PUBLIC INSPECTION COPY

Form **990**

Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

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

, 2018, and ending

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

, 2019

В	Check it	f applicable:	С				D Employ	er identif	ication number	
	Ad	dress change	Galveston Colleg	e Foundation			76-	05122	266	
	Na	me change	4015 Avenue Q				E Telepho	one numbe	er	
	Init	tial return	Galveston, TX 77	550			409	-944-	-1303	
	Fina	al return/terminated								
	Am	nended return					G Gross r	eceipts \$	7,826	,630.
	Ар	plication pending	F Name and address of principa	officer: Jeri Kinnear		H(a) Is this a group retur			X No
			Same As C Above	ocii kiincai		H(b) Are all subordinates If "No," attach a list	included	? Yes	No
ī	Tax-e	exempt status:	X 501(c)(3) 501(c) () ◄ (insert no.) 49	47(a)(1) or	527	ii No, attacira iist	. (see msi	tructions)	
J		· · · · · · · · · · · · · · · · · · ·	w.gc.edu	· , , , ,	, , , , ,	H(c) Group exemption n	umber ►		
K	Form	of organization:	X Corporation Trust	Association Other ►	L Year o	f formation:	1996 M s	State of le	gal domicile: TX	,
Pa	rt I	Summar		L-I	I.					
				ion or most significant activ	ities:The Ga	alvest	on College	Four	ndation	
au				hance the ability						
SIC.		mission	of advancing peo	ple's lives throu	gh lifeld	ng le	arning.			
Activities & Governance							- – – – – – .			
ŏ	2	Check this bo		n discontinued its operation					ets.	
∾ত	3			rning body (Part VI, line 1a) s of the governing body (Pa				3		16
es	5			s of the governing body (Fa n calendar year 2018 (Part \				5		16
₹	6		. ,	necessary)				6		16
Act	7a			Part VIII, column (C), line 1				7a		0.
				from Form 990-T, line 38				7b		0.
							Prior Year		Current Y	ear
Φ				1h)			3,226,7	757.	222	,331.
Revenue				e 2g)						
eve				A), lines 3, 4, and 7d)		L	789,5		742	,871.
<u> </u>				nes 5, 6d, 8c, 9c, 10c, and				591.	0.65	
				(must equal Part VIII, colur			4,021,9			,202.
				IX, column (A), lines 1-3)		-	295,4	124.	2,587	<u>,045.</u>
			•	X, column (A), line 4)		L-				
S	15			e benefits (Part IX, column		-				
Expenses	16a	Professional	fundraising fees (Part IX,	column (A), line 11e)						
×be	b	Total fundrais	sing expenses (Part IX, co	lumn (D), line 25) ►	5,5	540.				
ш	17	Other expens	ses (Part IX, column (A), li	nes 11a-11d, 11f-24e)			103,7	748.	169	,916.
	18	Total expens	es. Add lines 13-17 (must	equal Part IX, column (A), I	ine 25)		399,1	72.	2,756	,961.
	19	Revenue less	expenses. Subtract line 1	8 from line 12			3,622,8	300.	-1,791	,759.
ets or							Beginning of Currer	nt Year	End of Ye	
sets alan	20		·				17,469,5	533.	15,333	,544.
Net Asse Fund Bal	21	Total liabilitie	es (Part X, line 26)					0.	4	<u>,</u> 961.
		Net assets or	fund balances. Subtract I	ine 21 from line 20			17,469,5	533.	15,328	,583.
Pa	rt II	Signatur	e Block							
Unde	er penalt	ties of perjury, I de	eclare that I have examined this return (other than officer) is based on	urn, including accompanying schedule all information of which preparer has	es and statements	, and to the	best of my knowledge	and belie	f, it is true, correct	, and
	picto. Bo	l			uny knowledge.		1			
٠.		Signatu	<u>ectronically Fil</u> ire of officer	<u>ka</u>			Date			
Siç He	gn									
пе	re		i Kinnear print name and title				Board Chai	r		
		71	preparer's name	Preparer's signature	Date	<u> </u>		., E	PTIN	
_	•		·	Barbara Murph		/8/20	Check _	」 "		
Pa			ra Murphy	<u> </u>	-y 5,	0/20	self-employ	eu l	201386215	
	epare e On	1	<u> </u>				Figure 1 - F/81	> 70	0260060	
US	C OII	Firm's addre	<u> </u>				Firm's EIN		0269860	20
Mar	v the II	RS discuss th	Houston, TX	77027-5132 shown above? (see instruc	tions)		Phone no.	(713) 439-573 X Yes	No No
ivid	y ui⊏ li	1 10 UISCUSS II	na return with the preparet	SHOWIT ADOVE: (SEE ITISHIUC	110113 <i>)</i>				177 162	INO

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 2,592,583.

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

Form 990 (2018) Galveston College Foundation Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		X
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L. Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
ä	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	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		Х
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 conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part l</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
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			· L
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
ЗАА		_		(2018)

Form 990 (2018) Galveston College Foundation

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

			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
	If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			37
	services provided to the payor?	7 a		X
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
8	Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 h		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	ıza		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If 'Yes,' complete Form 4720, Schedule O.	10		21

Maria Tripovich 4015 Ave O

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

Galveston TX 77550 409-944-1303

	Form 990 (2018)	Galveston	College	Foundation
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

		(C)								
(A) Name and Title	(B) Average hours per	thar	one Ì both dire	box, an o ector/	unles officer truste		on	(D) Reportable compensation from	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Jeri Kinnear	1									
Chair	0	Χ		Χ				0.	0.	0.
(2) Donna Lang	1									
Vice Chair	0	Χ		X				0.	0.	0.
(3) Lauren Suderman Millo	1									
Treasurer	0	Х						0.	0.	0.
(4) Garrik Addison	1									
Member	0	Χ						0.	0.	0.
(5) Frank Benavidez	1									
Member	0	Χ						0.	0.	0.
(6) Armin Cantini	1									
Member	0	Χ						0.	0.	0.
(7) Paulie Gaido	1									
Member	0	Χ						0.	0.	0.
(8) Carol Hodges	1									
Member	0	Χ						0.	0.	0.
(9) Peaches Kempner	1									
Member	0	Χ						0.	0.	0.
(10) Tikie G. Kriticos	1									
Member	0	Χ						0.	0.	0.
(11) Robert Lynch	1									
Member	0	Χ						0.	0.	0.
(12) David Marshall	1									
Member	0	Х						0.	0.	0.
(13) Keith McFatridge	1									
Member	0	Х						0.	0.	0.
(14) Victor Pierson	1									
Member	0	X						0.	0.	0.

Part VII Section A. Officers, Directors, Tru		Key	Еm			es,	and	d Highest Com	pensated Emp	loyees	(contii	nued)
	(B)			((•							
(A)	Average hours	(do	not c	check	more	than	one h an	(D)	(E)	_	(F)	
Name and title	per week	offic	cer ar	nd a d	direct	or/trus	tee)	Reportable compensation from the organization	Reportable compensation from related organizations	amo	stimated unt of oth	
	(list any hours	or d	listi	Officer	Key	High	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	f	ipensatio rom the janizatioi	
	for related	Individual or director	utio	cer	emp	lest o	ner			ar	d related anization	1
	organiza - tions	DE EX	nal t		Key employee	omp				0.9	aa	.0
	below dotted	Individual trustee or director	nstitutional trustee		ð	Highest compensated employee						
	line)		ਲੱ			ated						
(15) Fred Raschke	1											
Member	0	X						0.	0.			0.
(16) Victor Sierpina	1											
Member	0	Х						0.	0.			0.
(17)												
(18)												
40												
(19)		-										
(20)												
(21)												
		1										
(22)												
(23)												
(0.0)												
(24)												
(25)												
(25)		•										
1 b Sub-total								0.	0.	<u> </u>		0.
c Total from continuation sheets to Part VII, Section	on A							0.	0.			0.
d Total (add lines 1b and 1c).								0.	0.			0.
2 Total number of individuals (including but not limited	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
from the organization • 0											T., I	
											Yes	No
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc.	tor, or tru h <i>individu</i>	stee, ial	key	em/	ploy	/ee,	or h	nighest compensati	ted employee	3		X
												71
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportab er than \$1	1e co 50,00	mpe 00?	ensa If '\	ition /es,	and com	otn <i>ple</i>	te Schedule J for	rom			
such individual										. 4		X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e comper	satio	n fr	om	any	unre	late	ed organization or	individual	. 5		X
Section B. Independent Contractors	, compre		<i>31100</i>	iaic	3 10	7 340	<i>,,,</i> ,	C13011		. •	<u> </u>	
1 Complete this table for your five highest compensations.	sated inde	epen	dent	t cor	ntra	ctors	tha	t received more th	nan \$100,000 of			
compensation from the organization. Report compen		tne c	aien	dar <u>i</u>	year	enai	ng v	1			<u>~`</u>	
(A) Name and business address (B) Description of services									of services	Compe	C) :nsatio	n
2 Total number of independent contractors (including b		ited to	o the	se I	isted	l abo	ve)	who received more	than			
\$100,000 of compensation from the organization	0											

76-0512266 Form 990 (2018) Galveston College Foundation Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (A) Total revenue (B) (D) Related or Unrelated Revenue exempt excluded from tax business under sections 512-514 function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues..... 1 b c Fundraising events..... 1 c **d** Related organizations..... 1 d e Government grants (contributions) 1 e **f** All other contributions, gifts, grants, and similar amounts not included above . . . 222,331 g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f..... 222,331 **Business Code** Program Service Revenue b f All other program service revenue. . . g Total. Add lines 2a-2f Investment income (including dividends, interest and 722,687 722,687. Income from investment of tax-exempt bond proceeds... Royalties..... (i) Real (ii) Personal 6a Gross rents..... **b** Less: rental expenses c Rental income or (loss) . . . **d** Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 6,881,612 **b** Less: cost or other basis and sales expenses 6,861,428 c Gain or (loss)..... 20,184. d Net gain or (loss)..... 20,184 20,184. 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18..... **b** Less: direct expenses **b** c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19..... a **b** Less: direct expenses b c Net income or (loss) from gaming activities..... 10a Gross sales of inventory, less returns and allowances a **b** Less: cost of goods sold..... **b** c Net income or (loss) from sales of inventory..... Miscellaneous Revenue **Business Code** C

965,202

0

0

742,871

Section 501(c)(3) and 501(c)(4)	organizations must complete	all columns. All other organizations r	nust complete column (A).
---------------------------------	-----------------------------	--	---------------------------

Do i	not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b,	7b, 8b, 9b, and 10b of Part VIII.	rotal expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,321,152.	2,321,152.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	265,893.	265,893.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	200,030.	1007030.		
4 5	Benefits paid to or for members	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
	Legal				
	: Accounting				
	I Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	93,529.		93,529.	
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	63,060.		63,060.	
13	Office expenses	13,327.	5,538.	2,249.	5,540.
14	Information technology				5/5-51
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).				
a					
k	,				
c	;				
C	!				
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,756,961.	2,592,583.	158,838.	5,540.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing.	20,107.	1	39,610.
	2	Savings and temporary cash investments.	=, = = ;	2	486,742.
	3	Pledges and grants receivable, net	1,563,271.	3	38,561.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined 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		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation		10 c	
	11	Investments – publicly traded securities.	13,926,311.	11	14,768,631.
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	17,469,533.	16	15,333,544.
	17	Accounts payable and accrued expenses		17	4,961.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	D.	25	
	26	Total liabilities. Add lines 17 through 25.	. 0.	26	4,961.
ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	== -,	27	155,628.
Bal	28	Temporarily restricted net assets.		28	4,476,807.
Þ	29	Permanently restricted net assets	11,294,780.	29	10,696,148.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
fet	33	Total net assets or fund balances	= 1 / 200 / 000 1	33	15,328,583.
_	34	Total liabilities and net assets/fund balances.	17,469,533.	34	15,333,544.

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI.							
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9	65,2	202.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,7	56,9	961.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-:	1,7	91,7	759.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	7,4	69,5	533.		
5	Net unrealized gains (losses) on investments	5				91.		
6	6 Donated services and use of facilities							
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.		
10								
Pa	rt XII Financial Statements and Reporting	·		, -				
	Check if Schedule O contains a response or note to any line in this Part XII							
	chook in concease of containing a responder of motor to any line in the restriction.			1	Yes			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				.03			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.								
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?								
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis								
ı	b Were the organization's financial statements audited by an independent accountant?			2b	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both: X Separate basis	ite						
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?							
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
3	3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
ı	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b				
BAA	TEEA0112L 08/03/18		·	orm	990 ((2018)		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Galveston College Foundation 76-0512266 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	Section A. Public Support										
begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	3,288,369.	558,257.	940,640.	3,226,757.	222,331.	8,236,354.				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.				
4	Total. Add lines 1 through 3	3,288,369.	558,257.	940,640.	3,226,757.	222,331.	8,236,354.				
	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)						5,786,225.				
6	Public support. Subtract line 5 from line 4						2,450,129.				
Sec	tion B. Total Support						<u> </u>				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
7	Amounts from line 4	3,288,369.	558,257.	940,640.	3,226,757.	222,331.	8,236,354.				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	329,130.	457,748.	384,327.	552,814.	722,687.	2,446,706.				
9	Net income from unrelated business activities, whether or not the business is regularly carried on		, ,	,	, , ,	,	0.				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI				5,691.		5,691.				
11	Total support. Add lines 7 through 10						10,688,751.				
12	Gross receipts from related activ	vities, etc. (see ins	tructions)			12	0.				
13	First five years. If the Form 990 is organization, check this box and	for the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sectio	n 501(c)(3)	▶ □				
Sec	tion C. Computation of Pu										
	Public support percentage for 20	•	• •				22.92%				
15	Public support percentage from	2017 Schedule A,	Part II, line 14			15	32.38 %				
16a	33-1/3% support test—2018. If t and stop here. The organization	he organization di qualifies as a pub	d not check the bolicly supported or	ox on line 13, an ganization	d line 14 is 33-1/3	% or more, check	k this box				
b	33-1/3% support test—2017. If the and stop here. The organization	ne organization dic I qualifies as a pul	not check a box plicly supported or	on line 13 or 16a	a, and line 15 is 33	3-1/3% or more, o	check this box				
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	test, check this	box and stop her	e. Explain in Par	t VI how				
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	s' test, check this tion qualifies as	box and stop her a publicly support	e. Explain in Par ed organization.	t VI how the▶				
18	Private foundation. If the organi	zation did not che	ck a box on line 1	3, 16a, 16b, 17a	, or 17b, check thi	s box and see in	structions ►				

76-0512266

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. (11.)			
Calend	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						•
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1		
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·				
	tion C. Computation of Pul					, ,	
	Public support percentage for 20	•			•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					1 1	
17	Investment income percentage for	•	• • •	-			0,0
18	Investment income percentage fi						%
	33-1/3% support tests—2018. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐
	33-1/3% support tests—2017. If t line 18 is not more than 33-1/3% Private foundation. If the organization of the organizat	, check this box	and stop here. The	e organization qu	ialifies as a public	ly supported organ	nization ►

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			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		
За	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		
С	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 12a or 12b 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		
С	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		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
0 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Pa	it iv Supporting Organizations (continued)			
-11	Lies the averagination accorded a gift or contribution from any of the following necessary		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
1	Did the directors trustees or membership of one or more supported examinations have the negative to regularly appoint.		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
	Г		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations		1	
	r		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struc	tions)	
	The organization supported a governmental oriting become in Part 17 non-year supported a government oriting (see in	-		
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i>	3b		

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anizat	tions	3
1	Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organization	st on No	ov. 20, 1970 (explain in st complete Sections A	n Part VI). See through E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	ction B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
- 1	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ction C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally int (see instructions).	egrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2018

10 Line 8 amount divided by line 9 amount

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
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Schedule A (Form 990 or 990-EZ) 2018

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

Part II, Line 10 - Other Income

Part II, Line 17a - 10% Facts and Circumstances Test - Current Year

Galveston College Foundation (the Foundation) submits that throughout its existence to date and in the future, it qualifies as a public charity under Internal Revenue Code \$509(a)(1) by satisfying the requirements of Regulations \$1.170A-9(f)(3) as follows:

- (i) Ten Percent Test: The Foundation has historically and normally can be expected in the future to receive over 10% of its total support from the general public.
- (ii) Attraction of Public Support: The Foundation provides access to higher education for students in the greater Galveston area. Because of its commitment to education of local students that will stay in the area, it has to date attracted gifts from individuals, corporations, and foundations with ties to the community. Through the Foundation's annual appeals, a broad constituency of approximately 2,700 potential donors is reached.
- (iii) Sources of Support: The Foundation historically has received support from a broad representative number of foundations and individuals, rather than receiving almost all of its support from the members of a single family or small group of individuals. During fiscal year 2019, the Foundation received contributions from 82 unique donors.

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

Part II, Line 17a - 10% Facts and Circumstances Test - Current Year (continued)

- (iv) Representative Governing Body: The Foundation's governing body is composed of 13 area civic and business leaders. The majority of the board members are not significant donors or disgualified persons.
- (v) Availability of Facilities or Services and Public Participation: The Foundation's programs impact the students of the Galveston community and surrounding areas. During fiscal year 2019, a total of 344 students received financial assistance from the Foundation. See Form 990, Part III and Schedule I for details.

CONCLUSION: The Foundation believes it qualifies as a publicly supported charity described in IRC §509(a)(1) pursuant to the facts and circumstances test found in Treasury Regulation §1.170A-9(f)(3). The Foundation has and will continue to receive well in excess of ten percent (10%) of its total support from qualifying public sources. It serves all Galveston area high school students. The Foundation is governed by a public board and possesses all the characteristics that describe organizations that meet this test.

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

Department of the Treasury Internal Revenue Service

Name of the organization

PUBLIC DISCLOSURE COPY

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

Galveston College Foundation		76-0512266				
Organization type (check one):		·				
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a priv	vate foundation				
	501(c)(3) taxable private foundation					
Check if your organization is covered by the General	Rule or a Special Rule.					
Note: Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a S	Special Rule. See instructions.				
General Rule						
X For an organization filing Form 990, 990-EZ property) from any one contributor. Comple	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
under sections 509(a)(1) and 170(b)(1)(A)(vi)	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supported that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000; or (20-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that				
during the year, total contributions of more	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 for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III.					
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, contributions <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year						
990-PF), but it must answer 'No' on Part IV, lin	the General Rule and/or the Special Rules doesn't file Scheo le 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	990-EZ or on its Form 990-PF,				

BAA 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) (2018)

1

Employer identification number

Galveston College Foundation

76-0512266

Part I	Contributors (see instructions).	Use duplicate copies of Part	I if additional space is needed.
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(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$40,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$58,586.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>5,500</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$18,037.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
7		\$ <u>7,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
8		\$ <u>11,937.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
9		\$ <u>8,765.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
<u>10</u> _		\$ <u>15,118.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

1

Name of organization Employer identification number

Galveston College Foundation

76-0512266

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>N/A</u>			
	 	· · ·	
(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
		;	

Name of organization Galveston College Foundation Employer identification number

76-0512266

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)					
	contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional		ee instruction	s.) * \$N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	the above of the section of the section of					
	Transferee's name, addres	s, and ZIP + 4	Keia	tionship of transferor to transferee		
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee		
	L		-			
			 -			
	1					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

	Galveston College Foundation	n		76-0512266
Par	Organizations Maintaining Dono Complete if the organization answ	r Advised Funds or Other S vered 'Yes' on Form 990, Pa	imilar Funds or A	
1 2 3 4	Total number at end of year	(a) Donor advised funds	5 (b) Funds and other accounts
5	Did the organization inform all donors and don are the organization's property, subject to the	organization's exclusive legal contr	ol?	Yes No
	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	of the donor or donor advisor, or f	or any other purpose	conferring
Par	Conservation Easements. Complete if the organization answ	vered 'Yes' on Form 990, Pa	art IV, line 7.	
2	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., re Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization hast day of the tax year.	ecreation or education)	reservation of a historeservation of a certification	rically important land area fied historic structure
ŀ	Total number of conservation easements Total acreage restricted by conservation easer Number of conservation easements on a certif	nents	2b	
3	Number of conservation easements included in structure listed in the National Register		2 d	
4 5 6	Number of states where property subject to consecute Does the organization have a written policy regard enforcement of the conservation easement Staff and volunteer hours devoted to monitoring, in	garding the periodic monitoring, instanting the periodic monitoring the periodic monitoring instanting the periodic monitoring the periodic monitoring instanting the periodic monitoring in the periodic monitoring monitoring in the periodic monitoring in the periodic monitoring monitoring in the periodic monitoring monitor		Yes No
7	Amount of expenses incurred in monitoring, inspe ▶\$			
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote t conservation easements.	conservation easements in its revenu to the organization's financial states	ue and expense staten ments that describes	nent, and balance sheet, and the organization's accounting for
Par	Organizations Maintaining Collection Complete if the organization answ	ctions of Art, Historical Trea vered 'Yes' on Form 990, Pa	asures, or Other art IV, line 8.	Similar Assets.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	d for public exhibition, education, or	research in furtherance	ement and balance sheet works of e of public service, provide,
ŀ	of the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items: (i) Revenue included on Form 990, Part VIII,	r public exhibition, education, or rese ine 1	arch in furtherance of	public service, provide the
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, h amounts required to be reported under SFAS	storical treasures, or other similar as	sets for financial gain,	
	Revenue included on Form 990, Part VIII, line	, ,		

Part III Organizations Mainta	ining Collection	s of Art, Historic	al Treasures, or O	tner Similar Asse	ets (continue	<i>∍a)</i>
3 Using the organization's acquisition items (check all that apply):	, accession, and othe	er records, check any o	of the following that are a	a significant use of its o	ollection	
a Public exhibition		d Loan or e	xchange programs			
b Scholarly research		e Other				
c Preservation for future gener	ations					
4 Provide a description of the organiz Part XIII.	ation's collections an	d explain how they fur	ther the organization's e	xempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather th	nan to be maintaine	d as part of the orga	nization's collection?		Yes	No
Part IV Escrow and Custodia line 9, or reported an	I Arrangements amount on Forn	. Complete if the n 990, Part X, line	organization answ e 21.	ered 'Yes' on For	m 990, Part	IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian or o	ther intermediary for	contributions or other	assets not included	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII and con	mplete the following	table:			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a	mount on Form 990	, Part X, line 21, for	escrow or custodial ac	count liability?	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII. Check	here if the explanation	on has been provided o	on Part XIII		1
						_
Part V Endowment Funds. C	omplete if the o	rganization answ	ered 'Yes' on Forn	n 990, Part IV, lin	e 10.	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years	back
1 a Beginning of year balance	17,243,185	. 13,134,526	. 11,226,328.	10,328,939.	7,551,	$\overline{116.}$
b Contributions	218,380			706,491.	3,147,	
• Not investment cornings, going	•	, ,	,	,	, ,	
c Net investment earnings, gains, and losses	317,737	. 1,178,674	. 1,336,623.	439,923.	-369,	677.
d Grants or scholarships	2,606,347			249,025.		
e Other expenditures for facilities and programs	2,000,017	2307121	23071021	0.		
f Administrative expenses						
q End of year balance	15,172,955	. 17,243,185	. 13,134,526.	11,226,328.	10,328,	939.
2 Provide the estimated percentage						
a Board designated or quasi-endowm	-	%	<i>、</i>			
b Permanent endowment ►	70.49%					
c Temporarily restricted endowmer		51 %				
The percentages on lines 2a, 2b, an						
3 a Are there endowment funds not in torganization by:					Yes	No
(i) unrelated organizations					3a(i)	X
(ii) related organizations					3a(ii)	X
b If 'Yes' on line 3a(ii), are the rela	ated organizations li	sted as required on S	Schedule R?		3b	
4 Describe in Part XIII the intended	d uses of the organi	zation's endowment	funds. See Part	XIII		
Part VI Land, Buildings, and	Equipment.					
Complete if the organi	• •	d 'Yes' on Form 9	990, Part IV, line 1	1a. See Form 990), Part X, Iin	e 10.
Description of property	(a) Co	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	ue
1 a Land						
b Buildings						
c Leasehold improvements						
d Equipment						
e Other						
Total. Add lines 1a through 1e. (Column		orm 990, Part X, colu	mn (B), line 10c.)	▶		0.
BAA	<u> </u>	· ·	, , , , , , , , , , , , , , , , , , ,		le D (Form 990)	

Schedule D (Form 990) 2018

				ee Form 990, Part X, line 1
	egory (including name of security)	(b) Book value	(c) Method of valuation	: Cost or end-of-year market value
·				
	sts			
3) Other				
<u>A)</u>		_		
<u>3)</u>		_		
<u>) </u>		_		
<u>-,</u>		-		
<u>=)</u> 				
F <u>)</u> G)				
1)				
<u>'</u>				
otal. (Column (b) must equal Form 9	990 Part X column (R) line 12)	•		
Part VIII Investments -			N/A	
Complete if the	e organization answere	d 'Yes' on Form 99	D, Part IV, line 11c. Se	ee Form 990, Part X, line 1
(a) Description of	finvestment	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(8) (9)				
(8) (9) (10)	200 D 1 V 1 (DV: 10)			
(8) (9) (10) Total. (Column (b) must equal Form 9	990, Part X, column (B) line 13.) •			
(8) (9) (10) Total. (Column (b) must equal Form 9 Part IX Other Assets.		N/A	D, Part IV, line 11d. Se	ee Form 990, Part X, line 1
(8) (9) (10) otal. (Column (b) must equal Form 9 Part IX Other Assets.	e organization answere	N/A	D, Part IV, line 11d. Se	ee Form 990, Part X, line 1
(8) (9) (10) fotal. (Column (b) must equal Form 9 Part IX Other Assets. Complete if the	e organization answere	N/ <i>I</i> d 'Yes' on Form 99	D, Part IV, line 11d. Se	
(8) (9) (10) otal. (Column (b) must equal Form 9 Part IX Other Assets. Complete if the	e organization answere	N/ <i>I</i> d 'Yes' on Form 99	D, Part IV, line 11d. Se	
(8) (9) (10) otal. (Column (b) must equal Form 9 Part IX Other Assets. Complete if the (1) (2) (3)	e organization answere	N/ <i>I</i> d 'Yes' on Form 99	D, Part IV, line 11d. Se	
(8) (9) (10) otal. (Column (b) must equal Form 9 Part IX Other Assets. Complete if the (1) (2) (3) (4)	e organization answere	N/ <i>I</i> d 'Yes' on Form 99	D, Part IV, line 11d. Se	
(8) (9) (10) otal. (Column (b) must equal Form 9 Part IX Other Assets. Complete if the (1) (2) (3) (4) (5)	e organization answere	N/ <i>I</i> d 'Yes' on Form 99	D, Part IV, line 11d. Se	
(8) (9) (10) otal. (Column (b) must equal Form 9 Part IX Other Assets. Complete if the (1) (2) (3) (4) (5) (6)	e organization answere	N/ <i>I</i> d 'Yes' on Form 99	D, Part IV, line 11d. Se	
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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	584,316.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	-287,357.
3 Subtract line 2e from line 1.	3	871,673.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	93,529.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	965,202.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	r n.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	2,725,266.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.) 2 d		
e Add lines 2a through 2d.	2 e	61,834.
3 Subtract line 2e from line 1.	3	2,663,432.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		00 500
c Add lines 4a and 4b	4 c	93,529. 2 756 961
J 10101 CANCHSCS. MUU 1111CS 3 0110 40. [11115 11105] EUUAI FUITI 330. FAIL I. IIITE 10.1	ו ט	/ /nh 9hl

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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, Line 4 - Intended Uses Of Endowment Fund

The Foundation's endowments consist of donor-restricted funds established to provide scholarships and support the College.

BAA Schedule D (Form 990) 2018

SCHEDULE I (Form 990)

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

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Galveston College Foundation

Employer identification number 76-0512266

Part I General Information on Gra	ants and Assista	ance					
Does the organization maintain records to the selection criteria used to award the	o substantiate the am e grants or assistand		assistance, the grantees'				X Yes No
2 Describe in Part IV the organization's pro	ocedures for monitorin	g the use of grant fu	ands in the United States.		See I	Part IV	
Part II Grants and Other Assistan	nce to Domestic	Organizations	and Domestic Gove	ernments. Comple	te if the organiza	tion answered 'Y	es' on
Form 990, Part IV, line 21,	for any recipient	t that received i	more than \$5,000. F	Part II can be dupli	cated if additiona	I space is neede	ed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Galveston College 4015 Avenue O							
Galveston, TX 77550	74-1561720	501(c)(3)	2,321,152.	0.			General support
(2)		. , , ,					
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
2 Enter total number of section 501(c)(3	, ,	· ·					1
3 Enter total number of other organization	ons listed in the line	і table					. 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Student scholarships & Books 1 award	302	265,893.			Support for community college
2					
3					
4					
5					
6					
7					

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

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

During the year, Galveston College Foundation (GCF) notifies the College's Financial Aid (FA) office of the funds available for scholarships for the upcoming school year. The process of awarding scholarships is primarily done through the Financial Aid office - they prepare and disburse scholarship announcements, collect necessary documentation from the students, and also award the scholarships. For some scholarships, a special committee makes an award decision. Once all scholarships have been awarded and all of the FA process has been completed, scholarships are automatically applied to the student's account. This is handled at the College level; the Foundation is not involved in selecting students or applying scholarship funds to the student accounts. In certain instances at the request of the donors, Maria

Page 3

Galveston College Foundation

76-0512266

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (continued)

Tripovich works directly with the program directors to identify students in the program that are eligible for scholarships. These students are recommended by the program director, and Maria reviews key information (such as age, GPA, etc.) to ensure that the suggested students meet the donor terms.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization

Employer identification number

OMB No. 1545-0047

2018

76-0512266

Galveston College Foundation

Form 990, Part VI, Line 11b - Form 990 Review Process

Form 990 is reviewed by the Executive Committee. The full board receives a copy before filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Each board member of GCF is required to read and sign a copy of the Conflict of Interest Policy on an annual basis. The signature is to acknowledge that the signer (1) has received a copy of the policy, (2) has read and understands the policy), (3) agrees to comply with the policy, and (4) understands that the Foundation is charitable and in order to maintain its classification as such, it must engage primarily in activities accomplishing its charitable purposes. The Foundation reviews these forms to determine if any conflicts exist, and if so, perceived to have a conflict of interest are required to be recused or inactive from the Board until which time the conflict of interest no longer exists. Description of the process the organization uses to monitor and enforce compliance with its conflict of interest policy: Each board member of GCF is required to read and sign a copy of the Conflict of Interest Policy on an annual basis. The signature is to acknowledge that the signer (1) has received a copy of the policy, (2) has read and understands the policy), (3) agrees to comply with the policy, and (4) understands that the Foundation is charitable and in order to maintain its classification as such, it must engage primarily in activities accomplishing its charitable purposes. The Foundation reviews these forms to determine if any conflicts exist, and if so, directors perceived to have a conflict of interest are required to be recused or inactive from the Board until which time the conflict of interest no longer exists.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents disclosure explanation is available on the website.