Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization For colondar year 2014, or fiscal year beginning 09/01____, 2014, and ending 08/31____

OMB No 1545-1878

Department of the Treasury Internal Revenue Service	Do not sond to the IRS, Keep for your records. information about Form 8879-EO and its instructions is at www.iz.gov/form8879eo.	2014
Name of exempt organization	Employer Iden	ufication number
DALLAS COUNTY Name and title of officer	COMMUNITY COLLEGE BISTRICT FOUNDATION, INC. 23-732	6612
PYEDER WILKIN	NS, EXECUTIVE DIRECTOR	
Part Type of Re	sturn and Return Information (Whole Dollars Only)	Mail Committee of the second
	eturn for which you are using this Form 8879-EO and enter the applicable amount, if any, fro	
leave line 1b, 2b, 3b,	(a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this for 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the reelow. Do not complete more than 1 line in Part I.	
1a Form 990 check h	are 🛌 🔀 b. Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b _	6,699,605
2a Form 990-EZ chec		
3a Form 1120-POL ch		
4a Form 990-PF check	chere 🕨 🔔 b Tax based on involutment income (Form 990-PF, Part VI, line 5), 4b 🔃	
5a Form 8868 check I	nore L b Balance Due (Form 8888, Part I, line 3c or Part II, line 8c)	
Partil Declaration	and Signature Authorization of Officer	
to nend the organization the tronsmission, (b) the authorize the U.S. Tress financial institution according and the financial Agent at 1-888-353-453 involved in the processing resolve issues related to	return. I consent to allow my intermediate service provider, transmitter, or electronic return of return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason return for any delay in processing the return or refund, and (c) the date of any refund. If applicancy and its designated Financial Agent to initiate an electronic funds withdrawal (direct dobit) untiindicated in the tax preparation software for payment of the organization's federal taxes of institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treeform of the electronic payment of taxes to receive confidential information necessary to answer of the electronic payment of taxes to receive confidential information necessary to answer to the payment. I have selected a personal identification number (PIN) as my signature for the dapplicable, the organization's consent to electronic funds withdrawal.	for rejection of icable, I entry to the entry to the easily Financial mancial institutions inquiries and
Officer's PIN: check on	ANY POLICE	
X authorize GR	ANT THORNTON I.LP to enter my PIN 4 6 5 6 4 5 6 4 6 5 6 4 6 5 6 6 4 6 6 6 6	ਫਰ my signature
being filed with a	ion's tax year 2014 electronically filed return. If I have indicated within this return that a copy a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize y PIN on the return's disclosure consent screen.	
If I have indicate the IRS Fed/Sta	the organization, I will enter my PIN as my signature on the organization's tax year 2014 elected within this return that a copy of the return is being filed with a state agency(les) regulating of the program, I will enter my PIN on the return's disclosure consent screen.	charities as part of
Dicer's signature > /	neim Wilking. Date 1/1/20	16
RO's EFIN/PIN. Enter v	our six-digit electronic filing identification	
	by your five-digit self-selected PIN. 4 8 1 0 5 8 :	3 6 6 0 5
idicated above. I confirm	meric entry is my PIN, which is my signature on the 2014 electronically filed return for the or n that I am submitting this return in accordance with the requirer ents of Pub. 4163, Modernia (10) e-file Providers to Sesine's Returns.	ruanization
RO's algorature 🕒	Curred Ni King Ho Patained - 1/11/2014	Andre Salamana .
	ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So	
	PA LAMBURG THE LOUIS TO THE BYS OTHERS MARKETED TO NO 20	

For Paperwork Reduction Act Notice, see back of form.

Farm \$879-EO (2014)

2014 EFILE ELF Status for Batch ID 13644247:

Return Taxpayer Name Client Code Alerts Jurisdiction Juris Description Service Contor Filing Status Date Sent Date Ack. DCN Debts PIN EIC

| Dallas County | Community College | 0169259 | HED | Federal | Accepted | 1/15/2016 7:28.00 AM 1/15/2016 7:56:00 AM 1/15/2016 AM 1/15/2

1 record returned



COPY FOR PUBLIC DISCLOSURE

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury internal Revenue Service

Form 990

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	FOF	ING ZVI	4 calendar year, or tax year beginning 09/01, 2014, an	a enaing		08/31, 20 15				
ь			C Name of organization DALLAS COUNTY COMMUNITY		D Employer Iden	tification number				
- D		uppliceble:	COLLEGE DISTRICT FOUNDATION, INC.		23-7326	612				
		irese nge	Doing business as		1					
Г	Nan	ne change	Number and street (or P.O. box if mall is not delivered to street address)	m/suite	E Telephone number					
Г	Initi	al ratum	1601 S LAMAR STREET		(214) 378	3-1537				
		ni returni	City or town, state or province, country, and ZtP or foreign postal code		1000,					
\vdash	Ami	ningled arkied	DALLAS, TX 75215		G Gross receipts	\$ 13,162,922.				
\vdash	retu App	lication	F Name and address of principal officer: PYEPER WILKINS		H(a) Is this a group					
Ŀ	pen	ding	1601 S LAMAR STREET DALLAS, TX 75215		subordinates?					
$\overline{}$	Town	xempt st		I 11	H(b) Are all subordin					
<u>.</u>			(4)(1)	527	-	n a list. (see instructions)				
			WWW.FOUNDATION.DCCCD.EDU		H(c) Group exempt					
<u>K</u>				L Year of forma	tion: 1973 M s	State of legal domicile: TX				
## :	art"l		mmary							
	1		describe the organization's mission or most significant activities: ENHANCE !			EMENT AND				
9			ELLENCE OF THE DCCCD BY PROVIDING SCHOLARSHIPS,		IG THE					
Governance		DEVI	ELOPMENT OF FACULTY AND STAFF, AND FOSTERING INN	OVATION						
	2	Check	this box I if the organization discontinued its operations or disposed of	more than 25%	of its net assets.					
Ô	3	Numb	er of voting members of the governing body (Part VI, line 1a)		265/2/630/00	30.				
මේ	4	Numb	er of Independent voting members of the governing body (Part VI, line 1b)			4 30.				
ţį	5	Total r	number of individuals employed in calendar year 2014 (Part V, line 2a)	• • • • • • •		5 0				
Activities &	6	Total	number of volunteers (estimate if necessary)			6 30.				
Ac	79	Total	unrelated business revenue from Part VIII, column (C), line 12		arana la rarana	7a 0				
	1 '5	Metas	related business taxable income from Form 990-T, line 34							
	_ N	I MAT OIL	irelated business taxable income from Form 990-1, line 34	<u> </u>	Prior Year	7b 0 Current Year				
		O4-*1	E-12							
9	8	Contri	butions and grants (Part VIII, line 1h)	2,048,198						
Revenue	9	Progra	ım service revenue (Part VIII, line 2g)			0 0				
2		Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)		1,992,319	2,386,540.				
	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		18					
	12		evenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,040,535	6,699,605.				
	13	Grants	and similar amounts paid (Part IX, column (A), lines 1-3)		1,800,280	2,718,159.				
	14	Benefi	ts paid to or for members (Part IX, column (A), line 4)			0 0				
ć,	15	Salarie	es, other compensation, employee benefits (Part IX, column (A), lines 5-10)			0 0				
Expenses	16a		sional fundraising fees (Part IX, column (A), line 11s)			0 0				
8	ь	Total f	undraising expenses (Part IX, column (D), line 25) > 31,170.	· · · · —	 .					
ω	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		156,507	195,398.				
	18	Total e	xpenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	· · · ·	1,956,787					
	19		ue less expenses. Subtract line 18 from line 12		2,083,748					
58		TOVOIT	ue less expenses, outstate interior interior (2, 5, 5, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,		ning of Current Ye					
Assets or	20	Total -	ssets (Part X, line 16)							
Bail	21		***************************************	• • • •	40,542,818					
급	22		abilities (Part X, line 26)	• • • •	214,830					
			sets or fund balances. Subtract line 21 from line 20		40,327,988	41,183,692.				
			nature Block							
true	oer pei e, corre	naitles of ect, and c	perjury, I declare that I have examined this return, including accompanying schedules ar omplete. Declaration of preparer (other than officer) is based on all information of which pre	nd statements, a noarer bas anv kn	nd to the best of n lowledge.	ny knowledge and belief, it is				
					1					
Sig	ю	- a								
Hei		8	Signature of officer		Date					
i i e		b -								
		T	ype or print name and title							
		Print/T	1 22 1 4 4 1	ate	Check If	PTIN				
Pald		SHAN	NON A RUDISELL Place Rudial 1	11/2016	self-employed	1				
•	parer	Firm's r			Firm's EIN > 36	1				
V\$6	Only		address >8300 THORN DRIVE, SUITE 300 WICHITA, KS 67226-2708			6-265-3231				
Vlav	the li		uss this return with the preparer shown above? (see instructions)		Phone no. 31					
_			eduction Act Notice, see the separate instructions.		*******					
~,	. whai	IR IR	ranacian can manakal ana mia anbumma manganan.			Form 990 (2014)				

4	Check if Schedule O contains a response or note to any line in this Part III	• •
1	ATTACHMENT 1	
	THE PROPERTY OF THE PROPERTY O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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? Yes If "Yes," describe these changes on Schedule O.	
1	Describe the organization's program service accomplishments for each of its three largest program services, as mea	2011
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	to (
	(Code:) (Expenses \$ 152,380. including grants of \$ 152,380.) (Revenue \$)
	RISING STAR SCHOLARSHIP PROGRAM	
		_
		_
b	(Code:) (Expenses \$)
b	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS)
b	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS)
b	(Code:) (Expenses \$)
b	(Code:) (Expenses \$.)
b	(Code:) (Expenses \$)
b	(Code:) (Expenses \$.)
b	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS	.)
b	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS)
ib	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS	.)
b :	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS)
lb :	(Code:) (Expenses \$ 902,230. including grants of \$ 902,230.) (Revenue \$ NON-RISING STAR SCHOLARSHIPS	.)
	NON-RISING STAR SCHOLARSHIPS)
c (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
c (NON-RISING STAR SCHOLARSHIPS)
c (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
C (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
C (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
C (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
c (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
C (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
c (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
c (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
C (NON-RISING STAR SCHOLARSHIPS Code:)(Expenses \$)
C ()	Code:)(Expenses \$)
e (NON-RISING STAR SCHOLARSHIPS Code: (Expenses \$ 1,673,549, including grants of \$ 1,663,549,) (Revenue \$ 2,663,549,) (Revenue)
c ()	NON-RISING STAR SCHOLARSHIPS Code:) (Expenses \$ 1,673,549 including grants of \$ 1,663,549) (Revenue \$ 2,663,549) (Revenue \$ 3,663,549)
c ()	Code:) (Expenses \$ 1,673,549. including grants of \$ 1,663,549.) (Revenue \$ 2,728,159.) Code:) (Expenses \$ 1,673,549. including grants of \$ 1,663,549.) (Revenue \$ 2,728,159.))
c ()	Code:) (Expenses \$))

Page

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		Ì	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4_	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		
	Part III	5	_	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			,
7	"Yes," complete Schedule D, Part I. Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		Х
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	7		
ಿ	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	-		
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	1		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
-	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		E 1	
	VII, VIII, 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
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
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		Х
	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 consolldated 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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	1	ŀ	
	complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		ł	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1	1	
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV			1.5
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	46	- 1	х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	46		Х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		<u></u>
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-1/	\dashv	- 73
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	- 1	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	.0		
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
		20b		

	990 (2014)			Page 4
Par	Checklist of Required Schedules (continued)		7	
	DOM the constant of the state o		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1	1	,
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21	 	X
~~	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 Schedule J	23		l x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		†—	-
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a,	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	<u> </u>
25a	The state of the s		:	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	Х
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?	1		١
26	If "Yes," complete Schedule L, Part I	25b		X
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			<u> </u>
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity 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):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
¢	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
31	conservation contributions? If "Yes," complete Schedule M	30		_X
31	Part I	24		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		<u> </u>
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	JŁ	-	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
		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		<u>X</u>
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,			
20	Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	.	.,	
		38 Form 9	X On "	2044
		Loun S	an ()	(41°02

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	5	1	122
b	Enter the number of Forms W-2G included in line 1a. Enter -0- If not applicable1b	o!		
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	Del	Sight	
		0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions),			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			10
	See instructions for filing requirements for FinCEN Form 114; Report of Foreign Bank and Financial Accounts			
	(FBAR).	MILLION IN		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
C C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		
oa	organization solicit any contributions that were not tax deductible as charitable contributions?	6-		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		
,,,	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		349
-	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
•	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		
_	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			110
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		17.5	10.
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			77.1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	1,5		
	Initiation fees and capital contributions included on Part VIII, line 12	i i		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			Har
4.5	against amounts due or received from them.)		3	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		غد ــــ
	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.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			х
	If "Yes" has it filed a Form 720 to report these payments? If "No " provide an evaluation in Schodule O	14a	-+	

Form 990 (2014) Page 6

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions, Section A. Governing Body and Management Yes No 30 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 4 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body?..... Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a Х 8b is there any officer, director, trustee, or key employee listed in Part Vil, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c X Did the organization have a written whistleblower policy?.... 13 13 Х Did the organization have a written document retention and destruction policy?........... 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_____ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records; 20 MARK BALLARD 1601 S LAMAR STREET DALLAS, TX 75215 JSA

Form 990 (2014)	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees Independent Contractors	, and
	Check if Schedule O contains a response or note to any line in this Part VII	. \Box
	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 with	hin the

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

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

(A) Name and Title	(B) Average hours per week (list any hours for				is both tor/trust	an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)NORMAN P. BAGWELL DIRECTOR	0	x						0	0	
(2)HENRY C. BECK, III	0	Ī.,								
DIRECTOR (3)SALLY B. BERRY	0	X	╀┤					0	0	
DIRECTOR	0	х						اه	o	
(4)MICHAEL D. BROWN DIRECTOR	0	х						0	0	
(5)W. PLACK CARR, JR. DIRECTOR	0	x						0	0	
(6)GUY L. CULPEPPER DIRECTOR	0	x						0	0	
(7) RUBEN E. ESQUIVEL SECRETARY	0	х		х				0	0	
(8)VALERIE M. FREEMAN DIRECTOR	0	х						0	0	
(9) JERRY C. GILMORE DIRECTOR	0	×						0	0	
(10)JOSEPH M. GRANT DIRECTOR	0	х						0	0	
(11)DOUGLAS D. HAWTHORNE, FACHE IMMEDIATE PAST CHAIR	0	х		х				0	0	
(12)HUNTER L. HUNT CHAIR	0	х		x				0	0	
(13)MARGO RAMIREZ KEYES DIRECTOR	0	х		1				0	0	
(14)SCOTT LETIER DIRECTOR	0	x		\top	1		1	0	0	(

Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos heck as pe	rson linert	than the Highest compensated is of employee	an	Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
L5) A.K. MAGO	0		ă l			ated				
DIRECTOR 6) JACK MATTHEWS	0	Х	Н		Н			0	0	
DIRECTOR	0	х						o	0	
7) LYNN MCBEE	0									
OFFICER 8) MICHAEL C. MEWHINNEY	0	Х		Х	\vdash		_	0	0	<u> </u>
TREASURER	0	Х		х				0	0	
9) J.C. MONTGOMERY, JR. OFFICER	0	v		,						
OFFICER	0	Х	$\vdash \vdash$	Х			-	0	0	
OFFICER	0	Х		х				0	o	
1) MIKE A. MYERS DIRECTOR	0	x								
2) GAY F. SOLOMON	0	^	H	\dashv						
DIRECTOR	0	Х						<u> </u>	0	
3) DEBBIE TAYLOR CHAIR ELECT	. 0	x		x				ا		
4) JOHN R. THOMPSON, JR.	0				_		_			
DIRECTOR	0	Х		_	_	_		0	0	
5) ROBERT L. THORNTON, III DIRECTOR	0	x						a	ا	
1b Sub-total							▶	0	o	
c Total from continuation sheets to Part VII, So								0	89,130.	
d Total (add lines 1b and 1c)	imited to the	ose i	isted	l ab	ove) who	ra	ceived more than \$	89,130.	
reportable compensation from the organization		0				,		obited more than t		
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedul	ile J for suc	h indi	vidu	al.				• • • • • • • • • • •		Yes N
For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15 	0.00	0?	<i>If</i>	Yes,	." c	complete Schedule	J for such	4
for services rendered to the organization? If "Ye	s," complet	s Sch	edule	θJ	for s	any such p	urir oers	elateu organizatio	n or individual	5
Section B. Independent Contractors Complete this table for your five highest component compensation from the organization. Report compensation	pensated in	depe	nder	nt c	ontr enda	actor	s th	nat received more	than \$100,000 of	's tax
year.	·									
(A) Name and business addi	ress							(B) Description of sen	rices Co	(C) empensation
										- 8:
					_		\vdash			

(A) Name and title		Average hours per week (list any hours for	officer and a director/t					an lee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
26) MARGARET D. WILDENTHAL DIRECTOR	0	-			_			0		
27) ROBERT W. KORBA DIRECTOR	0	-						0	(
28) STEVE LYLE DIRECTOR	0	4						0		
29) CLINT MCDONNOUGH	0									
30	DIRECTOR) TORRENCE H. ROBINSON	0	X	Н					0		
31	DIRECTOR) PYEPER WILKINS	40.00	X						0	C	
_	EXECUTIVE DIRECTOR	0			х				0	89,130.	
										· ·	
					-						
	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization	ection A limited to ti		iste				▲ ▲ A	ceived more than	\$100,000 of	
3	Did the organization list any former office employee on line 1a? If "Yes," complete Schedu									compensated	Yes N
4	For any individual listed on line 1a, is the sorganization and related organizations graindividual	eater than	\$15 • • •	0,00	00?	H	"Yes	," (complete Schedul	e J for such	4
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye ction B, Independent Contractors	accrue cor es," complet	npen: e Sch	satio edul	on fi le J	rom <i>for</i>	any such	unr p <i>er</i> s	elated organization	n or individual	5 >
1	Complete this table for your five highest com compensation from the organization. Report c year.	pensated in ompensation	ndepe on for	nde the	nt c	ont	ractor	rs th	nat received more nding with or with	than \$100,000 o	f n's tax
	(A) Name and business add	ress							(B) Description of ser	vices C	(C) ompensation
				,				_			
											_
	Total number of independent contractors (in							F			

Page 9

Ра	rt VI	Statement of Revenue Check if Schedule O con		nse or note to a	ny line in this Part	VIII		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Membership dues Fundraising events Related organizations	tions). 16 1c 1d tions). 1e prants, above 1f		4,313,055.			
Program Service Revenue	2a b c d e f	All other program service reve Total. Add lines 2e-2f	mue		0			
	3 4 5	Investment income (incl and other similar amounts) Income from investment of ta Royalties	ax-exempt bond	proceeds .	1,509,120.			1,509,120
	b c d 7a	Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities 7,340,737.	(ii) Other	0			
ne	b c d 8a	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)			877,420.			877,420.
Other Revenue	b c	events (not including \$ of contributions reported on Iir See Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming a	ab dralsing events.		0			
	b c 10a	See Part IV, line 19	a b ming activities. ry, less		0.			
j	b b	Less: cost of goods sold Net income or (loss) from sale: Miscellaneous Revenue	s of Inventory,	Business Code	0			
j	11a b c d	All other revenue						
	e 12	Total. Add lines 11a-11d Total revenue. See instructions			6,699,605.		LONG HILLS THE	2,386,540.

Form 990 (2014)

Page 10

Part IX Statement of Functional Expenses				Page 1
Section 501(c)(3) and 501(c)(4) organizations mu	st complete all columns	s. All other organization	ns must complete colun	nn (A).
Check if Schedule O contains a respo	nse or note to any line	in this Part IX		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations				<u> </u>
and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	2,718,159.	2,718,159		
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16	0			<u> </u>
4 Benefits paid to or for members	0	_		
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	o	i		
persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages				
8 Pension plan accruals and contributions (include		i		
section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	<u> </u>			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
10 Payroll taxes	-			
11 Fees for services (non-employees): Management	d			
b Legal	0			
c Accounting	18,000.	· ·· ·	18,000.	
d Lobbying	10,000.	10,000.	20/0001	
e Professional fundraising services. See Part IV, line 17,	0			
f Investment management fees	70,859.		70,859.	
9 Other, (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O.).	3,251.		3,251.	
12 Advertising and promotion	41,239.		10,069.	31,170.
13 Office expenses	1,951.		1,951.	
14 Information technology	19,450.		19,450.	
15 Royalties	0			
16 Occupancy	0			
7 Travel	714.		714.	
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officiels	0			
9 Conferences, conventions, and meetings	13,985.		13,985.	
0 Interest	0			
1 Payments to affillates	0			-
2 Depreciation, depletion, and amortization	0			
3 Insurance	6,866.		6,866. □	
4 Other expenses. Itemize expenses not covered	İ			
above (List miscellaneous expenses in line 24e. If				
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O.)				- · · · · · · · · · · · · · · · · · · ·
RECOGNITION	7,105.		7,105.	
bMISCELLANEOUS EXPENSES	1,978.		1,978.	
c				
d				
e All other expenses	0.045.777			
5 Total functional expenses. Add lines 1 through 24e	2,913,557.	2,728,159.	154,228.	31,170.
6 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				

JSA 4E1052 1.000

following SOP 98-2 (ASC 958-720) .

	Check if Schedule O contains a response or note to any line in this Pa	rt Y		-
		(A) Beginning of year		(B) End of year
1		470,318	. 1	1,928,869
2	Savings and temporary cash investments	6,511,000	. 2	6,505,120
3	Pledges and grants receivable, net	469,208	. 3	555,148
4	Accounts receivable, net		0 4	
5	Loans and other receivables from current and former officers, directors,			
}	trustees, key employees, and highest compensated employees.			
6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		5	
7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use	(8	_
9	Prepaid expenses and deferred charges	4,596		4,538
10 :	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a			
1	Less: accumulated depreciation	(10c	İ
11	Investments - publicly traded securities	33,032,305.	11	32,451,390.
12	Investments - other securities. See Part IV, line 11	(12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets	(14	
15	Other assets. See Part IV, line 11	55,391.	15	56,598
16	Total assets. Add lines 1 through 15 (must equal line 34)	40,542,818.		41,501,663.
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 Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors,			
	trustees, key employees, highest compensated employees, and			
	disqualified persons. Complete Part II of Schedule L	0	22	(
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	214,830.	25	317,971.
26	Total liabilities. Add lines 17 through 25	214,830.	26	317,971.
	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			·
27	Unrestricted net assets	2,044,458.	27	1,714,761.
28	Temporarily restricted net assets	12,854,828.	28	12,600,857.
29	Permanently restricted net assets	25,428,702.	29	26,868,074.
	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
	Capital stock or trust principal, or current funds	j	30	
30	Dold to an excitation with a section to the first transfer of the		31	
31	Paid-in or capital surplus, or land, building, or equipment fund			
31 32	Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		32	
31	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances.	40,327,988.	32 33	41,183,692.

Form 9	90 (2014)			Р	age 12
Par			· · · · · ·	•	
	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	6	699,	605.
2	Total expenses (must equal Part IX, column (A), line 25)	2		913,	
3	Revenue less expenses. Subtract line 2 from line 1	3	3,	786,	048.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	40,	327,	988.
5	Net unrealized gains (losses) on investments	5	-2,	930,	344.
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	Γ			
	33, column (B))	10	41,	183,	692.
Part	Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled o	or		
	reviewed on a separate basis, consolidated basis, or both:				İ
	Separate basis Consolidated basis Both consolidated and separate basis]	
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	<u>L</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ed on	а		
	separate basis, consolidated basis, or both:		1		1
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for a	versigh	nt		
	of the audit, review, or compilation of its financial statements and selection of an independent acc	ountant	? 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain i	n		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n		
	the Single Audit Act and OMB Circular A-133?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo th	e		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	lits.	3b		
			Form	990	(2014)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2014

Coon to Public

Name of the organization DA	ALLAS CO	DUNTY COMMUNI	TY			Employer ide	ntification number	
COLLEGE DISTRICT E	FOUNDATI	ON, INC.				23	3-7326612	
Parti Reason for P	ublic Cha	rity Status (All o	organizations must	comple	te this pa	art.) See instruction	S	
The organization is not a p	•		•	-	_			
		•	tion of churches desc		section 1	170(b)(1)(A)(i).		
			. (Attach Schedule E.)					
· ·	•	•	rganization described		•	, , , , , ,		
	_	•	conjunction with a ho	spital de	escribed i	n section 170(b)(1)(A)(iii). Enter the	
	hospital's name, city, and state: X An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
section 170(b)(1))(A)(Iv). (C	omplete Part II.)					ental unit described in	
	_	_	rnmental unit describe					
		-		ipport fr	om a go	vernmental unit or fr	om the general public	
described in sect								
650		·	o)(1)(A)(vi). (Complete					
							ership fees, and gross	
•		-				• •	ore than 331/3% of its	
• • • • • • • • • • • • • • • • • • • •							tax) from businesses	
	_		975. See section 509		•	•		
	_	•	usively to test for publ	_				
	-						rry out the purposes of	
·		_			-		ction 509(a)(3). Check	
L1	_		es the type of support			·	•	
			, supervised, or contr					
				elect a n	najority o	of the directors or trus	tees of the supporting	
·		mplete Part IV, S				4 1 4 10		
			ed or controlled in co				, , _	
	-		rganization vested in	ine sam	ie persor	is that control of mar	hage the supported	
		•	, Sections A and C.				III. I. A	
- "			ng organization opera				ily integrated with,	
	-		s). You must comple				d a d (- \)	
	-		porting organization on nization generally mus	-				
		-	omplete Part IV, Sect				u an anenaveness	
, ,		•	a written determinatio		-		II. Tuna III	
	_		ionally integrated sup				п, тура ш	
f Enter the number of			ionally integrated sup	porting	o garnea			
g Provide the following			orted organization(s).				••••	
(i) Name of supported organ		(ii) EiN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of	
			(described on lines 1-9		ur governing	support (see	other support (see	
			above or IRC section (see instructions))	Bocu	ment?	Instructions)	instructions)	
				Yes	No		_	
A)								
A)								
B)						-		
o)								
C)								
		,						
D)	1							
-,					ļ			
E)								
							<u> </u>	
otal								
OLHI					. 1		,	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2014

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,309,619,	2,291,237.	1,796,816.	2,048,198.	4,313,065.	12,759,935,
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						(
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,309,619.	2,292,237.	1,796,816.	2,048,198.	4,313,065.	12,759,935.
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).						1,269,552.
6	Public support, Subtract line 5 from line 4.		1			l	11,490,383.
	tion B. Total Support	(m) 2010	(h) 2014	(-) 2042	(4) 2042	(2) 2044	45 Tetal
	endar year (or fiscal year beginning in) 🕪	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
8	Amounts from line 4 Gross Income from Interest, dividends, payments received on securities loans, rents, royalties and income from similar	2,309,619.	2,292,237.	1,796,816.	2,048,198.	4,313,065	12,759,935.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	443,411.	567,188.	490,543.	949,108.	1,509,120.	3,959,370.
10	Other Income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			523.	18.		541.
11	Total support. Add lines 7 through 10						16,719,846.
12	Gross receipts from related activities, etc. (s	ee instructions) .	[9] .			12	
13	First five years. If the Form 990 is for organization, check this box and stop here						
	tion C. Computation of Public Supp			44 1 (0)		441	68.72 %
14	Public support percentage for 2014 (lir	ne 6, column (1)	alvided by line	11, column (t))		14 4E	79.08%
15 160	Public support percentage from 2013 3 331/3% support test - 2014. If the or						
	this box and stop here. The organization	on qualifies as a	publicly suppor	ted organizatior			→ X
	331/3% support test - 2013. If the o check this box and stop here. The orga 10%-facts-and-circumstances test - 2	anization qualific	es as a publicly s	supported organ	nization		. 🕨 🗌
	10% or more, and if the organization Part VI how the organization meets the	meets the "fac he "facts-and-ci	cts-and-circumstr ircumstances" te	ances" test, che st. The organiz	eck this box an ation qualifies	d stop here. Ex as a publicly su	oplain in
b	organization	2013. If the org	anization did no	ot check a box	on line 13, 16a	, 16b, or 17a, a	
	Explain in Part VI how the organization supported organization	on meets the "f	acts-and-circum	stances" test. 1	The organization	n qualifies as a	publicly
18	Private foundation. If the organization instructions				<u> </u>		
					Sc	:hedule A (Form 99:	0 or 990-EZ) 2014

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

(Complete only if you checked the box	on line 9 of Part I or if the organization	a failed to qualify under Part II.
If the organization fails to qualify under t	he tests listed below, please complete	e Part II)

Cale	tion A. Public Support	1 1	1		·, ·			
CHIP	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	1 (e) 2014	(f) Tota
1	Gifts, grants, contributions, and membership fees			ļ			,	
	received. (Do not include any "unusual grants.")]		1		
2	Gross receipts from admissions, merchandise					1		
	sold or services performed, or facilities				1			1
	furnished in any activity that is related to the							}
	organization's tax-exempt purpose		ŀ	1				
3	Gross receipts from activities that are not an		<u> </u>		 	+		1
	unrelated trade or business under section 513			1	İ			
4	Tex revenues levied for the					-		
7					İ			
	organization's benefit and either paid				-			
_	to or expended on its behalf				 	┼		
5	The value of services or facilities							
	furnished by a governmental unit to the				1	i		
	organization without charge		 .			↓		
	Total. Add lines 1 through 5					<u> </u>		
7a	Amounts included on lines 1, 2, and 3		1			1		
	received from disqualified persons							
D	Amounts included on lines 2 and 3					1		
	received from other than disqualified persons that exceed the greater of \$5,000		1					1
	or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b							
	Public support (Subtract line 7c from					T		
	line 6.)					1		
Sect	tion B. Total Support					<u> </u>		
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	6	9) 2014	(f) Total
9	Amounts from line 6				1.	 `	,	(4) 1012
_	Gross income from interest, dividends,					 		
	payments received on securities loans,					•		
	rents, royalties and income from similar							
	sources		 		-	⊢-		
Þ	Unrelated business taxable income (less					l		
	section 511 taxes) from businesses				ļ	1		
	acquired after June 30, 1975							
C	Add lines 10a and 10b							_
11	Net income from unrelated business							
	activities not included in line 10b,]		
	whether or not the business is regularly carried on					1		
	Other income. Do not include gain or							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	loss from the sale of capital assets		1					
	· · · · · · · · · · · · · · · · · · ·					1		
	(Explain in Part VI.)	*				-		
19	Tatal august /644 (isas 0, 10s, 11						- 1	
3	Total support. (Add lines 9, 10c, 11,		1 1					
	and 12.)	 						
14	and 12.)							
14	and 12.) First five years. If the Form 990 is for organization, check this box and stop here.							
4 Sect	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Sup	port Percent	age					
4 Sect	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Sup Public support percentage for 2014 (line 8,	port Percent column (f) divid	age ed by line 13, colum	on (f))		15		⊳ [
4 Sect	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Sup	port Percent column (f) divid	age ed by line 13, colum	on (f))		15		<u>▶</u> [
ect	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Sup Public support percentage for 2014 (line 8,	port Percent column (f) divid tule A, Part III, lin	age ed by line 13, colum	on (f))		15		<u>▶</u> [
iecti	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Suppublic support percentage for 2014 (line 8, Public support percentage from 2013 Schedion D. Computation of Investment	port Percent column (f) divid dule A, Part III, lin t Income Per	age ed by line 13, colum ne 15	nn (f))		15		
iecti 6 iecti	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Suppublic support percentage for 2014 (line 8, Public support percentage from 2013 Schedion D. Computation of Investment Income percentage for 2014 (line)	port Percent column (f) divid dule A, Part III, lin t Income Per e 10c, column (age ed by line 13, colum e 15 centage f) divided by line 1	nn (f))		15 16		
iecti 6 iecti 7	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Suppenblic support percentage for 2014 (line 8, Public support percentage from 2013 Schedion D. Computation of Investment Investment Income percentage for 2014 (line Investment Income percentage from 2013 Schedion D. Computation of Investment Income percentage from 2013 Schedion 2014 (line)	port Percent column (f) dividuale A, Part III, III t Income Per e 10c, column (chedule A, Part	age ed by line 13, columne 15 centage f) divided by line 1: Iti, line 17	nn (f))		15 16 17 18		
iecti 6 iecti 7 8 i	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Supple Public support percentage for 2014 (line 8, Public support percentage from 2013 Schedion D. Computation of Investment Investment Income percentage from 2014 (line Investment Income percentage from 2013 S 331/3% support tests - 2014. If the organization of Investment Income percentage from 2013 S	port Percent. column (f) divided tale A, Part III, III t Income Per e 10c, column (chedule A, Part anization did no	age ed by line 13, columne 15	on (f))	line 15 is more	15 16 17 18 than	331/3 %, a	nd line
Section 1	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Supple Public support percentage for 2014 (line 8, Public support percentage from 2013 Schedion D. Computation of Investment Investment Income percentage from 2014 (line) Investment Income percentage from 2013 S 331/3% support tests - 2014. If the organization of Investment Income percentage from 2013 S 331/3% support tests - 2014, If the organization of Investment Income percentage from 2013 S 331/3% support tests - 2014, If the organization of Investment Income percentage from 2013 S 331/3% support tests - 2014, If the organization of Investment Income percentage from 2013 S 331/3% support tests - 2014, If the organization of Investment Income percentage from 2013 S	port Percent column (f) dividue A, Part III, lin t Income Per e 10c, column (ichedule A, Part anization did no s box and stop	age ed by line 13, columne 15 centage (f) divided by line 1: Iti, line 17 ot check the box p here. The orga	on (f))	line 15 is more	15 16 17 18 than	331/3 %, a	nd line
Section 5 is section 7 is section 9 a is section 5 is sec	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Supplements of the computation of Public Supplements of the computation of Investment investment income percentage for 2014 (line investment income percentage from 2013 Significant income percentage from 2014 (line 8, percentage fr	port Percent column (f) dividue A, Part III, lin t Income Per e 10c, column (ichedule A, Part anization did no box and stop nization did not	age ed by line 13, columne 15 centage (f) divided by line 1: If, line 17 of check the box of here. The orgaticheck a box on life	on (f))	I line 15 is more as a publicly to a, and line 16 is	15 16 17 18 than suppor	331/3 %, a 'ted organiz than 331/3	nd line ration ▶
5 6 6 6 6 6 6 6 6 6	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Supple Public support percentage for 2014 (line 8, Public support percentage from 2013 Schedion D. Computation of Investment Income percentage for 2014 (lin Investment Income percentage from 2013 S 331/3% support tests - 2014. If the organization of the properties	port Percent column (f) divid dule A, Part III, lii t Income Per e 10c, column (chedule A, Part anization did not box and stop alization did not this box and s	age ed by line 13, columne 15, centage (f) divided by line 1 Iti, line 17 ot check the box or here. The orgation check a box on littop here. The orgation of the organization of the	on (f))	d line 15 is more as a publicly sta, and line 16 is as a publicly	15 16 17 18 than support	331/3 %, a rted organiz than 331/3	nd line ration ▶ ₩, and
6ect: 5 6 6 7 7 8 1 9 8 1 1 1 1 1 1 1 1 1	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Supplements of the computation of Public Supplements of the computation of Investment investment income percentage for 2014 (line investment income percentage from 2013 Significant income percentage from 2014 (line 8, percentage fr	port Percent column (f) divid dule A, Part III, lii t Income Per e 10c, column (chedule A, Part anization did not box and stop alization did not this box and s	age ed by line 13, columne 15, centage (f) divided by line 1 Iti, line 17 ot check the box or here. The orgation check a box on littop here. The orgation of the organization of the	on (f))	illine 15 is more as a publicly: a, and line 16 is as as a publicly check this bo	15 16 17 18 than support	331/3 %, a rted organiz than 331/3 rted organiz see instru	and line reation > (and li
5 6 6 6 6 6 6 6 6 6	and 12.) First five years. If the Form 990 is for organization, check this box and stop here. ion C. Computation of Public Supplementary of the support percentage for 2014 (line B, Public support percentage from 2013 Scheet on D. Computation of Investment Income percentage for 2014 (line Investment Income percentage from 2013 S 331/3% support tests - 2014. If the organization of Investment Income percentage from 2013 S 331/3% support tests - 2014. If the organization of Investment Income than 331/3%, check this 331/3% support tests - 2013. If the organization of Investment Income than 331/3%, check this 331/3% support tests - 2014. If the organization of Investment Income than 331/3%, check this 331/3% support tests - 2013. If the organization of Investment Income than 331/3%, check this 331/3% support tests - 2014. If the organization of Investment Income than 331/3%, check this 331/3% support tests - 2014. If the organization of Investment Income percentage from 2013 Scheet Investment Income percentage from 2013 Scheet Investment Income percentage from 2013 Scheet Investment Income percentage from 2013 Scheet Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2013 Scheet Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2013 Scheet Investment Income percentage from 2013 Scheet Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income percentage from 2014 (line B, Public Support Investment Income Public Support Investment Income Public Support Investment Income Public Support Investment Income Public Support Investment Inco	port Percent column (f) divid dule A, Part III, lii t Income Per e 10c, column (chedule A, Part anization did not box and stop alization did not this box and s	age ed by line 13, columne 15, centage (f) divided by line 1 Iti, line 17 ot check the box or here. The orgation check a box on littop here. The orgation of the organization of the	on (f))	illine 15 is more as a publicly: a, and line 16 is as as a publicly check this bo	15 16 17 18 than support	331/3 %, a rted organiz than 331/3 rted organiz see instru	nd line reation > (

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Sect	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and If you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an iRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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.	5c		_
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			

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.)

organizations)? If "Yes," answer (b) below.

	ule A (Form 990 or 990-EZ) 2014			Page
Par	Supporting Organizations (continued)		137	l N1
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	N
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
ь	A family member of a person described in (a) above?	11b		✝
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		Τ
	ion B. Type I Supporting Organizations	1.7.		
			Yes	N
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			1
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		i	
	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			l
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	'	1
Sect	ion C. Type II Supporting Organizations	1 4		
			Yes	N
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			Г
371	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		
ect	on D. All Type III Supporting Organizations			_
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	N
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior			
	tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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	1 1		
	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.			
ecti	on E. Type III Functionally-Integrated Supporting Organizations	3		_
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structio	ons):	
a	The organization satisfied the Activities Test. Complete line 2 below.		,	
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 instru		•	
2	Activities Test. Answer (a) and (b) below.		Yes	N
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1	
-	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,		ı	
	how the organization was responsive to those supported organizations, and how the organization determined	1 1	- 1	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		- 1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1 1		
	reasons for the organization's position that its supported organization(s) would have engaged in these	١ ا		
	activities but for the organization's involvement.	_2b		_
	Parent of Supported Organizations. Answer (a) and (b) below.		İ	
3			- 1	
-	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		- 1	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a 3b	\rightarrow	

Schedule A (Form 990 or 990-EZ) 2014 Page 6 Parti₩ Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here If the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior 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 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 10 e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount. see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by .035 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 2

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2014

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

4 Enter greater of line 2 or line 3

5 Income tax imposed in prior year

emergency temporary reduction (see instructions)

3

4

5

Schedule A (Form 990 or 990-EZ) 2014 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (II) (i) Excess Distributions Underdistributions Distributable Section E - Distribution Aliocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014: b C d f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount Carryover from 2009 not applied (see instructions) Remainder, Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2014 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions). Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see Excess distributions carryover to 2015. Add lines 3 and 4c. Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013 e Excess from 2014

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury

Schedule of Contributors

OMB No. 1545-0047

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

	ation about Schadule B (Form 330, 330-E2, or 330-FF) and its instructions is at www.ifs.go	VITO/M990.				
Name of the organization		Employer identification number				
DALLAS COUNTY COMMUNICOLLEGE DISTRICT FOUN		23-7326612				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ion				
	501(c)(3) taxable private foundation					
Note. Only a section 501(c)(7), instructions.	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See				
General Rule						
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributoroperty) from any one contributor. Complete Parts I and II. See instruction tributions.					
Special Rules						
regulations under sect 13, 16a, or 16b, and th	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 chat received from any one contributor, during the year, total contributions be amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1)				
contributor, during the	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
ution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 0-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its rm 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

JSA 4E1251 2.000 Name of organization DALLAS COUNTY COMMUNITY Employer identification number COLLEGE DISTRICT FOUNDATION, INC. 23-7326612

Part1	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$ 1,216,500.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$772,743.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_		\$113,500.	Person K Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$1,000,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$250,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization DALLAS COUNTY COMMUNITY COLLEGE DISTRICT FOUNDATION, INC.

Employer Identification number 23-7326612

Part II	Noncash Property (see instructions). Use duplicate copies of l	Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
=		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	- **

ma at a	(Form 990, 990-EZ, or 990-PF) (2014)			Pi
me or o	rganization DALLAS COUNTY COMMUNITY			Employer identification number
art III	COLLEGE DISTRICT FOUNDATION Exclusively religious, charitable, etc., cor	ON INC		23-7326612
	that total more than \$1,000 for the year of following line entry. For organizations come contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	from any one com apleting Part III, en ar. (Enter this infor	ntributor. Comp nter the total of a rmation once. So	lete columns (a) through (e) and the columns (a) through (e) and the columns (a) through (e) and the columns (a) through (e) and the columns (a) through (e) and the columns (e) and the c
a) No. from Part I	(b) Purpose of gift	(c) Use of ((d) Description of how gift is held
raiti				
			·- -	
		(e) Transfer o	of gift	
	Transferee's name, address, and ZIP	+ 4	Relation	iship of transferor to transferee
) No.	(b) Purpose of gift	(c) Use of g	şift	(d) Description of how gift is held
art I				
		(e) Transfer o	of oift	
	Transferee's name, address, and ZiP -	• •	-	chin es torres sounds to
	Transferse a haine, address, and Alf		Relation	ship of transferor to transferee
Ma				
No. om art I	(b) Purpose of gift	(c) Use of g	ift	(d) Description of how gift is held
		(e) Transfer of	f gift	
	Transferee's name, address, and ZIP +	4	Relations	ship of transferor to transferee
		-	-	
			-	

rom Part I	(b) Purpose of gift	(c) Us	e of gift	(d) Description of how gift is held
	· · · · · · · · · · · · · · · · · · ·	(e) Trans	sfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relations	hip of transferor to transferee

JSA 4E1255 1,000

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

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

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

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

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

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

	(see separate instructions), the Section 501(c)(4), (5), or (6) org		, (
	e of organization DALLAS COL			Employer ide	ntification number
	LEGE DISTRICT FOUND	·		23-73	
		organization is exempt under	section 501(c) or		
1		organization's direct and indirect			
2	•		, ,		
3					<u></u>
			• • • • • • • • • • • • • • • • • • • •		
Par		organization is exempt under			
1	Enter the amount of any ex	cise tax incurred by the organization	n under section 495	5▶\$	
2	Enter the amount of any ex	cise tax incurred by organization m	anagers under secti	on 4955 ▶ \$	
3	If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		Yes No
4a	Was a correction made?				Yes No
4100000000	If "Yes," describe in Part IV.			24 250	
Par		organization is exempt under)
1		expended by the filing organization			
2		ng organization's funds contributedies			
3	Total exempt function expe	enditures. Add lines 1 and 2. En	ter here and on Fo	orm 1120-POL,	
4 5	Did the filing organization fil Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numb is. For each organization listed, en tributions received that were prom nd or a political action committee (i	er (EIN) of all section ter the amount paid	on 527 political organized from the filing organized livered to a separate po	Yes No ations to which the filing ration's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)	=======================================				, many once o
(2)				-	
(2)					
(3)					
(0)		*			_
(4)					
(5)				_	
(6)					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 Page 2 Part II-A Complete If the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's A Check ▶ name, address, EIN, expenses, and share of excess lobbying expenditures). if the filing organization checked box A and "limited control" provisions apply. B Check ▶ Limits on Lobbying Expenditures (a) Filing (b) Affiliated (The term "expenditures" means amounts paid or incurred.) organization's totals group totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying)..... 10,000. b Total lobbying expenditures to influence a legislative body (direct lobbying) 10,000. 2,718,159. 2,728,159. e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 286,408. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1s. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) 71,602. h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c | If zero or less, enter -0i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) Total beginning in) 2a Lobbying nontaxable amount 286,408 286,408. b Lobbying ceiling amount (150% of line 2a, column (e)) 429,612. c Total lobbying expenditures 10,000 10,000 d Grassroots nontaxable amount 71,602 71,602. e Grassroots ceiling amount

Schedule C (Form 990 or 990-EZ) 2014

107,403.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

for anch "Non" manages to lines to through it below mustale in Deat No	(z	1)		(b)	
for each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed lescription of the lobbying activity.	Yes	No		Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?						
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 						
c Media advertisements?		-				
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?	31 I					_
T Grants to other organizations for looplying purposes?	1 1			•		
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Railles, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities?						
j Total. Add lines 1c through 1i		L				
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	\vdash					
b If "Yes," enter the amount of any tax incurred under section 4912		-				
of If "Yes," enter the amount of any tax incurred by organization managers under section 4912	lΙ	-				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 50			-41			
501(c)(6).	-{c)(ə), -	or se	Ctior	1		
					Yes	ı
Were substantially all (90% or more) dues received nondeductible by members?				1	ļ	_
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	2.			2	<u> </u>	╙
o the production of the produc				3		<u> </u>
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5),	or se	ction) ''	٠	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	OR (b	or se) Pari	III-A	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts)	OR (b	or se	ction	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	OR (b	or se) Pari	1	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year	OR (b	or se	1	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	OR (b	or se) Parl	1 1 2a 2b	i , line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	OR (b	or se	1 1 2a 2b 2c	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	OR (b	or se	1 1 2a 2b	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	OR (b	or se	1 1 2a 2b 2c	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year?	OR (b	or se	1 1 2a 2b 2c	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	OR (b	or se	1 1 2a 2b 2c 3	, line	3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year?	OR (b	or se	11 - A 2a 2b 2c 3	, line		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	OR (b	or se	11 - A 2a 2b 2c 3	, line		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	OR (b	or se	11 - A 2a 2b 2c 3	, line		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	OR (b	or se	11 - A 2a 2b 2c 3	, line		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	OR (b	or se	11 - A 2a 2b 2c 3	, line		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dulif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	OR (b	or se	11 - A 2a 2b 2c 3	, line		

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2014 Open to Parallic Inspection

OMB No. 1545-0047

Name of the organization DALLAS COUNTY COMMUNITY Employer identification number COLLEGE DISTRICT FOUNDATION, INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) , . . Aggregate value at end of year. , Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply), Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > _____ Number of states where property subject to conservation easement is located 🕨 _____ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i), In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Schedule D (Form 990) 2014 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): а Public exhibition Loan or exchange programs b Scholarly research Other _____ Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete If the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 31,547,775. 1a Beginning of year balance 34,570,464. 32,708,635. 31,345,272. 26, 176, 865. b Contributions 1,436,659. 86,625. 97,556. 613,612. 691,809. c Net investment earnings, gains, 2,379,548. and losses -425,710. 3,306,892. 1,379,349. 363. d Grants or scholarships 370,698. 352,712. 1,318,320. 629,598. e Other expenditures for facilities and programs -2,600. 130 -16,245.-26,438.f Administrative expenses 2,335,889. 35,231,301. 34,570,464. 31,547,775. 32,708,635. g End of year balance, 26,895,475. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: ■ Board designated or quasi-endowment ► ____.0300 % b Permanent endowment > 76.2600 % c Temporarily restricted endowment ▶ 23.7100 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: No (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Part VI (a) Cost or other basis Description of property (b) Cost or other basis (other) (c) Accumulated (d) Book value (investment) depreciation 1a Land b Buildings d Equipment Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" to Form 990), Part IV, line 11b. See Form 990, Part X, line 12	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	al derivatives			
(2) Closely	-held equity interests			
				_
(A)				
(B)				
(C)				
(F)				
(G)				
(H)			-	
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VII				
	Complete if the organization answered *		, Part IV, line 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation; Cost or end-of-year market value	
743		- -	Soot of one-or-your market value	
(1)				
(2)				
(3)				
(4)	CHI CHI CHI CHI CHI CHI CHI CHI CHI CHI			
(5)				
(6)				
<u>(7)</u>				
(8)				
(9)				
A COLUMN TO SHARE THE PARTY OF	(b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>	
Part IX	Other Assets. Complete if the organization answered "	Yes" to Form 990,	, Part IV, line 11d. See Form 990, Part X, line 15.	
	(a) Desc		(b) Book value	
(1)				
(2)				-
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line	15.)	· · · · · · · · · · · · · · · · · · ·	
Part X	Other Liabilities. Complete if the organization answered " line 25.	Yes" to Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,	
1.	(a) Description of liability	(b) Book value	6	
(1) Federa	i income taxes			
(2) PAYAB	LE TO RELATED	317,9	971.	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 25.)	317,9		
	, , , , , , , , , , , , , , , , , ,			

0169259

PAGE 31

Schedule D (Form 990) 2014 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 4,396,640. Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments -2,930,3442a Donated services and use of facilities 627,379. Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d -2,302,965. Subtract line 2e from line 1 6,699,605. Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 6,699,605. Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 3,540,936. Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 627,379 2a Prior year adjustments Other losses 2c Other (Describe in Part XIII.) Add lines 2a through 2d 627,379. 2e Subtract line 2e from line 1 2,913,557. Amounts included on Form 990, Part IX, line 25, but not on line 1: a investment expenses not included on Form 990, Part VIII, line 7b. 4a b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 2,913,557. Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIII Supplemental Information (continued)

ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

FUNDS ARE USED TO ENHANCE THE LEVEL OF ACHIEVEMENT AND EXCELLENCE OF THE DALLAS COUNTY COMMUNITY COLLEGE DISTRICT (DCCCD) BY PROVIDING SCHOLARSHIPS, SUPPORTING THE PROFESSIONAL DEVELOPMENT OF FACULTY AND STAFF, AND FOSTERING INNOVATION IN THE EDUCATIONAL PROGRAMS OF THE DCCCD.

FIN 48 (ASC 740) FOOTNOTE

SCHEDULE D, PART X, LINE 2

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501 (A) OF THE INTERNAL REVENUE CODE (THE 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 FISCAL YEARS 2015 AND 2014. THEREFORE, THE FOUNDATION HAS MADE NO PROVISION FOR FEDERAL INCOME TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS. ACCORDINGLY, CONTRIBUTIONS TO THE FOUNDATION ARE TAX DEDUCTIBLE WITHIN THE LIMITATIONS PRESCRIBED BY THE CODE. THE FOUNDATION HAS ALSO BEEN CLASSIFIED AS A PUBLICLY-SUPPORTED ORGANIZATION WHICH IS NOT A PRIVATE FOUNDATION UNDER SECTION 509 (A) OF THE CODE.

THE FOUNDATION APPLIES THE PROVISIONS OF FASB ASC TOPIC 740, INCOME
TAXES, WHICH PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE
FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION
TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. FASB ASC TOPIC 740 ALSO
PROVIDES GUIDANCE ON DE-RECOGNITION, CLASSIFICATION, INTEREST AND

Schedule D (Form 990) 2014

Page 5

Part XIII Supplemental Information (continued)

PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE, AND TRANSITION. THE FOUNDATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE FEDERAL INCOME TAX RETURNS OF THE FOUNDATION FOR YEARS 2011 THROUGH 2013 ARE STILL SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED.

SCHEDULE I (Form 990)

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

OMB No. 1545-0047 2014

Open to Public Inspection

Name of the organization Department of the Treasury Internal Revenue Service COLLEGE DISTRICT FOUNDATION, INC. DALLAS COUNTY COMMUNITY ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer Identification number 23-7326612

Talle General Information on Grants and Assistance	and Assistanc	6					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	substantiate th	e amount of the	grants or assista	nce, the grantees	eligibility for the grant	ts or assistance, and]
	ants or assistance	197		The state of the s			X Yes No
Lescribe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for mor	ittoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization at Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Domestic Or t that received	ganizations and more than \$5	nd Domestic Gov ,000. Part II can b	vernments. Com the duplicated if a		the organization answered "Yes" to Form 990, al space is needed.	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) RC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)		:					
(2)							
(3)							
(4)							
(5)							
(6)							
(7)		-					
(8)							
(9)							
(10)							
(11)							
(12)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	and governmen is listed in the li	ne 1 table	listed in the line 1 t	Φ 		V V	

4E12881.000 4520JC 701F 1/4/2016

Schedule I (Form 990) (2014)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 RISING STAR SCHOLARSHIPS	2,577.	152,380.			
2 NON-RISING STAR SCHOLARSHIPS	845.	902,236.			
3 PROFESSIONAL DEVELOPMENT	7,000.	1,663,549.			
4					
UN.					
on on					
7					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	s part to prov	ide the informat	ion required in	Part I, line 2, Part III,	column (b), and any other additional

SCHEDULE I, PART I, LINE 2

ALL SCHOLARSHIPS GRANTED BY THE FOUNDATION HAVE ESTABLISHED CRITERIA WITH

MINIMUM ELIGIBILITY REQUIREMENTS. FINANCIAL AID OFFICES AT THE SEVEN

COLLEGES CONFIRM ELIGIBILITY REQUIREMENTS ARE MET. FOUNDATION STAFF ALSO

REVIEW SCHOLARSHIP APPLICANTS' ELIGIBILITY AND CONFIRM FINANCIAL AID

OFFICE REVIEW. PAYMENT FOR GRANT EXPENDITURES ARE PROCESSED ONLY AFTER

REVIEW AND APPROVAL OF THE GRANT MANAGER, COLLEGE PRESIDENT, IF REQUIRED

BY THE GRANT CRITERIA, AND THE FOUNDATION DIRECTOR OF FINANCE AND

BUSINESS OPERATIONS.

Schedule I (Form 990) (2014)

)	SCHEDULE
ii oo aabaaaaa ii	reurorad "Ves" on Earn 000 Dad II		8 1 (FORTI 890) (2014)

(a) Type of grant or assistance (b) Number of recipients	nber of (c) Amount of ients cash grant	(d) Amount of non-cash assistance	(a) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
N				
ယ				
4				
Ch				
6				
7				
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, information.	to provide the inform	ation required in	Part I, line 2, Part III,	Part III, column (b), and any other additional

SCHEDULE I, PAGE 4, PART III, COLUMN B

AN INDETERMINABLE NUMBER OF FACULTY AND STAFF RECEIVED DIRECT AND

INDIRECT SUPPORT FROM GRANT ACTIVITIES DUPING AN ACADEMIC YEAR; WE HAVE

ESTIMATED THE NUMBER AS 7,000 BASED ON THE NUMBER PROFESSIONALS AT THE

DALLAS COUNTY COMMUNITY COLLEGE DISTRICT.

0169259

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2014
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

DALLAS COUNTY COMMUNITY

Employer Identification number

COLLEGE DISTRICT FOUNDATION, INC.

23-7326612

FORM 990 REVIEW

FORM 990, PART VI, LINE 11B

THE IRS FORM 990 IS REVIEWED BY THE DIRECTOR OF FINANCE AND BUSINESS OPERATIONS. THE EXECUTIVE DIRECTOR OF THE FOUNDATION INDICATES APPROVAL OF FORM 990 BY SIGNING ON PART II OF THE FORM. THE BOARD AUDIT COMMITTEE CHAIR WILL REVIEW THE FORM PRIOR TO ITS SUBMISSION TO THE IRS. AFTER REVIEW, FORM 990 WILL BE MADE AVAILABLE TO EACH VOTING MEMBER OF THE FOUNDATION'S BOARD OF DIRECTORS VIA THE FOUNDATION'S WEBSITE.

CONFLICT OF INTEREST POLICY

FORM 990, PART VI, LINE 12C

ON AN ANNUAL BASIS, ALL BOARD MEMBERS MUST SIGN A CONFLICT OF INTEREST STATEMENT DISCLOSING ANY POTENTIAL CONFLICT OF INTEREST.

GOVERNING DOCUMENTS

FORM 990, PART VI, LINE 19

THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE FOUNDATION'S FINANCIALS AND FORM 990 ARE

POSTED ON THE FOUNDATION'S WEBSITE, WWW.FOUNDATION.DCCCD.EDU.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE FOUNDATION ENHANCES THE LEVEL OF ACHIEVEMENT AND EXCELLENCE OF
THE DALLAS COUNTY COMMUNITY COLLEGE DISTRICT (DCCCD) BY PROVIDING
SCHOLARSHIPS, SUPPORTING THE PROFESSIONAL DEVELOPMENT OF FACULTY AND
STAFF, AND FOSTERING INNOVATION IN THE EDUCATIONAL PROGRAMS OF THE

Schedule O (Form 990 or 990-EZ) 2014

Pag∈ 2

Name of the organization

DALLAS COUNTY COMMUNITY

Employer Identification number

COLLEGE DISTRICT FOUNDATION, INC.

ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

DCCCD.

Department of the Treasury

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

> Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. I► Attach to Form 990.

Name of the organization DALLAS COUNTY COMMUNITY

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public laspection

OMB No. 1545-0047

2014

Employer identification number

(1) DALLAS COUNTY COMMUNITY COLLEGE DISTRICT Part II 6) (5) (3) (2) 3 **a** 9 4 (2) PartI COLLEGE DISTRICT FOUNDATION, INC. 6 ω 3 1601 SOUTH LAMAR ST Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Name, address, and EIN of related organization (a)
Name, address, and EiN (if applicable) of disregarded entity DALLAS, TX 75215-1816 75-1213149 EDUCATIONAL Primary activity 0 Primary activity X Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) 170B Exempt Code section ê Public charity status (if section 501(c)(3)) (d) Total income 9 N/A (e) End-of-year assets (f)
Direct controlling 23-7326612 Direct controlling entity Section 512(b)(13) Yes entity? Z ×

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

JSA 4E1307 1.000

4520JO 701F 1/4/2016

7:56:33 AM V 14-7.8F

0169259

PAGE 40

Schedule R (Form 990) 2014

Part III

(1)	(6)	(5)		(4)		(3)	(2)	(1)			(a) Name, address, and E(N of related organization	"	Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990. Part IV.	(2)	(6)		(5)		(4)	3	(2)	(1)		(a) Name, address, and EIN of related organization
											of related organization	one or more relat	ed Organizations											(b) Primary activity
							i		-			ed organ	Taxable											Legal Legal domicile (state or foreign
										o Allingi y archity	(b)	izations treate	as a Corporat											(d) Direct controlling entity
												dasac	ion or T											incor uncor excl
										(state or foreign country)	(c)	orporation	rust Com											Predominant income (related, unrelated, excluded from tax under sections \$12.514)
											(d)	or trust during	plete if the org											Share of total income
										(C corp., S corp., or trust)	(•)	the tax year.	anization answe											(g) Share of end-of- year assets
										income	(3)		red "Yes"	 +	 +		+	-	+				Yes No	(h) Disproportenate allocations?
			_							end-of-year assets			on Form 990.											(i) Code V-J/B! amount in box 20 of Schedule K-1 (Form 1085)
		-		+	_	1	1	+		ets owner	<u> </u>	!	Part IV	+	+	_	+	•	1				Yes No	(j) General or managing partner?
						+	 +		Yes No	ownership controlled	3													(k) Percentage ownership

JSA 4E1308 1.000

N-10-1-1-1

Schedule R (Form 990) 2014

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

0) 2014	Schedule R (Form 990) 2014	redule F	Sch		1.000	SA E1309 1.000
:						6
						5
						•
						3)
						2)
		VME	627, 379.	0	DALLAS COUNTY COMMUNITY COLLEGE DISTRICT	3
H ining	(d) Method of determining amount involved	Meth ar	(e) Amount involved	(b) Transaction type (a-s)	(a) Name of related organization	
	thresholds.	action t	ng covered relationships and transaction thresholds	his line, including cove	in the disswer to differ the process the second is the instructions for mioritation on who must complete this line, include	
×	15				Ciner cansier or cash or property from related organization(s).	ه ا
×	:	*			Other transfer of cash or property to related organization(s)	
		8		×		
×	a	6 2			Reimbursement paid by related organization(s) for expenses	Ð
×	1				Reimbursement paid to related organization(s) for expenses.	ਰ
×	10		(a) 30 (a) (a) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	50 0 00 00 00 00 00 00 00 00 00 00 00 00	Shahing of paid emproyees with related organization(s)	•
×	+-				Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	
×	1m			CALLS ASSESSED.	m Performance of services or membership or fundraising solicitations by related organization(s).	3
×	=			AND THE SAME	Performance of Services or membership or fundraising solicitations for related organization(s)	-
×	: 1k	9			Lease of facilities, equipment, or other assets from related organization(s)	· ×
		2				
×	<u>-</u> :				Lease of facilities, equipment, or other assets to related organization(s)	-
× ×	: = =				Exchange of assets with related organization(s)	
- - >	- - - - - -	(0)	(9) 8 (0)(0)(0)(0)(0)	\$500 See 1850 Williams	Purchase of assets from related organization(s)	
: ×	: =	E. 1232	STATES STATES		Sale of assets to related organization(s)	
; ;					Dividends from related organization(s)	-
×	ē	(*)			Loans or loan guarantees by related organization(s)	0
×	id.	. 20000000			Loans or loan guarantees to or for related organization(s)	
×	i 1c				Giff, grant, or capital contribution from related organization(s)	
×	1 b	* * * * *			Gift, grant, or capital contribution to related organization(s)	
×	<u>1</u>			************	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	
			ited in Parts II-IV?	related organizations lis	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	
Yes No	Υ.				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	Note

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

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

						and the same						
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share or	(g) Share of	Diapro	(h) Disproportionate	(I) Code V - UBI	Genera Genera	역	(k) Percentage
				501(c)(3) organizations?	total income	assett.	allo	allocations?	of Schedule K-1 (Form 1065)	partner?	1917 1917	ownership
(1)			sections 512-514)	Yes No			Yes	Z		Yes	N O	
												•
(2)								7				
(3)				1				T				
									18			
(4)												
(5)							T	Ť				
(6)												
(7)						:						
(8)												
(9)												
(10)												
(11)											:	
(12)			!									
(13)												
(14)												
(15)												
(16)												

JSA 4E1310 1.000

Schedule R (Form 990) 2014

Part VII. Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).