of (i) Securities (ii) Ot	ther				
		assets other than inventory 7a 4,135,544.					
	ŀ	Less: cost or other basis					
٥		and sales expenses 7b 3,954,325.					
evenue		Gain or (loss)					
			1	81,219.			181,219.
Other Ro		Net gain or (loss)		01,215.			101,219.
the	86	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
	k						
	c		🕨				
	9 a	Gross income from gaming activities. See					
		Part IV, line 19					
	k	Less: direct expenses 9b					
	c		▶				
	10 a	Gross sales of inventory, less returns					
		and allowances10a					
	F	Less: cost of goods sold					
		Net income or (loss) from sales of inventory					
		Business					
sn	11 a						
ue Ue	11 č						
scellaneo <u>Revenue</u>	k						
Miscellaneous Revenue	c						
Mis		All other revenue					
		Total. Add lines 11a-11d		RE 800	-		010.001
	12	Total revenue. See instructions	🕨 4,0	75,792.	0.	0.	912,804.
93200	9 01-2)-20					Form 990 (2019

932009 01-20-20

 Form 990 (2019)
 ALAMO
 COLLEGES
 FOUNDATION,
 INC.

 Part IX
 Statement of Functional Expenses

74-2422589 Page 10

0 = -1 =	a construction of the second second	ata all a aliviana All atlanis au	ganizations must complete column (A)
Section SULICIUS and SULICIU	i organizations must compl	ete all collimns. All other or	danizations must complete collimn (A)
	organizationio maot oompr		gamzatione maet complete column () (

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX		
Dor	not include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	443,212.	443,212.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	2,116,642.	2,116,642.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
0					
9	section 401(k) and 403(b) employer contributions)				
	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
	Management				
		10,000.		10,000.	
	Accounting	10,000.		10,000.	
	Lobbying				
-	Professional fundraising services. See Part IV, line 17	100 000		120 200	
f	Investment management fees	120,208.		120,208.	
g					
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	2 41 6		2 41 6	
13	Office expenses	3,416.		3,416.	
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				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а					
b					
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,693,478.	2,559,854.	133,624.	0.
26	Joint costs. Complete this line only if the organization				
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Fight and for the second s				

05091112 131839 058-020810-01

Form 990 (2019)	ALAMO	COLLEGES	FOUNDATION,	INC.
Part X	Balance Sheet	:			

		Check if Schedule O contains a response or note	e to an	v line in this Part X			
				,	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,765,842.	1	888,343.
	2	Savings and temporary cash investments				2	910,121.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	2,972.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial o	contributor, or 35%			
		controlled entity or family member of any of thes	e pers	ons		5	
	6	Loans and other receivables from other disqualif	ied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
As	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b			10c	
	11	Investments - publicly traded securities			24,120,365.	11	29,027,756.
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			25,886,207.	16	30,829,192.
	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete F				21	
Ś	22	Loans and other payables to any current or form	er offic	cer, director,			
Liabilities		trustee, key employee, creator or founder, substa	antial o	contributor, or 35%			
abil		controlled entity or family member of any of thes	e pers	ons		22	
Ë	23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	l third	parties		24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24). Complete Part X			
		of Schedule D				25	
	26				0.	26	0.
		Organizations that follow FASB ASC 958, che					
ces		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			97,417.	27	239,647. 30,589,545.
Ba	28	Net assets with donor restrictions			25,788,790.	28	30,589,545.
pu		Organizations that do not follow FASB ASC 95	58, ch	eck here 🕨 📃			
Ľ.		and complete lines 29 through 33.					
s O	29	Capital stock or trust principal, or current funds				29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or eq				30	
As	31	Retained earnings, endowment, accumulated inc	come,	or other funds		31	
Net	32	Total net assets or fund balances			25,886,207.	32	30,829,192.
	33	Total liabilities and net assets/fund balances			25,886,207.	33	30,829,192.
_							Form 990 (2019)

	1990 (2019) ALAMO COLLEGES FOUNDATION, INC.	74-24	422589	Pag	_{je} 12
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	4,075		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,693	· ·	
3	Revenue less expenses. Subtract line 2 from line 1	3	1,382	· ·	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	25,886	· ·	
5	Net unrealized gains (losses) on investments	5	3,560	,6	/1.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	30,829	,19	<u> 12.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Cash Corual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	_	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			Form	agn //	2010)

Form **990** (2019)

932012 01-20-20

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(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

ch to Form 990 or Form 990-F7 Att.

	OMB No. 1545-0047
	2019
	Open to Public Inspection
over	identification number

	epartment of the Treasury ernal Revenue Service				Attach to Form 990 or Form 990-EZ. irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection	
Nan	ne of t	the organizati	on						Employer	identification num	ber
			ALAM	O COLLEGES	FOUNDATION,	INC.			7	4-2422589	
Pa	rt I	Reason			All organizations must co		is part.) Se	e instruction			
The	organ	ization is not a	a private found	ation because it is: (For lines 1 through 12, c	heck only	one box.)				
1					n of churches described			I)(A)(i).			
2	H				Attach Schedule E (Forn						
3	\square				anization described in so			i)			
3	\square	•	•		njunction with a hospital			•	VIII) Entor	the beenital's name	
4			-	ation operated in col	ijunction with a nospital	uescribeu	in Sectio			the nospital s hame,	
_	city, and state:										
5					lege of university owned	i or operati	eu by a gu	veninentaiu	THE DESCRIDE		
-				Complete Part II.)				<i>,</i> ,			
6				-	nental unit described in						
7	X				ntial part of its support fi	rom a gove	ernmental	unit or from t	ne general p	oublic described in	
				omplete Part II.)							
8					(1)(A)(vi). (Complete Par						
9		An agricultur	al research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	eor	
		university:									
10		An organizati	on that norma	Ily receives: (1) more	than 33 1/3% of its supp	port from o	contributio	ns, members	hip fees, an	d gross receipts fror	n
		activities rela	ted to its exen	npt functions - subjec	ct to certain exceptions,	and (2) no	more thar	n 33 1/3% of i	ts support f	from gross investme	nt
		income and ι	unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the or	ganization a	after June 30, 1975.	
		See section	509(a)(2). (Co	mplete Part III.)							
11		An organizati	on organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).			
12		An organizati	on organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or	
		more publicly	supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section	509(a)(3). (Check the box in	
		lines 12a thro	ough 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	l 12g.		
а		Type I. A s	upporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving	
		the suppor	ted organizatio	on(s) the power to reg	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	upporting	
		organizatio	n. You must c	complete Part IV, Se	ections A and B.						
b		-			or controlled in connect	tion with its	s supporte	ed organizatio	n(s), by hav	ving	
				-	anization vested in the sa			-		-	
			-	t complete Part IV,					5		
с		-			g organization operated	in connect	tion with. a	and functiona	llv integrate	ed with.	
			-). You must complete I					,	
d		7			porting organization oper				rted organiz	zation(s)	
-			-		ation generally must sat				-		
			-		nplete Part IV, Sections	•		-			
е		- ·		,	written determination fro				II. Type III		
Ŭ			•		nally integrated supporti			турст, турс	n, rype m		
f	Ente		of supported of		nany integrated capperti						
				about the supporte							
9		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of othe	r
		organizatior	ı		(described on lines 1-10	Yes	No	support (see i	nstructions)	support (see instructio	ns)
					above (see instructions))						
				1	1	1	1	1		1	

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019 13

Schedule A (Form 990 or 990-EZ) 2019 ALAMO COLLEGES FOUNDATION, INC. 74-2422 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

74-2422589 Page 2

(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	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	2689635.	6821166.	2955681.	3340311.	3162988.	18969781.				
2	Tax revenues levied for the organ-										
	ization'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	2689635.	6821166.	2955681.	3340311.	3162988.	18969781.				
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)						3377887.				
	Public support. Subtract line 5 from line 4.						15591894.				
Sec	ction B. Total Support	1		1	1	1					
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total				
	Amounts from line 4	2689635.	6821166.	2955681.	3340311.	3162988.	18969781.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,				454 006						
	and income from similar sources \dots	233,410.	326,357.	370,630.	471,806.	731,585.	2133788.				
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						21103569.				
	Gross receipts from related activities,		,			12					
13	First five years. If the Form 990 is for	-			•						
800	organization, check this box and stor ction C. Computation of Publi	o here									
	•		•	. (2)			72 00				
	Public support percentage for 2019 (I		•			14	73.88 % 76.49 %				
	Public support percentage from 2018					15					
16a	33 1/3% support test - 2019. If the o						N V				
	stop here. The organization qualifies		-		line of F in 0.0 d /00/						
Ø	33 1/3% support test - 2018. If the c										
47.	and stop here. The organization qual										
1/a	10% -facts-and-circumstances test	-									
	and if the organization meets the "fac			-	-	-					
,	meets the "facts-and-circumstances"	-									
b	10% -facts-and-circumstances test	-									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization										
10											
10	Private foundation. If the organization	T UIU HOL CHECK A		a, 100, 17a, 0f 170			or 990-EZ) 2019				
					JUIE		, or oou-Lej 2013				

Schedule A (Form 990 or 990-EZ) 2019 ALAMO COLLEGES FOUNDATION, INC. 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								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-								
	iness under section 513								
4	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5								
7a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
с	Add lines 7a and 7b								
	Public support. (Subtract line 7c from line 6.)								
Sec	tion B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
9	Amounts from line 6								
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								
b	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
с	Add lines 10a and 10b								
	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								
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)								
	First five years. If the Form 990 is fo	r the organization's	s first, second. thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) ora	anization,		
		0					· · · · · · · · · · · · · · · · · · ·		
Sec	tion C. Computation of Publi								
15	Public support percentage for 2019 (I	ine 8, column (f), c	livided by line 13,	column (f))		15	%		
16	Public support percentage from 2018	Schedule A, Part	III, line 15			16	%		
	tion D. Computation of Inves								
17	Investment income percentage for 20)19 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%		
	Investment income percentage from		'			18	%		
19a	33 1/3% support tests - 2019. If the	organization did r					ne 17 is not		
	more than 33 1/3%, check this box a								
b	33 1/3% support tests - 2018. If the						3%, and		
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
20	Private foundation. If the organization								
-	3 09-25-19		,				n 990 or 990-EZ) 2019		
			1 5			•			

Schedule A (Form 990 or 990-EZ) 2019 ALAMO COLLEGES FOUNDATION, INC.

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

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

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

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Schedule A (Form 990 or 990-EZ) 2019

05091112 131839 058-020810-01

Schedule A (Form 990 or 990-EZ) 2019 ALAMO COLLEGES FOUNDATION, INC. Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		103	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
u	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	TIC		
000	tion B. Type Toupporting Organizations		Vee	Na
	Did the divertees twetters as many bracking of and an annual supervised and size times have the neuron to		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	-		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion 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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.	000015	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
h	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Za		
b				
	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	0L		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u></u>		
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	~		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2019

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	dule A (Form 990 or 990-EZ) 2019 ALAMO COLLEGES FOUNDATIC			74-2422589 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	j Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 (explain i	in Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must cor	nplete S	ections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	/ integra	ted Type III supporting o	rganization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 ALAMO COLLEGES FOUNDATION, INC.

	t V Type III Non-Functionally Integrated 509(nizations (continued)	
Sect	ion D - Distributions		(***********	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
C	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

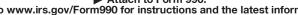
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Schedule A	(Form 990 or 990-EZ) 2019 ALAMO	COLLEGES	FOUNDATION,	, INC.	74-2422589	Page 8
Part VI	Supplemental Information. F Part IV, Section A, lines 1, 2, 3b, 3c, 4 line 1; Part IV, Section D, lines 2 and 3 Section D, lines 5, 6, and 8; and Part	Provide the explana Ib, 4c, 5a, 6, 9a, 9b 3; Part IV, Section E	tions required by Part , 9c, 11a, 11b, and 11 E, lines 1c, 2a, 2b, 3a,	II, line 10; Part II, line c; Part IV, Section B and 3b; Part V, line	e 17a or 17b; Part III, line 12; , lines 1 and 2; Part IV, Section (1; Part V, Section B, line 1e; Part	С,
	(See instructions.)		· · ·			
932028 09-25-1	9		20	5	Schedule A (Form 990 or 990-E	Z) 2019
			2 V			

SCHEDULE D)
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Department of the Treasury Internal Revenue Service

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





Name of the organization

ALAMO COLLEGES FOUNDATION, INC.

Employer identification number 74-2422589

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	s or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed fund	s
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used or	nly
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose	e conferri	ng
D				
Par			, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recrea	<i>,</i>		rically important land area
	Protection of natural habitat	Preservation of	of a certif	ied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ried conservation contribution in the form	1 of a cor	
-	day of the tax year.			Held at the End of the Tax Year
-	Total number of conservation easements			2a
b c	Total acreage restricted by conservation easements Number of conservation easements on a certified historic stru	ucture included in (a)		2b 2c
d	Number of conservation easements included in (c) acquired a			
u	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele			
•	year	casca, extinguished, er terrindise by in	o organiz	
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per		-	
	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
	▶			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation eas	ements during the year
	▶\$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170)(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial statem	nents tha	t describes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or O	thor Si	imilar Assats
T ai	Complete if the organization answered "Yes" on Form			Assets.
10	If the organization elected, as permitted under FASB ASC 95		and hala	nco shoot works
Ia	of art, historical treasures, or other similar assets held for pub			
	service, provide in Part XIII the text of the footnote to its finar			
b	If the organization elected, as permitted under FASB ASC 95			sheet works of
~	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			► \$
				\$
2	If the organization received or held works of art, historical trea			provide
	the following amounts required to be reported under FASB A		U /1	
а	Revenue included on Form 990, Part VIII, line 1	•		▶ \$
b	Assets included in Form 990, Part X			► \$
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2019
932051	10-02-19			

Sche		OLLEGES FOU				74-24			age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	r Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make s	significant u	ise of its	·	,	
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	e	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	mpt purpos	se in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations o	f art, historical treas	sures, or other simila	r assets		_		_
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered "Yes" or	n Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par								
1 a	Is the organization an agent, trustee, custodia						-		-
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:						
							Amount		
	Beginning balance								
	Additions during the year								
е	Distributions during the year								
t	Ending balance				1 f				1
	Did the organization include an amount on Fo				• • • • • • • • • •	L	Yes		_ No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete in					<u></u>			
I ui						aara baak	(a) [aur		haali
10	Paginning of year balance	(a) Current year 18,296,736.	(b) Prior year 17,352,581.	(c) Two years back 16,459,361.	(d) Three y	05,433.		373,	
	Beginning of year balance	629,273.	944,155.	893,220.		53,928.		431,	
b	Contributions		511,100.		2,0			101,	020.
c d	Net investment earnings, gains, and losses Grants or scholarships								
u	Other expenditures for facilities								
e									
f	Administrative expenses								
י מ	End of year balance	18 926 009.	18,296,736.	17,352,581.	16 4	59,361.	13	805,	433.
2	Provide the estimated percentage of the curr			•		,		/	
- a	Board designated or guasi-endowment	one your one balance	%						
b	Permanent endowment 100.00	%	_/0						
		/°							
•	The percentages on lines 2a, 2b, and 2c shou								
3a	Are there endowment funds not in the posses	· · · · ·	ion that are held ar	nd administered for t	he organiza	ation			
	by:	5			5		Γ	Yes	No
	(i) Unrelated organizations						3a(i)		Х
	(ii) Related organizations						3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	d on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the	organization's endov							
Par	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part X	, line 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other (c) A	Accumulate	d	(d) Book	value	е
		basis (investm	ent) basis	(other) de	epreciation				
1a	Land								
b	Buildings								
с	Leasehold improvements								
	Equipment								
e	Other								
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	(, column (B), line 10	0c.)					0.
					:	Schedule	D (Form	990)	2019

Complete if the organization answered "Yes			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►			
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes' (a (1) (2) (3) (4) (5)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes' (a (1) (2) (3) (4) (5) (6) (7)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8)		11d. See Form 990, Part X, line 15.	(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colymn (b) must equal Form 990, Part X, col. (B) lin) Description		(b) Book value
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin) Description		
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes' (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes') Description		
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability) Description		25.
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes) Description		25.
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2)) Description		25.
(8) (9) Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3)) Description		25.
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (4)) Description		25.
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes' (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes' 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)) Description		25.
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes' (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes' 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)) Description		25.
(8) (9) Fart IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)) Description		25.
(8) (9) Fortal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)) Description		25.
(8) (9) Fart IX Other Assets. Complete if the organization answered "Yes" (a (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)) Description		25.

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII 🗓

Schedule D (Form 990) 2019

932053 10-02-19

05091112 131839 058-020810-01

Schedule D (Form 990) 2019 ALAMO COLLEGES FOUNDATION, INC. Part VII Investments - Other Securities.

74-2422589 Page 3

	edule D (Form 990) 2019 ALAMO COLLEGES FOUNDATION,				2422589 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts Wit	h Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total revenue, gains, and other support per audited financial statements			1	10,198,787.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	3,560,671.		
b	Donated services and use of facilities	2b	960,693.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	1,721,839.		
е	Add lines 2a through 2d			2e	6,243,203.
3	Subtract line 2e from line 1			3	3,955,584.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	120,208.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	120,208.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part 1 line 12)			5	4,075,792.
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)	ents Wi			4,075,792. n.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part 1 line 12)	ents Wi			n.
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)	ents Wi	th Expenses per F		4,075,792. n. 3,645,167.
5 Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents Wi	th Expenses per F	letur	n.
5 Pa 1	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	ents Wi	th Expenses per F	letur	n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents Wi	th Expenses per F	letur	n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ents Wi	th Expenses per F 960,693.	letur	n.
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents Wi	th Expenses per F	letur	n. 3,645,167.
5 Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents Wi 2a 2b 2c 2d	th Expenses per F 960,693. 111,204.	letur	n. 3,645,167. 1,071,897.
5 Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	ents Wi 2a 2b 2c 2d	th Expenses per F 960,693. 111,204.	letur	n. 3,645,167.
5 Pa 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	ents Wi 2a 2b 2c 2d	th Expenses per F 960,693. 111,204.	1 2e	n. 3,645,167. 1,071,897.
5 Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Subtract line 2e from line 1	ents Wi 2a 2b 2c 2d	th Expenses per F 960,693. 111,204.	1 2e	n. 3,645,167. 1,071,897.
5 Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) T XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part IX, line 7b	ents Wi 2a 2b 2c 2d	th Expenses per F 960,693. 111,204.	1 2e	n. 3,645,167. 1,071,897. 2,573,270.
5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) T XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	ents Wi 2a 2b 2c 2d 2d	th Expenses per F 960,693. 111,204. 120,208.	letur 1 2e 3	n. <u>3,645,167.</u> <u>1,071,897.</u> <u>2,573,270.</u> <u>120,208.</u>
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents Wi 2a 2b 2c 2d 2d	th Expenses per F 960,693. 111,204. 120,208.	1 2e 3	n. 3,645,167. 1,071,897. 2,573,270.

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 V, LINE 4:

THE	FOUNDATION'	S	ENDOWMENT	CONSISTS	OF	181	INDIVIDUAL	FUNDS	ESTABLISHED
-----	-------------	---	-----------	----------	----	-----	------------	-------	-------------

FOR A VARIETY OF PURPOSES AND SCHOLARSHIPS.

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(A) OF

THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, AS AN ORGANIZATION

DESCRIBED IN SECTION 501(C)(3) OF THE CODE. HOWEVER, INCOME GENERATED FROM

ACTIVITIES UNRELATED TO THE FOUNDATION'S EXEMPT PURPOSE IS SUBJECT TO TAX

UNDER SECTION 511 OF THE CODE. THE FOUNDATION DID NOT CONDUCT ANY

UNRELATED BUSINESS ACTIVITIES IN THE CURRENT FISCAL YEAR. THEREFORE, THE

FOUNDATION MADE NO PROVISION FOR FEDERAL INCOME TAXES IN THE ACCOMPANYING

932054 10-02-19

05091112 131839 058-020810-01

30

Schedule D (Form 990) 2019

932055 10-02-19

SCHEDULE I (Form 990)		Comple Comple	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.	d Other Assistance to Organizations, ts, and Individuals in the United States anization answered "Yes" on Form 990, Part IV, line 21 or 2	te to Organi s in the Unit on Form 990, Par	izations, ed States t IV, line 21 or 22.		OMB NO. 1545-0047
Department of the Treasury Internal Revenue Service			Go to www.irs	 Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. 	n 990. · the latest inform	ation.		Open to Public Inspection
ţ	tion ALAMO COLLEGES FOUNDATION	EGES FOUI	NDATION, INC					Employer identification number 74-2422589
Part I General Ir	General Information on Grants and Assistance	d Assistance						
1 Does the organi	Does the organization maintain records to substantiate the amount of the	substantiate the		or assistance, the g	rantees' eligibility	for the grants or assis	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	[
	criteria used to award the grants or assistance?	ance?						X Yes No
SC	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monit	oring the use of grant fi	unds in the United	States.			
Part II Grants an	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	omestic Organiz	ations and Domestic	Governments. Co	omplete if the orga	inization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and a	Techpient that received more than \$5,000. Part it can be duplicated 1 (a) Name and address of organization (b) EIN (c) IRC set	(b) EIN	(c) IRC section	r additional space is needed	. e	(f) Method of valuation (book.	(g) Description of	(h) Purpose of grant
or go	orgovernment		(if applicable)	casn grant	non-casn assistance	FMV, appraisal, other)	noncash assistance	or assistance
ALAMO COLLEGES DISTRICT	ISTRICT							
2222 N ALAMO ST			ALAMO COLLEGES					MAINTAIN FACILITIES AND
SAN ANTONIO, TX 7	78215	74-6002173	DIST	443,212.	0.			SERVICES
2 Enter total numk	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	d government org	anizations listed in the	line 1 table	-			1.
3 Enter total numb	Enter total number of other organizations listed in the line 1 table	listed in the line 1	table					
LHA For Paperwork	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2019)

932101 10-26-19

Schedule I (Form 990) (2019) ALAMO COLLEGES	FOUNDATION,	DN, INC.			74-2422589 Page 2
r Assistance to Domestic Individuals plicated if additional space is needed.	. Complete if the	organization answe	rred "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS AND EDUCATION SUPPORT	3350	2,116,642.	.0		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	l juired in Part I, lin	e 2; Part III, column	b); and any other ad	ditional information.	
PART I, LINE 2:					
THE FOUNDATION MONITORS GRANTS AND	SCHOLARSHIP	HIP RECEIPIENTS	IN	ACCORDANCE	
WITH THE GRANTS AND SCHOLARSHIP AGREEMENT CRITERIA.	REEMENT C	RITERIA.			
932102 10-26-19					Schedule I (Form 990) (2019)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.



74-2422589

ALAMO COLLEGES FOUNDATION, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITIES SERVED BY ITS 5 COLLEGES WHILE SEEKING TO INSPIRE PASSION

FOR EDUCATION AND ACTIVE COMMUNITY INVOLVEMENT.

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE, WHEN THE BOARD OF

DIRECTORS IS NOT MEETING, ALL OF THE AUTHORITY AND POWERS OF THE BOARD OF

DIRECTORS IN THE BUSINESS AND AFFAIRS OF THE FOUNDATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE AND AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE 990

WITH THE PAID PREPARER. A COMPLETE COPY OF THE 990 IS PROVIDED TO THE

ENTIRE BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD SECRETARY ACCUMULATES ANNUAL CONFLICT OF INTEREST RESPONSES AND

REPORTS ANY POTENTIAL ISSUES TO THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE.

FORM 990, PART XII, LINE 2C:

THE FOUNDATION DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTION

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2019)

 932211
 09-06-19

05091112 131839 058-020810-01

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization		Page Employer identification number
ALAMO COLLEGES FOUND	ATION, INC.	Employer identification number 74-2422589
		·
PROCESS DURING THE YEAR.		
932212 09-06-19		Schedule O (Form 990 or 990-EZ) (2019
	35	. , , , , , , , , , , , , , , , , , , ,

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	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.	ions and Unrelated Pal rered "Yes" on Form 990, Part IV, I ► Attach to Form 990. m990 for instructions and the lates	ttnerships ne 33, 34, 35b, 3 t information.	3, or 37.	° 0	OMB No. 1545-0047 2019 Open to Public Inspection
Name of the organization ALAMO COLLEGES					Employer identification number $74 - 2422589$	ication number 5 8 9
Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.	ste if the organization answered "Yes"	on Form 990, Part IV, line 33				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	me End-of-year assets		(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations. organizations during the tax year.	ations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt	answered "Yes" on Form 990	Part IV, line 34, b	ecause it had one	or more related tax-exe	impt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity?
ALAMO COLLEGES DISTRICT - 74-6002173 2222 N ALAMO STREET SAN ANTONIO, TX 78215	HIGHER EDUCATION	TEXAS			N/A	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.				Schedule R	Schedule R (Form 990) 2019

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Schedule R (Form 990) 2019 ALAMO CO	COLLEGES 1	FOUNDATION	TION, INC						74-24	422589	Page 2
Part III Identification of Related Organizations Taxable as a Partnership. organizations treated as a partnership during the tax year.	tions Taxable a	s a Partne l < year.		the organizat	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	es" on Form 990), Part IV, line	34, becaus	e it had one or m	ore relate	Ð
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income e	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or F managing partner?	(k) Percentage ownership
		16									
			j j								
Part IV organizations treated as a corporation or trust during the tax year.	on or trust during	g the tax ye	OF FLUSE	חווחופופ וו ווופ				art IV, III IE O ²	+, טפרמטאל וו וומט		חוב ובוקובת
(a) Name, address, and EIN of related organization		Prime	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	y Share of total p,) of total me	(g) Share of P end-of-year c assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes No
932162 09-10-19	-		-	27		-	-	-	Schedt	ule R (For	Schedule R (Form 990) 2019

INC.	
FOUNDATION,	
COLLEGES	
ALAMO	
990) 2019	
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Sct	

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

				╞		
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				1	Yes	ဍ
1 During the tax year, did the organization engage in any of the following transactions	with one or more re	transactions with one or more related organizations listed in Parts II-IV?	n Parts II-IV?		_	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1 a	<u></u>	×
b Gift. grant. or capital contribution to related organization(s)				1b	X	
(s)				-	×	
I pans or loan guarantees to or for related organization(s)				4		
				2 4		l
				ש	•	4
f Dividends from related organization(s)				¥		ы
g Sale of assets to related organization(s)				1g		×
Purchase of assets from related organize				÷		$ \bowtie$
				÷		$ \bowtie$
i Lease of facilities, equipment, or other assets to related organization(s)				1j		$ \bowtie$
				•		
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
I Performance of services or membership or fundraising solicitations for related organization(s)	iization(s)			11		×
m Performance of services or membership or fundraising solicitations by related organization(s)	iization(s)			1 T	×	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	n(s)			1n	X	
• Sharing of paid employees with related organization(s)				10	×	
p Reimbursement paid to related organization(s) for expenses				1p		×
				1q		×
r Other transfer of cash or property to related organization(s)				4		×
s Other transfer of cash or property from related organization(s)				1s		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	no must complete th	is line, including covered r	elationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	lved		
(1) ALAMO COLLEGES DISTRICT	В	443,212.	CASH			
(2) ALAMO COLLEGES DISTRICT	U	304,995. CASH	CASH			
(3) ALAMO COLLEGES DISTRICT	М	177,968.	FAIR VALUE			
(4) ALAMO COLLEGES DISTRICT	Ν	47,029.	FAIR VALUE			
(5) ALAMO COLLEGES DISTRICT	0	735,696.	FAIR VALUE			

(6) 932163 09-10-19

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019 ALAMO	ALAMO COLLEGES FOUNDATION	VDATION, J	INC.					74-242	-2422589	Page 4
Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Ye Provide the following information for each entity taxed as a partnership through which the organization cond that was not a related organization See instructions regarding exclusion for certain investment partnerships	able as a Partnership. Cor entity taxed as a partnershi structions recarding evolue	polete if the organ p through which t ion for certain inve	e organization answered "Yes" on Form 990, Part IV, line 37. which the organization conducted more than five percent of its activities (measured by total assets or rain investment partnerships	on Form	990, Part IV, line than five percent	37. of its activities (me	asured by	total assets or g	gross revenue)	enue)
(a) Name, address, and EIN of entity	Primary activity	(c) Legal domicile (state or foreign country)	Predominant income procession of the procession	er (c) (3) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(f) Share of total income	(g) Share of end-of-year assets	Dispropor- tionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
				2					3	
								Schedule	B (Forr	Schedule R (Form 990) 2019

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Part VII Supplemental Information

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

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