TAX RETURN FILING INSTRUCTIONS
FORM 990
FOR THE YEAR ENDING
MAY 31, 2020

PREPARED FOR:

TEXAS LUTHERAN UNIVERSITY
1000 WEST COURT STREET
SEGUIN, TX  78155

PREPARED BY:

RSM US LLP
19026 RIDGEWOOD PKWY, STE 400
SAN ANTONIO, TX  78259

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS COPY OF THE RETURN IS PROVIDED ONLY FOR PUBLIC DISCLOSURE PURPOSES. ANY CONFIDENTIAL INFORMATION REGARDING LARGE DONORS HAS BEEN REMOVED.
Part I
Summary

1. Briefly describe the organization’s mission or most significant activities: TEXAS LUTHERAN UNIVERSITY IS A COMMUNITY OF LEARNING AND A COMMUNITY OF FAITH.

Activities & Governance

2. Check this box ▶ if the organization discontinued its operations or dispose of more than 25% of its net assets.

3. Number of voting members of the governing body (Part VI, line 1a) 29

4. Number of independent voting members of the governing body (Part VI, line 1b) 29

5. Total number of individuals employed in calendar year 2019 (Part V, line 2a) 946

6. Total number of volunteers (estimate if necessary) 150

7a. Total unrelated business revenue from Part VIII, column (C), line 12 0

7b. Net unrelated business taxable income from Form 990-T, line 39 0

Revenue

8. Contributions and grants (Part VIII, line 1h) Prior Year 9,266,363. Current Year 8,861,985.

9. Program service revenue (Part VIII, line 2g) 47,794,045. 49,362,634.

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,994,048. 1,584,200.

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 542,504. 506,567.

12. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 59,596,960. 60,315,386.

Expenses

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 25,786,734. 27,197,429.

14. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 21,709,524. 20,833,584.

16a. Professional fundraising fees (Part IX, column (A), line 11e) 0.

16b. Total fundraising expenses (Part IX, column (A), line 25) 907,798.

17. Total expenses (Part IX, column (A), lines 1a-11d, 11f-24e) 16,038,618. 14,690,424.


Net Assets or Fund Balances

Beginning of Current Year 166,654,069. End of Year 162,850,591.

Part II
Signature Block

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

Signature of officer
EDIE RICHARDSON, VP FOR FINANCE

Date

Preparer's signature

Print/Type preparer’s name
JOSEPHINE BEHREND

Preparer date
03/31/21

Check for self-employed

PTIN
P00715390

Preparer’s EIN
42-0714325

Phone number
210-828-6281

May the IRS discuss this return with the preparer shown above? (see instructions) Yes

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
TEXAS LUTHERAN UNIVERSITY

Part III | Statement of Program Service Accomplishments

1 Briefly describe the organization’s mission:
TEXAS LUTHERAN UNIVERSITY IS A COMMUNITY OF LEARNING AND A COMMUNITY OF FAITH.

SEE SCHEDULE O FOR CONTINUATION OF MISSION STATEMENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? □ Yes □ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? □ Yes □ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ____ ) (Expenses $ 41,831,347. including grants of $ 27,197,429. ) (Revenue $ 42,475,983. )

INSTRUCTION (WHICH INCLUDES ALL EXPENSES FOR TEACHING) AND ACADEMIC SUPPORT (WHICH INCLUDES ACTIVITIES THAT SUPPORT TEACHING). TLU IS AN UNDERGRADUATE UNIVERSITY OF THE LIBERAL ARTS, SCIENCES, AND PROFESSIONAL STUDIES WITH A DIVERSE STUDENT BODY OF APPROXIMATELY 1,400 STUDENTS. TLU ALSO OFFERS A MASTER'S DEGREE IN ACCOUNTING, A MASTER'S DEGREE IN ATHLETIC TRAINING, AND A MASTER'S DEGREE IN DATA ANALYTICS. CLASSES AVERAGE FEWER THAN 20 STUDENTS. APPROXIMATELY 95% OF TLU STUDENTS RECEIVE FINANCIAL ASSISTANCE.

4b (Code: ____ ) (Expenses $ 6,906,160. including grants of $ ) (Revenue $ 1,167,321. )

STUDENT SERVICES INCLUDES STUDENT ACTIVITIES, ATHLETICS, FINANCIAL AID, HEALTH CENTER AND OTHER STUDENT-RELATED SUPPORT SERVICES.

4c (Code: ____ ) (Expenses $ 4,946,917. including grants of $ ) (Revenue $ 6,065,440. )

AUXILIARY SERVICES INCLUDES THE OPERATION OF THE DINING HALL, RESIDENCE LIFE, AND CAMPUS BOOKSTORE.

4d Other program services (Describe on Schedule O.)

4e Total program service expenses ▶ $ 53,684,424.
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part III</td>
<td></td>
<td>X</td>
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<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I</td>
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<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If &quot;Yes,&quot; complete Schedule D, Part II</td>
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<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
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<td></td>
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<td>Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
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<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td>X</td>
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<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IX</td>
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<td>Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
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<tr>
<td>Did the organization’s separate or consolidated financial statements for the tax year include a footnote that addresses the organization’s liability for uncertain tax positions under FIN 48 (ASC 740)? If &quot;Yes,&quot; complete Schedule D, Part X</td>
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<tr>
<td>Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
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<td>Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
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<td>Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E</td>
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<td>Did the organization maintain an office, employees, or agents outside of the United States?</td>
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<td>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 &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
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<td>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 &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
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<td>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 &quot;Yes,&quot; complete Schedule G, Part I</td>
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<td>Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II</td>
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<td>Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
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</tr>
</tbody>
</table>
### Part V Statements Regarding Other IRS Filings and Tax Compliance

<table>
<thead>
<tr>
<th>Statement</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>23. Did the organization answer &quot;Yes&quot; 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?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>24a. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>24b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>24c. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>24d. Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>25a. Did the organization engage in an excess benefit transaction with a disqualified person during the year?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>a. If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>b. Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization’s prior Forms 990 or 990-EZ?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>26. Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>27. Did the organization provide a grant or other assistance to any current or former officer, director, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity including an employee thereof or family member of any of these persons?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>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):</td>
<td>☐️</td>
<td></td>
</tr>
<tr>
<td>a. A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>b. A family member of any individual described in line 28a?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>c. A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>29. Did the organization receive more than $25,000 in non-cash contributions?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>30. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>31. Did the organization liquidate, terminate, or dissolve and cease operations?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>32. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>34. Was the organization related to any tax-exempt or taxable entity?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>a. If &quot;Yes,&quot; complete Schedule R, Part I</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>b. Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>35b. If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>36. 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?</td>
<td>☑️</td>
<td></td>
</tr>
<tr>
<td>37. Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td>☑️</td>
<td></td>
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</table>
### Form 990 (2019)

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>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</td>
<td>946</td>
<td></td>
</tr>
</tbody>
</table>
| 2b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  
  **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | X   |    |
| 3a   | Did the organization have unrelated business gross income of $1,000 or more during the year? | X   |    |
| 3b   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | X   |    |
| 4a   | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | X   |    |
| 4b   | If "Yes," enter the name of the foreign country.  
  **CAYMAN ISLANDS**  
| 5a   | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | X   |    |
| 5b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | X   |    |
| 5c   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | X   |    |
| 6a   | 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? | X   |    |
| 6b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? |    |    |
| 7a   | Organizations that may receive deductible contributions under section 170(c).  
  a) Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | X   |    |
| 7b   | If "Yes," did the organization notify the donor of the value of the goods or services provided? | X   |    |
| 7c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | X   |    |
| 7d   | If "Yes," indicate the number of Forms 8282 filed during the year |    |    |
| 7e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | X   |    |
| 7f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | X   |    |
| 7g   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | N/A |    |
| 7h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | N/A |    |
| 8    | Sponsoring organizations maintaining donor advised funds.  
  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | N/A |    |
| 9    | Sponsoring organizations maintaining donor advised funds.  
  a) Did the sponsoring organization make any taxable distributions under section 4966? | N/A |    |
| 9a   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | N/A |    |
| 10   | **Section 501(c)(7) organizations.** Enter:  
  a) Initiation fees and capital contributions included on Part VIII, line 12 | N/A |    |
| 10a  | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | N/A |    |
| 11   | **Section 501(c)(12) organizations.** Enter:  
  a) Gross income from members or shareholders | N/A |    |
| 11a  | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | N/A |    |
| 11b  | If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) |    |    |
| 12a  | **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? | N/A |    |
| 12b  | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | N/A |    |
| 13   | **Section 501(c)(29) qualified nonprofit health insurance issuers.**  
  a) Is the organization licensed to issue qualified health plans in more than one state? | N/A |    |
| 13a  | **Note:** See the instructions for additional information the organization must report on Schedule O. | N/A |    |
| 13b  | 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 |    |    |
| 13c  | Enter the amount of reserves on hand |    |    |
| 14a  | Did the organization receive any payments for indoor tanning services during the tax year? | X   |    |
| 14b  | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | X   |    |
| 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? | X   |    |
| 16   | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | X   |    |
| 16a  | If "Yes," complete Form 4720, Schedule O. |    |    |
### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. Enter the number of voting members of the governing body at the end of the tax year</td>
<td>29</td>
<td></td>
</tr>
<tr>
<td>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 on Schedule O.</td>
<td>1a</td>
<td>29</td>
</tr>
<tr>
<td>1b. Enter the number of voting members included on line 1a, above, who are independent</td>
<td>29</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>2</td>
<td>X</td>
</tr>
<tr>
<td>3. Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?</td>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>5. Did the organization become aware during the year of a significant diversion of the organization's assets?</td>
<td>5</td>
<td>X</td>
</tr>
<tr>
<td>6. Did the organization have members or stockholders?</td>
<td>6</td>
<td>X</td>
</tr>
<tr>
<td>7a. 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?</td>
<td>7a</td>
<td>X</td>
</tr>
<tr>
<td>b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>7b</td>
<td>X</td>
</tr>
<tr>
<td>8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td>8</td>
<td>X</td>
</tr>
<tr>
<td>a. The governing body?</td>
<td>8a</td>
<td>X</td>
</tr>
<tr>
<td>b. Each committee with authority to act on behalf of the governing body?</td>
<td>8b</td>
<td>X</td>
</tr>
<tr>
<td>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?</td>
<td>9</td>
<td>X</td>
</tr>
</tbody>
</table>

### Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a. Did the organization have local chapters, branches, or affiliates?</td>
<td>10a</td>
<td>X</td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; 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?</td>
<td>10b</td>
<td></td>
</tr>
<tr>
<td>11a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>11a</td>
<td>X</td>
</tr>
<tr>
<td>b. Describe in Schedule O the process, if any, used by the organization to review this Form 990.</td>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>12a. Did the organization have a written conflict of interest policy?</td>
<td>12a</td>
<td>X</td>
</tr>
<tr>
<td>b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>12b</td>
<td>X</td>
</tr>
<tr>
<td>c. Did the organization regularly and consistently monitor and enforce compliance with the policy?</td>
<td>12c</td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; describe in Schedule O how this was done.</td>
<td>13</td>
<td>X</td>
</tr>
<tr>
<td>13. Did the organization have a written whistleblower policy?</td>
<td>13</td>
<td>X</td>
</tr>
<tr>
<td>14. Did the organization have a written document retention and destruction policy?</td>
<td>14</td>
<td>X</td>
</tr>
<tr>
<td>15. 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?</td>
<td>15</td>
<td>X</td>
</tr>
<tr>
<td>a. The organization's CEO, Executive Director, or top management official</td>
<td>15a</td>
<td>X</td>
</tr>
<tr>
<td>b. Other officers or key employees of the organization</td>
<td>15b</td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes&quot; to line 15a or 15b, describe the process in Schedule O (see instructions).</td>
<td>16</td>
<td>X</td>
</tr>
<tr>
<td>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?</td>
<td>16a</td>
<td>X</td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; 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?</td>
<td>16b</td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: **AK, CO, NH, NV, OR, SC, WA**

18 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] Own website
- [ ] Another's website
- [X] Upon request
- [X] Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **EDIE RICHARDSON, VP FOR FINANCE - 830-372-8016**

1000 WEST COURT STREET, SEGUIN, TX 78155
## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

### (A) Name and title

<table>
<thead>
<tr>
<th>Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) DR. STUART DORSEY</td>
<td>40.00</td>
<td>X</td>
<td>225,243.</td>
<td>0.</td>
<td>24,802.</td>
</tr>
<tr>
<td>PRESIDENT (UNTIL 06/30/19)</td>
<td>1.00</td>
<td>X</td>
<td>185,194.</td>
<td>0.</td>
<td>25,945.</td>
</tr>
<tr>
<td>(2) DR. DEBBIE COTTRELL</td>
<td>40.00</td>
<td>X</td>
<td>153,687.</td>
<td>0.</td>
<td>10,411.</td>
</tr>
<tr>
<td>PRESIDENT</td>
<td>1.00</td>
<td>X</td>
<td>137,901.</td>
<td>0.</td>
<td>16,322.</td>
</tr>
<tr>
<td>(3) JOHN ANDREW NELSON</td>
<td>40.00</td>
<td>X</td>
<td>129,050.</td>
<td>0.</td>
<td>13,915.</td>
</tr>
<tr>
<td>VP FOR FIN. &amp; ADMIN (UNTIL 02/07/20)</td>
<td>1.00</td>
<td>X</td>
<td>119,899.</td>
<td>0.</td>
<td>21,472.</td>
</tr>
<tr>
<td>(4) SARAH STORY</td>
<td>40.00</td>
<td>X</td>
<td>125,659.</td>
<td>0.</td>
<td>13,693.</td>
</tr>
<tr>
<td>VP FOR ENROLLMENT, MARKETING &amp; COMM</td>
<td>1.00</td>
<td>X</td>
<td>105,234.</td>
<td>0.</td>
<td>11,107.</td>
</tr>
<tr>
<td>(5) KRISTI GOLD QUIROS</td>
<td>40.00</td>
<td>X</td>
<td>105,225.</td>
<td>0.</td>
<td>10,856.</td>
</tr>
<tr>
<td>VP &amp; DEAN STUDENT LIFE/LEARNING</td>
<td>1.00</td>
<td>X</td>
<td>90,425.</td>
<td>0.</td>
<td>11,266.</td>
</tr>
<tr>
<td>(6) PAMHLA RENEE RENFELD</td>
<td>40.00</td>
<td>X</td>
<td>90,425.</td>
<td>0.</td>
<td>11,266.</td>
</tr>
<tr>
<td>VP FOR DEVELOPMENT</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(7) WILLIAM SENTER</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>VP FOR ADMINISTRATION AND CHIEF TECH</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(8) ALICIA BRINEY</td>
<td>40.00</td>
<td>X</td>
<td>90,425.</td>
<td>0.</td>
<td>11,266.</td>
</tr>
<tr>
<td>PROFESSOR</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(9) REZA ABBASIAN</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>PROFESSOR</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(10) DR. ANNETTE CITZLER</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>INTERIM VP FOR ACADEMIC AFFAIRS</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(11) EDIR RICHARDON</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>VP FOR FINANCE</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(12) LEWIS F. WESTERMAN</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>REGENT, CHAIR</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(13) WES PEOPLES</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>REGENT, VICE CHAIR</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(14) ILENE GOHMERT-LECK</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>REGENT, TREASURER</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(15) SUSAN EVERS</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>REGENT, SECRETARY</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(16) MIKE APPLING</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>REGENT</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>(17) BARB BARTLING</td>
<td>40.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
<tr>
<td>REGENT</td>
<td>1.00</td>
<td>X</td>
<td>93,711.</td>
<td>0.</td>
<td>6,213.</td>
</tr>
</tbody>
</table>
### Part VII

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>GLYNN BLOOMQUIST, REGENT, SECRETARY (UNTIL 12/31/19)</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DAN CHURCH, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>BETSY CLARDY, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MICHAEL COFFEY, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SARAH EIDSON, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CHARLES B. FRANKS, REGENT (MEMBER-AT-LARGE)</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JESSICA GAIDUSEK, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DEMETRIUS HARDEMAN, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>GARY KOLKHorST, REGENT</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

1b Subtotal | 1,471,228. | 0 | 166,002. |

c Total from continuation sheets to Part VII, Section A | 0 | 0 | 0 |

d Total (add lines 1b and 1c) | 1,471,228. | 0 | 166,002. |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization | 9 |

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | Yes | No |

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual | Yes | No |

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person | Yes | No |

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>SODEXO, INC. &amp; AFFILIATES</td>
<td>FOOD SERVICE</td>
<td>2,547,423.</td>
</tr>
<tr>
<td>P.O. BOX 536922, ATLANTA, GA 30353-6922</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TRANE U.S., INC.</td>
<td>HVAC</td>
<td>537,387.</td>
</tr>
<tr>
<td>P.O. BOX 406469, ATLANTA, GA 30384-6469</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BRILEY DESIGN GROUP</td>
<td>PRINTING</td>
<td>198,151.</td>
</tr>
<tr>
<td>101 W. RENNER RD., RICHARDSON, TX 75082</td>
<td></td>
<td></td>
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<tr>
<td>SEGUIN ELECTRIC</td>
<td>ELECTRICAL CONTRACTOR</td>
<td>176,513.</td>
</tr>
<tr>
<td>1406 N. AUSTIN ST., SEGUIN, TX 78155</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CAMBRIDGE ASSOCIATES</td>
<td>CONSULTANT</td>
<td>168,750.</td>
</tr>
<tr>
<td>P.O. BOX 83232, CHICAGO, IL 60691-0232</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization | 5 |
<table>
<thead>
<tr>
<th>(A)</th>
<th>Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(27) VERNE LUNDQUIST</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(28) RICHARD MANSKE</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(29) NANCY MAY</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(30) ROBIN MELVIN</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(31) KENDRA MOHN</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(32) LUIS JAIME MORENO</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(33) LAURA O’DONNELL</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(34) BOB OLIVER</td>
<td>1.00</td>
<td>REGENT (MEMBER-AT-LARGE)</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(35) NATE RASCHKE</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(36) RUSSELL RINN</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(37) JAIRO ROMERO</td>
<td>1.00</td>
<td>REGENT (MEMBER-AT-LARGE)</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(38) DAVE SATHER</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(39) DWAIN THOMAS</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(40) GARY VALDEZ</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(41) BETH WARPMAEKER</td>
<td>1.00</td>
<td>REGENT (UNTIL 12/31/19)</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>(42) MIKE WASHINGTON</td>
<td>1.00</td>
<td>REGENT</td>
<td>X</td>
<td>0.</td>
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</tr>
</tbody>
</table>

Total to Part VII, Section A, line 1c
## Part VIII  Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>1c</td>
<td>73,250.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td>1d</td>
<td>82,499.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>1e</td>
<td>4,347,217.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>4,359,019.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f</td>
<td>1g</td>
<td>$458,708.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>h Total. Add lines 1a-1f</strong></td>
<td><strong>h</strong></td>
<td><strong>8,861,985.</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Program Service Revenue

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a TUITION AND FEES</td>
<td>611600</td>
</tr>
<tr>
<td>2b AUXILIARY ENTERPRISES</td>
<td>611600</td>
</tr>
<tr>
<td>2c OTHER REVENUE</td>
<td>611600</td>
</tr>
<tr>
<td>2d CONFERENCE REVENUE</td>
<td>611600</td>
</tr>
<tr>
<td>2e All other program service revenue</td>
<td></td>
</tr>
<tr>
<td><strong>g Total. Add lines 2a-2f</strong></td>
<td><strong>49,362,634.</strong></td>
</tr>
</tbody>
</table>

### Other Revenue

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>Business Code</th>
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</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td>611600</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td>611600</td>
</tr>
<tr>
<td>5 Royalties</td>
<td>611600</td>
</tr>
<tr>
<td><strong>g Total. Add lines 2a-2f</strong></td>
<td><strong>49,362,634.</strong></td>
</tr>
</tbody>
</table>

### Rental Income

<table>
<thead>
<tr>
<th>Rental Income or (loss)</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a Gross rents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b Less: rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d Net rental income or (loss)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gain or (loss)

<table>
<thead>
<tr>
<th>Gain or (loss)</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a Gross amount of sales of assets other than inventory</td>
<td>6,326,529.</td>
<td></td>
</tr>
<tr>
<td>7b Less: cost or other basis and sales expenses</td>
<td>6,063,949.</td>
<td>235.</td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td>262,580.</td>
<td>-235.</td>
</tr>
<tr>
<td><strong>d Net gain or (loss)</strong></td>
<td>262,345.</td>
<td></td>
</tr>
</tbody>
</table>

### Gross Income from Fundraising Events

| Gross income from fundraising events (not including $73,250 of contributions reported on line 1c). Part IV, line 18 | 8a 0. |
| Less: direct expenses                                             | 8b 27. |
| **c Net income or (loss) from fundraising events**               | -27.   |

### Gross Income from Gaming Activities

| Gross income from gaming activities See Part IV, line 19 | 9a |
| Less: direct expenses                                         | 9b |
| **c Net income or (loss) from gaming activities**            |     |

### Gross Sales of Inventory, Less Returns and Allowances

| Gross sales of inventory, less returns and allowances          | 10a 974,197. |
| Less: cost of goods sold                                       | 10b 628,087. |
| **c Net income or (loss) from sales of inventory**            | 346,110. |

### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
</tr>
<tr>
<td>11d All other revenue</td>
<td></td>
</tr>
<tr>
<td><strong>e Total. Add lines 11a-11d</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Total Revenue

<p>| Total revenue. See instructions | 12 | 60,315,386. | 49,708,744. | 0. | 1,744,657. |</p>
<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>27,197,429</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>27,197,429</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>1,291,790</td>
<td>1,291,790</td>
<td></td>
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<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>15,269,396</td>
<td>12,741,018</td>
<td>1,986,381</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>608,775</td>
<td>504,090</td>
<td>81,518</td>
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<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>2,507,525</td>
<td>1,731,603</td>
<td>716,184</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>1,156,098</td>
<td>880,293</td>
<td>238,182</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Legal</td>
<td>26,638</td>
<td>26,638</td>
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<tr>
<td></td>
<td>c Accounting</td>
<td>86,966</td>
<td>86,966</td>
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</tr>
<tr>
<td></td>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Investment management fees</td>
<td>195,833</td>
<td>195,833</td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>1,962,707</td>
<td>1,323,531</td>
<td>527,789</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>163,148</td>
<td>68,360</td>
<td>90,167</td>
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<tr>
<td>13</td>
<td>Office expenses</td>
<td>1,171,158</td>
<td>863,192</td>
<td>276,696</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>1,544,686</td>
<td>1,255,824</td>
<td>281,942</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>2,971,912</td>
<td>2,839,656</td>
<td>81,104</td>
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<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>1,054,321</td>
<td>32,144</td>
<td>1,022,000</td>
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<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>2,978,758</td>
<td>2,441,096</td>
<td>524,211</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>326,555</td>
<td>24,825</td>
<td>301,730</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a BOOKS/SUBSCRIPTIONS/SOF</td>
<td>837,207</td>
<td>663,356</td>
<td>150,135</td>
</tr>
<tr>
<td></td>
<td>b EQUIPMENT RENTAL AND MA</td>
<td>644,487</td>
<td>346,905</td>
<td>296,227</td>
</tr>
<tr>
<td></td>
<td>c MISCELLANEOUS</td>
<td>460,546</td>
<td>533,713</td>
<td>-73,460</td>
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<tr>
<td></td>
<td>d EQUIPMENT</td>
<td>197,306</td>
<td>173,922</td>
<td>22,733</td>
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<tr>
<td></td>
<td>e All other expenses</td>
<td>68,196</td>
<td>63,447</td>
<td>4,449</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part X: Balance Sheet

### Assets
1. Cash - non-interest-bearing
2. Savings and temporary cash investments
3. Pledges and grants receivable, net
4. Accounts receivable, net
5. Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons
6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)
7. Notes and loans receivable, net
8. Inventories for sale or use
9. Prepaid expenses and deferred charges
10. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D
11. Investments - publicly traded securities
12. Investments - other securities. See Part IV, line 11
13. Investments - program-related. See Part IV, line 11
14. Intangible assets
15. Other assets. See Part IV, line 11
16. Total assets. Add lines 1 through 15 (must equal line 33)

### Liabilities
17. Accounts payable and accrued expenses
18. Grants payable
19. Deferred revenue
20. Tax-exempt bond liabilities
21. Escrow or custodial account liability. Complete Part IV of Schedule D
22. Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons
23. Secured mortgages and notes payable to unrelated third parties
24. Unsecured notes and loans payable to unrelated third parties
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
26. Total liabilities. Add lines 17 through 25

### Net Assets or Fund Balances
27. Net assets without donor restrictions
28. Net assets with donor restrictions
29. Capital stock or trust principal, or current funds
30. Paid-in or capital surplus, or land, building, or equipment fund
31. Retained earnings, endowment, accumulated income, or other funds
32. Total net assets or fund balances
33. Total liabilities and net assets/fund balances

### Form 990 (2019)

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>52,720</td>
<td>1,226,605</td>
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<tr>
<td>2</td>
<td>568,249</td>
<td>578,582</td>
</tr>
<tr>
<td>3</td>
<td>1,345,623</td>
<td>771,554</td>
</tr>
<tr>
<td>4</td>
<td>558,968</td>
<td>622,652</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>2,857,873</td>
<td>2,284,003</td>
</tr>
<tr>
<td>7</td>
<td>257,902</td>
<td>301,653</td>
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<td>8</td>
<td>1,705,070</td>
<td>1,872,149</td>
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<td>9</td>
<td>166,654,069</td>
<td>162,850,591</td>
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<td>10</td>
<td>126,596,873</td>
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<tr>
<td>11</td>
<td>63,910,496</td>
<td>62,237,285</td>
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<tr>
<td>12</td>
<td>48,777,158</td>
<td>48,851,636</td>
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<tr>
<td>13</td>
<td>45,253,851</td>
<td>42,770,066</td>
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<tr>
<td>15</td>
<td>1,366,159</td>
<td>1,334,406</td>
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<tr>
<td>16</td>
<td>166,654,069</td>
<td>162,850,591</td>
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<tr>
<td>17</td>
<td>4,190,224</td>
<td>3,526,256</td>
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</tr>
<tr>
<td>19</td>
<td>1,596,155</td>
<td>5,588,311</td>
</tr>
<tr>
<td>20</td>
<td>25,234,337</td>
<td>23,966,464</td>
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<tr>
<td>21</td>
<td></td>
<td></td>
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<tr>
<td>22</td>
<td>1,485,588</td>
<td>615,803</td>
</tr>
<tr>
<td>23</td>
<td>3,000,000</td>
<td>1,500,000</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>7,552,025</td>
<td>6,608,489</td>
</tr>
<tr>
<td>26</td>
<td>43,058,329</td>
<td>41,805,323</td>
</tr>
<tr>
<td>27</td>
<td>43,192,085</td>
<td>42,480,315</td>
</tr>
<tr>
<td>28</td>
<td>80,403,655</td>
<td>78,564,953</td>
</tr>
<tr>
<td>29</td>
<td>123,595,740</td>
<td>121,045,268</td>
</tr>
<tr>
<td>30</td>
<td>166,654,069</td>
<td>162,850,591</td>
</tr>
</tbody>
</table>

Form 990 (2019)
### Part XI | Reconciliation of Net Assets

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

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>60,315,386.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>62,721,437.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>-2,406,051.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>123,595,740.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>29,849.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>-174,270.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>121,045,268.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part XII | Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash</td>
<td>X</td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>If “Yes,” check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td>X</td>
</tr>
</tbody>
</table>
Schedule A (Form 990 or 990-EZ) 2019

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.

Name of the organization: TEXAS LUTHERAN UNIVERSITY

Employer identification number: 74-1109748

**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.)

1. □ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. X 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)(v). (Complete Part II.)
8. X A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. □ 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 university:
10. □ 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 June 30, 1975. See section 509(a)(2). (Complete Part III.)
12. □ 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 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

<table>
<thead>
<tr>
<th>Type of organization</th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Type I A</td>
<td>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.</td>
</tr>
<tr>
<td>b Type II A</td>
<td>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.</td>
</tr>
<tr>
<td>c Type III functionally integrated</td>
<td>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.</td>
</tr>
<tr>
<td>d Type III non-functionally integrated</td>
<td>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.</td>
</tr>
<tr>
<td>e 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.</td>
<td></td>
</tr>
<tr>
<td>f Enter the number of supported organizations.</td>
<td></td>
</tr>
<tr>
<td>g Provide the following information about the supported organization(s).</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>Yes</td>
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</tbody>
</table>

Total

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019
### Section A. Public Support

#### Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total

1. Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")

2. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

3. The value of services or facilities furnished by a governmental unit to the organization without charge

4. Total. Add lines 1 through 3

5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)

6. Public support. Subtract line 5 from line 4.

#### Section B. Total Support

#### Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total

7. Amounts from line 4

8. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources

9. Net income from unrelated business activities, whether or not the business is regularly carried on

10. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)

11. Total support. Add lines 7 through 10

12. Gross receipts from related activities, etc. (see instructions) 12

13. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

#### Section C. Computation of Public Support Percentage

14. Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 %

15. Public support percentage from 2018 Schedule A, Part II, line 14 15 %

16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

16b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

17b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions
### 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.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2018 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2018 Schedule A, Part III, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If the organization did not check the box on line 14, 19a, or 19b, check this box and see instructions.
## 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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Are all of the organization's supported organizations listed by name in the organization's governing documents? If &quot;No,&quot; 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.</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If &quot;Yes,&quot; explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</td>
<td>2</td>
</tr>
<tr>
<td>3a</td>
<td>Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If &quot;Yes,&quot; answer (b) and (c) below.</td>
<td>3a</td>
</tr>
<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; describe in Part VI when and how the organization made the determination.</td>
<td>3b</td>
</tr>
<tr>
<td>c</td>
<td>Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If &quot;Yes,&quot; explain in Part VI what controls the organization put in place to ensure such use.</td>
<td>3c</td>
</tr>
<tr>
<td>4a</td>
<td>Was any supported organization not organized in the United States (&quot;foreign supported organization&quot;)? If &quot;Yes,&quot; and if you checked 12a or 12b in Part I, answer (b) and (c) below.</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If &quot;Yes,&quot; 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.</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>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 &quot;Yes,&quot; 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.</td>
<td>4c</td>
</tr>
<tr>
<td>5a</td>
<td>Did the organization add, substitute, or remove any supported organizations during the tax year? If &quot;Yes,&quot; 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).</td>
<td>5a</td>
</tr>
<tr>
<td>b</td>
<td>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?</td>
<td>5b</td>
</tr>
<tr>
<td>c</td>
<td>Substitutions only. Was the substitution the result of an event beyond the organization's control?</td>
<td>5c</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>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 &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td>8</td>
</tr>
<tr>
<td>9a</td>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td>9a</td>
</tr>
<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td>9b</td>
</tr>
<tr>
<td>c</td>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td>9c</td>
</tr>
<tr>
<td>10a</td>
<td>Was the organization subject to the excess business holdings rules of section 4943 (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If &quot;Yes,&quot; answer 10b below.</td>
<td>10a</td>
</tr>
<tr>
<td>b</td>
<td>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.)</td>
<td>10b</td>
</tr>
</tbody>
</table>
### Part VI

#### Section A. Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 Has the organization accepted a gift or contribution from any of the following persons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b A family member of a person described in (a) above?</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>c A 35% controlled entity of a person described in (a) or (b) above?</td>
<td>11b</td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Type I Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)?</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. All Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

#### Section E. Type III Functionally Integrated Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization satisfied the Activities Test. Complete line 2 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Activities Test. Answer (a) and (b) below.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td>2b</td>
<td></td>
</tr>
</tbody>
</table>

3 Parent of Supported Organizations. Answer (a) and (b) below.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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? Provide details in Part VI.</td>
<td>3a</td>
<td></td>
</tr>
<tr>
<td>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If “Yes,” describe in Part VI the role played by the organization in this regard.</td>
<td>3b</td>
<td></td>
</tr>
</tbody>
</table>
### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td><strong>Total</strong> (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td><strong>Discount</strong> claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Minimum Asset Amount</strong> (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount.</strong> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

1. Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions).
### Section D - Distributions

<table>
<thead>
<tr>
<th>Part VI</th>
<th>Total annual distributions. Add lines 1 through 6.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Excess Distributions</td>
</tr>
<tr>
<td></td>
<td>Underdistributions</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2019</th>
<th>(iii) Distributable Amount for 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Distributable amount for 2019 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Excess distributions carryover, if any, to 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a From 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b From 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c From 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d From 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e From 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Total of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Applied to 2019 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i Carryover from 2014 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Distributions for 2019 from Section D, line 7: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Applied to 2019 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Excess distributions carryover to 2020. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Excess from 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Excess from 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Excess from 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Excess from 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Excess from 2019</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part VI 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.)
Schedule B
(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

2019

OMB No. 1545-0047

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

Name of the organization

TEXAS LUTHERAN UNIVERSITY

Employer identification number

74-1109748

Organization type (check one):

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

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 of more than $1,000 for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year

Caution: An organization that isn’t covered by the General Rule and/or the Special Rules doesn’t file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer “No” on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn’t meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA

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) (2019)

923451 11-06-19

** PUBLIC DISCLOSURE COPY **
**Part I  Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Person Payroll ✗ Noncash</td>
<td>$10,000.</td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>2</td>
<td>Person Payroll ✗ Noncash</td>
<td>$5,000.</td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>3</td>
<td>Person Payroll ✗ Noncash</td>
<td>$5,000.</td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>4</td>
<td>Person Payroll ✗ Noncash</td>
<td>$15,000.</td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>5</td>
<td>Person Payroll ✗ Noncash</td>
<td>$50,831.</td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>6</td>
<td>Person Payroll ✗ Noncash</td>
<td>$19,020.</td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>
### Part I Contributors

(see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td>$15,350.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td></td>
<td>$10,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td></td>
<td>$10,375.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td></td>
<td>$5,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td></td>
<td>$5,100.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td></td>
<td>$10,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>$25,300.00</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>$25,100.00</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>15</td>
<td></td>
<td>$5,000.00</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>16</td>
<td></td>
<td>$6,725.00</td>
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**Part I**

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## Part I

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**Part I**

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## Part I

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<td>55</td>
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<td>$356,163.</td>
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</tr>
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<td>56</td>
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<tr>
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<td>61</td>
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<td>62</td>
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**TEXAS LUTHERAN UNIVERSITY**

**Part I**

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(Complete Part II for noncash contributions.)
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### Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

**Part I**

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<td>103</td>
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**Texas Lutheran University**

Name of organization: **TEXAS LUTHERAN UNIVERSITY**

Employer identification number: 74-1109748
## Part I: Contributors

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<td>Person Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>Person Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>Person Payroll Noncash</td>
</tr>
</tbody>
</table>
## Part II Noncash Property

(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Description of noncash property given</th>
<th>FMV (or estimate)</th>
<th>Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>150.255 SHARES USSPX</td>
<td>$6,625.</td>
<td>01/07/20</td>
</tr>
<tr>
<td>21</td>
<td>1,000 SHARES FISERV</td>
<td>$110,620.</td>
<td>11/12/19</td>
</tr>
<tr>
<td>27</td>
<td>121 SHARES MSFT, 22 SHARES TJX, 720</td>
<td>$94,495.</td>
<td>05/31/20</td>
</tr>
<tr>
<td>44</td>
<td>380 SHARES ARWR, 30 SHARES IOVA</td>
<td>$25,092.</td>
<td>12/24/19</td>
</tr>
<tr>
<td>55</td>
<td>REAL PROPERTY</td>
<td>$200,000.</td>
<td>12/20/19</td>
</tr>
<tr>
<td>77</td>
<td>20 SHARES MDT, 37 SHARES AFL, 15</td>
<td>$10,114.</td>
<td>07/03/19</td>
</tr>
</tbody>
</table>
**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 info. once.) $ __________

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee’s name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Name of organization**

TEXAS LUTHERAN UNIVERSITY

<table>
<thead>
<tr>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>74-1109748</td>
</tr>
</tbody>
</table>

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee’s name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Texas Lutheran University**

923454 11-06-19

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
Name of the organization: TEXAS LUTHERAN UNIVERSITY
Employer identification number: 74-1109748

Part I: Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

- Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

- Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control? [ ] Yes [ ] No
- Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [ ] Yes [ ] No

Part II: Conservation Easements.

- Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Purpose(s) of conservation easements held by the organization (check all that apply).</td>
</tr>
<tr>
<td></td>
<td>Preservation of land for public use (for example, recreation or education)</td>
</tr>
<tr>
<td></td>
<td>Preservation of a historically important land area</td>
</tr>
<tr>
<td></td>
<td>Protection of natural habitat</td>
</tr>
<tr>
<td></td>
<td>Preservation of open space</td>
</tr>
<tr>
<td>2</td>
<td>Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.</td>
</tr>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a) listed in the National Register</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure</td>
</tr>
<tr>
<td>3</td>
<td>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.</td>
</tr>
<tr>
<td>4</td>
<td>Number of states where property subject to conservation easement is located</td>
</tr>
<tr>
<td>5</td>
<td>Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No</td>
</tr>
<tr>
<td>6</td>
<td>Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</td>
</tr>
<tr>
<td>7</td>
<td>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year $</td>
</tr>
<tr>
<td>8</td>
<td>Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No</td>
</tr>
</tbody>
</table>
| 9 | In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements.

Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

- Complete if the organization answered “Yes” on Form 990, Part IV, line 8.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.</td>
</tr>
<tr>
<td>b</td>
<td>If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:</td>
</tr>
<tr>
<td></td>
<td>(i) Revenue included on Form 990, Part VIII, line 1 $</td>
</tr>
<tr>
<td></td>
<td>(ii) Assets included in Form 990, Part X $</td>
</tr>
<tr>
<td>2</td>
<td>If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:</td>
</tr>
<tr>
<td>a</td>
<td>Revenue included on Form 990, Part VIII, line 1 $</td>
</tr>
<tr>
<td>b</td>
<td>Assets included in Form 990, Part X $</td>
</tr>
</tbody>
</table>
Schedule D (Form 990) 2019  
TEXAS LUTHERAN UNIVERSITY  
74-1109748  
Page 2

Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets  
(continued)

3 Using the organization’s acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   a  ☑ Public exhibition  d  ☑ Loan or exchange program
   b  ☑ Scholarly research  e  ☑ Other
   c  ☑ Preservation for future generations

4 Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection?  ☑ Yes  ☑ No

Part IV  Escrow and Custodial Arrangements. Complete if the organization answered “Yes” on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  ☑ Yes  ☑ No

   b If “Yes,” explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  ☑ Yes  ☑ No

   b If “Yes,” explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V  Endowment Funds. Complete if the organization answered “Yes” on Form 990, Part IV, line 10.

1a Beginning of year balance .................................................. 80,002,339.

   b Contributions ................................................................. 1,079,233.

   c Net investment earnings, gains, and losses ........................ 1,160,905.

   d Grants or scholarships .................................................. 2,840,631.

   e Other expenditures for facilities and programs ................ 1,319,319.

   f Administrative expenses .................................................. 565,190.

   g End of year balance ....................................................... 77,517,337.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a Board designated or quasi-endowment  ➤ 23.37 %
   b Permanent endowment  ➤ 68.49 %
   c Term endowment  ➤ 8.14 %

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) Unrelated organizations  ☑ Yes  ☑ No
   (ii) Related organizations  ☑ Yes  ☑ No

   b If “Yes” on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization’s endowment funds.

Part VI  Land, Buildings, and Equipment.

Complete if the organization answered “Yes” on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>4,500.</td>
<td>4,234,925.</td>
<td>4,239,425.</td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td>26,075,976.</td>
<td>12,150,478.</td>
<td>13,925,498.</td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>18,594,122.</td>
<td>16,758,022.</td>
<td>1,836,100.</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>223,578.</td>
<td></td>
<td>223,578.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e.  (Column (d) must equal Form 990, Part X, column (B), line 10c.)  ➤ 62,237,285.
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Part VII Investments - Other Securities.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A) ALTERNATIVE INVESTMENTS</td>
<td>25,741,058.</td>
<td>END-OF-YEAR MARKET VALUE</td>
</tr>
<tr>
<td>(B) ENDOWMENT FUND AND</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C) BENEFICIAL INT TRUSTS</td>
<td>13,160,732.</td>
<td>COST</td>
</tr>
<tr>
<td>(D) MINERAL RIGHTS AND</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E) ROYALTIES</td>
<td>618,355.</td>
<td>END-OF-YEAR MARKET VALUE</td>
</tr>
<tr>
<td>(F) SHORT-TERM INVESTMENTS</td>
<td>3,249,921.</td>
<td>END-OF-YEAR MARKET VALUE</td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)</td>
<td>42,770,066.</td>
<td></td>
</tr>
</tbody>
</table>

Part VIII Investments - Program Related.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
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<td>(4)</td>
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<tr>
<td>(8)</td>
<td></td>
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<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Part IX Other Assets.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)</td>
<td></td>
</tr>
</tbody>
</table>

Part X Other Liabilities.

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) ADVANCES FROM US GOV'T FOR STUDENT</td>
<td>2,525,444.</td>
</tr>
<tr>
<td>(3) LOANS</td>
<td></td>
</tr>
<tr>
<td>(4) LIABILITIES RELATED TO</td>
<td></td>
</tr>
<tr>
<td>(5) SPLIT-INTEREST AGREEMENTS</td>
<td>2,748,571.</td>
</tr>
<tr>
<td>(6) ASSET RETIREMENT OBLIGATION</td>
<td>1,018,423.</td>
</tr>
<tr>
<td>(7) LEASE LIABILITIES</td>
<td>316,051.</td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)</td>
<td>6,608,489.</td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII X
Schedule D (Form 990) 2019  TEXAS LUTHERAN UNIVERSITY  74-1109748  Page 4

**Part XI**  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
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  40,668,443.

2. Amounts included on line 1 but not on Form 990, Part VIII, line 12:
   a. Net unrealized gains (losses) on investments .............................................................. 2a  29,849.
   b. Donated services and use of facilities .............................................................................. 2b
   c. Recoveries of prior year grants ...................................................................................... 2c
   d. Other (Describe in Part XIII.) .......................................................................................... 2d  7,716,470.
   e. Add lines 2a through 2d ............................................................................................... 2e  7,746,319.

3. Subtract line 2e from line 1 ........................................................................................................ 3  32,922,124.

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  4a  195,833.
   b. Other (Describe in Part XIII.) .......................................................................................... 4b  27,197,429.
   c. Add lines 4a and 4b ......................................................................................................... 4c  27,393,262.

5. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) ................. 5  60,315,386.

**Part XII**  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered “Yes” on Form 990, Part IV, line 12a.

1. Total expenses and losses per audited financial statements .......................................................... 1  36,071,055.

2. Amounts included on line 1 but not on Form 990, Part IX, line 25:
   a. Donated services and use of facilities .............................................................................. 2a
   b. Prior year adjustments ...................................................................................................... 2b
   c. Other losses ...................................................................................................................... 2c
   d. Other (Describe in Part XIII.) .......................................................................................... 2d  628,114.
   e. Add lines 2a through 2d ............................................................................................... 2e  628,114.

3. Subtract line 2e from line 1 ........................................................................................................ 3  35,442,941.

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  4a  195,833.
   b. Other (Describe in Part XIII.) .......................................................................................... 4b  27,082,663.
   c. Add lines 4a and 4b ......................................................................................................... 4c  27,278,496.

5. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) ................. 5  62,721,437.

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

**PART III, LINE 4:**

THE UNIVERSITY ACCEPTS ARTWORK, ARTIFACTS OR SIMILAR ITEMS FROM DONORS IF SUCH ITEMS PROVIDE A DECORATIVE OR ACADEMIC PURPOSE. AS SUCH, THESE ITEMS MAY BE UTILIZED AS DECORATIONS OR INFORMATIVE EXHIBITS WITHIN THE UNIVERSITY LIBRARY AND ACADEMIC BUILDINGS. WHILE THE UNIVERSITY ACCOUNTS FOR SUCH ITEMS IN TERMS OF INSURING THE CONTENTS OF UNIVERSITY BUILDINGS, THESE COLLECTIONS ARE NOT VALUED AS ASSETS ON THE FINANCIAL STATEMENTS.

**PART V, LINE 4:**

THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 680 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES. ITS ENDOWMENT INCLUDES BOTH DONOR RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE GOVERNING BOARD TO
FUNCTION AS ENDOWMENTS. THE UNIVERSITY'S OBJECTIVE IS TO MAINTAIN THE PURCHASING POWER OF ENDOWMENT ASSETS HELD IN PERPETUITY OR FOR A SPECIFIED TERM AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN.

PART X, LINE 2:
THE UNIVERSITY FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN EVALUATING UNCERTAIN TAX POSITIONS. THIS GUIDANCE PRESCRIBES RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. NO LIABILITY HAS BEEN RECOGNIZED BY THE UNIVERSITY FOR UNCERTAIN TAX POSITIONS AS OF MAY 31, 2020 AND 2019. THE UNIVERSITY'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:
CHANGES IN SPLIT-INTEREST AGREEMENTS -174,270.
BOOKSTORE EXPENSES 628,087.
FUNDRAISING EXPENSES 27.
WESTON RANCH FOUNDATION - REVENUE 7,262,626.
TOTAL TO SCHEDULE D, PART XI, LINE 2D 7,716,470.

PART XI, LINE 4B - OTHER ADJUSTMENTS:
SCHOLARSHIPS 27,197,429.

PART XII, LINE 2D - OTHER ADJUSTMENTS:
BOOKSTORE EXPENSES 628,087.
FUNDRAISING EXPENSES 27.
TOTAL TO SCHEDULE D, PART XII, LINE 2D 628,114.
PART XII, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIPS 27,197,429.

WESTON RANCH FOUNDATION - EXPENSES -114,766.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 27,082,663.

PART XI AND PART XII:

THE CONSOLIDATED FINANCIAL STATEMENTS INCLUDE THE ACCOUNTS OF TLU AND THE WESTON RANCH FOUNDATION. THE PURPOSE OF THE FOUNDATION IS TO CONDUCT SUPPORTING ACTIVITIES FOR TLU IN CONNECTION WITH ITS ENVIRONMENTAL PROGRAMS, CAMPUS MINISTRIES AND COMMUNITY RELATIONS. THE FOUNDATION IS NOT INCLUDED IN TLU'S FORM 990 BECAUSE IT FILES A SEPARATE FORM 990.
### Schedule E (Form 990 or 990-EZ) 2019

#### Part I

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2. Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3. Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If &quot;Yes,&quot; please describe. If &quot;No,&quot; please explain.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4. Does the organization maintain the following?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Does the organization discriminate by race in any way with respect to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Students’ rights or privileges?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b. Admissions policies?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>c. Employment of faculty or administrative staff?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>d. Scholarships or other financial assistance?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>e. Educational policies?</td>
<td>X</td>
<td></td>
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<tr>
<td>f. Use of facilities?</td>
<td>X</td>
<td></td>
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<tr>
<td>g. Athletic programs?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>h. Other extracurricular activities?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6a. Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. Has the organization’s right to such aid ever been revoked or suspended?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>7. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If &quot;No,&quot; explain on Part II</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

---

**Name of the organization:** TEXAS LUTHERAN UNIVERSITY

**Employer identification number:** 74-1109748

---

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE UNIVERSITY RECEIVES FINANCIAL AID FROM THE FOLLOWING GOVERNMENTAL AGENCIES:

______________________________
TEXAS HIGHER EDUCATION COORDINATING BOARD

______________________________
UNITED STATE DEPARTMENT OF EDUCATION
### SCHEDULE F  
**Statement of Activities Outside the United States**

**2019**

**Department of the Treasury**  
**Internal Revenue Service**

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.  
Attach to Form 990.

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

Open to Public Inspection

**Name of the organization**

**TEXAS LUTHERAN UNIVERSITY**

**Employer identification number**

74-1109748

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>CENTRAL AMERICA AND THE CARIBBEAN</td>
<td>0</td>
<td>0</td>
<td>INVESTMENTS</td>
<td>N/A</td>
<td>12,356,004.</td>
</tr>
</tbody>
</table>

| 3 a Subtotal | 0 | 0 | | | 12,356,004. |
| 3 b Total from continuation sheets to Part I | 0 | 0 | | | 0. |
| 3 c Totals (add lines 3a and 3b) | 0 | 0 | | | 12,356,004. |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  
Schedule F (Form 990) 2019

OMB No. 1545-0047

932071  10-12-19
Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Name of organization</th>
<th>IRS code section and EIN (if applicable)</th>
<th>Region</th>
<th>Purpose of grant</th>
<th>Amount of cash grant</th>
<th>Manner of cash disbursement</th>
<th>Amount of noncash assistance</th>
<th>Description of noncash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</tbody>
</table>

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities
<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
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<tr>
<td></td>
<td>Question</td>
<td>Yes</td>
<td>No</td>
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</tr>
<tr>
<td>1</td>
<td>Was the organization a U.S. transferor of property to a foreign corporation during the tax year?</td>
<td>☒ Yes</td>
<td>☐ No</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>Did the organization have an interest in a foreign trust during the tax year?</td>
<td>☐ Yes</td>
<td>☒ No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization have an ownership interest in a foreign corporation during the tax year?</td>
<td>☐ Yes</td>
<td>☒ No</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>4</td>
<td>Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year?</td>
<td>☐ Yes</td>
<td>☒ No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization have an ownership interest in a foreign partnership during the tax year?</td>
<td>☐ Yes</td>
<td>☒ No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have any operations in or related to any boycotting countries during the tax year?</td>
<td>☐ Yes</td>
<td>☒ No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part V  Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
**Supplemental Information Regarding Fundraising or Gaming Activities**

**Part I. Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - Mail solicitations
   - Internet and email solicitations
   - Phone solicitations
   - In-person solicitations
   - Solicitation of non-government grants
   - Solicitation of government grants
   - Special fundraising events

2. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?
   - Yes
   - No

   If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
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</tbody>
</table>

**Total**

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

--------------------

---

LHA  For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Schedule G (Form 990 or 990-EZ) 2019
### Part II  Fundraising Events.

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross receipts</td>
<td>73,250.</td>
<td></td>
<td></td>
<td>73,250.</td>
</tr>
<tr>
<td>Less: Contributions</td>
<td>73,250.</td>
<td></td>
<td></td>
<td>73,250.</td>
</tr>
<tr>
<td>Gross income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Event #1</td>
<td>(event type)</td>
<td>(event type)</td>
<td>(total number)</td>
<td></td>
</tr>
</tbody>
</table>

#### Direct Expenses

<table>
<thead>
<tr>
<th>Event</th>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food and beverages</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>27.</td>
</tr>
<tr>
<td>Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>27.</td>
</tr>
<tr>
<td>Direct expense summary. Add lines 4 through 9 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>27.</td>
</tr>
<tr>
<td>Net income summary. Subtract line 10 from line 3, column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>27.</td>
</tr>
</tbody>
</table>

### Part III  Gaming.

Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash prizes</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
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<tr>
<td>Rent/facility costs</td>
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<td></td>
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<tr>
<td>Other direct expenses</td>
<td></td>
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</tr>
<tr>
<td>Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9  Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states?  
   ☐ Yes  ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  
   ☐ Yes  ☐ No

b If "Yes," explain:
Schedule G (Form 990 or 990-EZ) 2019  TEXAS LUTHERAN UNIVERSITY  74-1109748  Page 3

11 Does the organization conduct gaming activities with nonmembers?  
   ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  
   ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:
   a The organization’s facility  
   ☐ Yes ☐ No
   b An outside facility  
   ☐ Yes ☐ No

14 Enter the name and address of the person who prepares the organization’s gaming/special events books and records:

   Name ►
   Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  
   ☐ Yes ☐ No

   b If "Yes," enter the amount of gaming revenue received by the organization ► $ ____________ and the amount of gaming revenue retained by the third party ► $ ____________

   c If "Yes," enter name and address of the third party:

   Name ►
   Address ►

16 Gaming manager information:

   Name ►
   Gaming manager compensation ► $ ____________
   Description of services provided ►

   ☐ Director/office ☐ Employee ☐ Independent contractor

17 Mandatory distributions:
   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  
   ☐ Yes ☐ No

   b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ► $  

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
### 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.

#### Name of the organization

**TEXAS LUTHERAN UNIVERSITY**

| Employer identification number | 74-1109748 |

#### Part I

**General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

   ![Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

#### Part II

**Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3. Enter total number of other organizations listed in the line 1 table

**LHA**

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

Schedule I (Form 990) (2019)
## 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.

### Grants and Other Assistance to Domestic Individuals

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEDERAL AND STATE GRANTS AND INSTITUTIONAL SCHOLARSHIPS AWARDED TO STUDENTS</td>
<td>1453</td>
<td>27,197,429.</td>
<td>0</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

## Supplemental Information

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

### Part I, Line 2:

TLU follows the rules and regulations in terms of procedures provided by the U.S. Department of Education and all granting agencies. Private grants are handled by Development and Financial Services and all required reports are submitted to the Texas Higher Education Coordinating Board and appropriate agencies. Additionally, TLU undergoes an audit as set forth in the Single Audit Act and OMB Circular A-133.
Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel  
- [ ] Travel for companions  
- [ ] Tax indemnification and gross-up payments  
- [ ] Discretionary spending account  
- [X] Housing allowance or residence for personal use  
- [ ] Payments for business use of personal residence  
- [ ] Health or social club dues or initiation fees  
- [X] Personal services (such as maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- [X] Compensation committee  
- [ ] Independent compensation consultant  
- [X] Form 990 of other organizations  
- [X] Written employment contract  
- [X] Compensation survey or study  
- [X] Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren’t listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) DR. STUART DORSEY PRESIDENT (UNTIL 06/30/19)</td>
<td>(i) 225,243. 0. 0. 21,140. 3,662. 250,045. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DR. DEBBIE COTTRELL PRESIDENT</td>
<td>(i) 185,194. 0. 0. 11,828. 14,117. 211,139. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) JOHN ANDREW NELSON VP FOR FIN. &amp; ADMIN (UNTIL 02/07/20)</td>
<td>(i) 153,687. 0. 0. 9,367. 1,044. 164,098. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) SARAH STORY VP FOR ENROLLMENT, MARKETING &amp; COMMU</td>
<td>(i) 137,901. 0. 0. 8,565. 7,757. 154,223. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule J (Form 990) 2019
PART I, LINE 1A:
THE PRESIDENT RESIDES IN A HOME ON CAMPUS AS PART OF THE EMPLOYMENT CONTRACT. THE PRESIDENT ALSO RECEIVES MAID SERVICES FOR THE HOUSE.

PART I, LINE 1B:
THE ORGANIZATION FOLLOWS A WRITTEN POLICY PAYMENT ON REIMBURSEMENT OF ALL EXPENSES.
Name of the organization: TEXAS LUTHERAN UNIVERSITY

<table>
<thead>
<tr>
<th>Part I Bond Issues</th>
<th>SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(a)</strong> Issuer name</td>
<td><strong>(b)</strong> Issuer EIN</td>
</tr>
<tr>
<td>CITY OF OLmos PARK, TX</td>
<td>74-1109748</td>
</tr>
<tr>
<td>CITY OF OLmos PARK, TX</td>
<td>74-1109748</td>
</tr>
<tr>
<td>CITY OF OLmos PARK, TX</td>
<td>74-1109748</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D Part II Proceeds</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Amount of bonds retired</td>
<td>2,745,000.</td>
<td>2,275,000.</td>
<td>645,000.</td>
<td></td>
</tr>
<tr>
<td>2 Amount of bonds legally defeased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Total proceeds of issue</td>
<td>10,016,405.</td>
<td>10,000,000.</td>
<td>9,875,000.</td>
<td></td>
</tr>
<tr>
<td>4 Gross proceeds in reserve funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Capitalized interest from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Proceeds in refunding escrows</td>
<td>9,865,500.</td>
<td>5,090,000.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Issuance costs from proceeds</td>
<td>133,600.</td>
<td>134,500.</td>
<td>152,699.</td>
<td></td>
</tr>
<tr>
<td>8 Credit enhancement from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Working capital expenditures from proceeds</td>
<td>2,632,301.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Capital expenditures from proceeds</td>
<td>9,882,805.</td>
<td>2,000,000.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Other spent proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other unspent proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Year of substantial completion</td>
<td>2012</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)? | Yes | No |
| 15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)? | Yes | No |
| 16 Has the final allocation of proceeds been made? | Yes | No |
| 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? | Yes | No |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III  Private Business Use

**1.** Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?  
<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**2.** Are there any lease arrangements that may result in private business use of bond-financed property?  

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**3a.** Are there any management or service contracts that may result in private business use of bond-financed property?  

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>

- **b.** If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?  

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<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>

- **c.** Are there any research agreements that may result in private business use of bond-financed property?  

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<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</table>

- **d.** If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?  

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<th>D</th>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**4.** Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government.  

|   | % | % | % | % |

**5.** Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government.  

|   | % | % | % | % |

**6.** Total of lines 4 and 5.  

|   | % | % | % | % |

**7.** Does the bond issue meet the private security or payment test?  

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<th>C</th>
<th>D</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>

**8a.** Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?  

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<th>A</th>
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<th>C</th>
<th>D</th>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>

- **b.** If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.  

|   | % | % | % | % |

- **c.** If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?  

|   | Yes | No | Yes | No |

**9.** Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?  

|   | Yes | No | Yes | No |

### Part IV  Arbitrage

**1.** Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?  

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<th>D</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>

**2.** If "No" to line 1, did the following apply?  

- **a.** Rebate not due yet?  

<table>
<thead>
<tr>
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<th>A</th>
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<th>C</th>
<th>D</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

- **b.** Exception to rebate?  

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<thead>
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<th>A</th>
<th>B</th>
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<th>D</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

- **c.** No rebate due?  

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<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed.  

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<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**3.** Is the bond issue a variable rate issue?  

<table>
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<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
### Part IV  Arbitrage (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the organization or the governmental issuer entered into a qualified</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>hedge with respect to the bond issue?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Name of provider</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Term of hedge</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Was the hedge superintegrated?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was the hedge terminated?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were gross proceeds invested in a guaranteed investment contract (GIC)?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Name of provider</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Term of GIC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was the regulatory safe harbor for establishing the fair market value</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>of the GIC satisfied?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Were any gross proceeds invested beyond an available temporary period?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Has the organization established written procedures to monitor the</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>requirements of section 148?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

### Part V  Procedures To Undertake Corrective Action

<table>
<thead>
<tr>
<th>Question</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the organization established written procedures to ensure that</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>violations of federal tax requirements are timely identified and</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>corrected through the voluntary closing agreement program if self-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>remediation isn’t available under applicable regulations?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VI  Supplemental Information.

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

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: CITY OF OLMOS PARK, TX HIGHER ED FACILITIES CORP
(F) DESCRIPTION OF PURPOSE: CONSTRUCTION OF NEW RESIDENCE HALL

(A) ISSUER NAME: CITY OF OLMOS PARK, TX HIGHER ED FACILITIES CORP
(F) DESCRIPTION OF PURPOSE: TO REFUND OUTSTANDING OBLIGATIONS OF SERIES 2004 BOND

(A) ISSUER NAME: CITY OF OLMOS PARK, TX HIGHER ED FACILITIES CORP
(F) DESCRIPTION OF PURPOSE: TO REFUND OUTSTANDING OBLIGATIONS OF SERIES 2007 BOND, HVAC EXPANSION PROJ.
### Part I: Excess Benefit Transactions

<table>
<thead>
<tr>
<th>(a) Name of disqualified person</th>
<th>(b) Relationship between disqualified person and organization</th>
<th>(c) Description of transaction</th>
<th>(d) Corrected?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

1. Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958: $___

2. Enter the amount of tax, if any, on line 2, above, reimbursed by the organization: $___

### Part II: Loans to and/or From Interested Persons

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship with organization</th>
<th>(c) Purpose of loan</th>
<th>(d) Loan to or from the organization?</th>
<th>(e) Original principal amount</th>
<th>(f) Balance due</th>
<th>(g) In default?</th>
<th>(h) Approved by board or committee?</th>
<th>(i) Written agreement?</th>
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</thead>
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<td>To</td>
<td>From</td>
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<td>Yes</td>
<td>No</td>
<td>Yes</td>
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</tbody>
</table>

Total: $___

### Part III: Grants or Assistance Benefiting Interested Persons

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of assistance</th>
<th>(d) Type of assistance</th>
<th>(e) Purpose of assistance</th>
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</thead>
<tbody>
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization’s revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEWIS F. WESTERMAN</td>
<td>BOARD OF REGENTS, C</td>
<td>0.</td>
<td>BROTHERS DUANE</td>
<td>X</td>
</tr>
<tr>
<td>RUSSELL RINN</td>
<td>BOARD OF REGENTS</td>
<td>0.</td>
<td>MR. RINN OW</td>
<td>X</td>
</tr>
<tr>
<td>DR. STUART DORSEY</td>
<td>PRESIDENT (UNTIL 06</td>
<td>25,462</td>
<td>WIFE, MICHELLE DORSEY</td>
<td>X</td>
</tr>
</tbody>
</table>

**Part V Supplemental Information.**

Provide additional information for responses to questions on Schedule L (see instructions).

**SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:**

(A) **NAME OF PERSON: LEWIS F. WESTERMAN**

(B) **RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:**

BOARD OF REGENTS, CHAIR

(D) **DESCRIPTION OF TRANSACTION:** BROTHERS DUANE AND ALLEN WESTERMAN SERVE AS FINANCIAL ADVISORS TO TLU ON BOND FINANCING MATTERS. A BOND ISSUANCE OCCURRED 11/2016.

(A) **NAME OF PERSON: RUSSELL RINN**

(D) **DESCRIPTION OF TRANSACTION:** MR. RINN OWNS AN INTEREST IN THE KOEHLER COMPANY, WHICH PROVIDES CONSTRUCTION SERVICES TO TLU. KOEHLER COMPANY IS ALSO A PARTNER IN BARTLETT-COCKE/KOEHLER WHO ALSO PROVIDES CONSTRUCTION SERVICES TO TLU.

(A) **NAME OF PERSON: DR. STUART DORSEY**

(B) **RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:**

PRESIDENT (UNTIL 06/30/19)

(D) **DESCRIPTION OF TRANSACTION:** WIFE, MICHELLE DORSEY, WAS EMPLOYED BY TLU.
## Noncash Contributions

**Manager of the Treasury**
**Internal Revenue Service**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

**Employer identification number**

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check if applicable</td>
<td>Number of contributions or items contributed</td>
<td>Noncash contribution amounts reported on Form 990, Part VIII, line 1g</td>
<td>Method of determining noncash contribution amounts</td>
</tr>
</tbody>
</table>

**Part I: Types of Property**

1. Art - Works of art
2. Art - Historical treasures
3. Art - Fractional interests
4. Books and publications
5. Clothing and household goods
6. Cars and other vehicles
7. Boats and planes
8. Intellectual property
9. Securities - Publicly traded
10. Securities - Closely held stock
11. Securities - Partnership, LLC, or trust interests
12. Securities - Miscellaneous
13. Qualified conservation contribution - Historic structures
14. Qualified conservation contribution - Other
15. Real estate - Residential
16. Real estate - Commercial
17. Real estate - Other
18. Collectibles
19. Food inventory
20. Drugs and medical supplies
21. Taxidermy
22. Historical artifacts
23. Scientific specimens
24. Archeological artifacts
25. Other
26. Other
27. Other
28. Other
29. Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

** TEXAS LUTHERAN UNIVERSITY **

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
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</thead>
<tbody>
<tr>
<td>Check if applicable</td>
<td>Number of contributions or items contributed</td>
<td>Noncash contribution amounts reported on Form 990, Part VIII, line 1g</td>
<td>Method of determining noncash contribution amounts</td>
</tr>
</tbody>
</table>

- **Art - Works of art**: FAIR MARKET VALUE
- **Art - Historical treasures**: FAIR MARKET VALUE
- **Art - Fractional interests**: APPRAISED VALUE
- **Books and publications**: 832, FAIR MARKET VALUE
- **Clothing and household goods**: 254,444, FAIR MARKET VALUE
- **Real estate - Residential**: 200,000, APPRAISED VALUE
- **Collectibles**: 3,432, FAIR MARKET VALUE

**Part II: Other Information**

- **30a**: During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn’t required to be used for exempt purposes for the entire holding period?
  - Yes: **X**
- **31**: Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
  - Yes: **X**
- **32a**: Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
  - Yes: **X**

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

Schedule M (Form 990) 2019
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

REPORTING THE NUMBER OF CONTRIBUTIONS
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SEE FORM 990, PART III, LINE 1 FOR CONTINUATION OF MISSION STATEMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION (CONT):

AS A COMMUNITY OF LEARNING, THE UNIVERSITY STRESSES THE LIBERATING POTENTIAL OF THE DISCIPLINED PURSUIT OF ACADEMIC EXCELLENCE WITHIN THE CONTEXT OF ACADEMIC FREEDOM. ITS FACULTY AND STAFF SEEK TO ENGAGE EACH STUDENT IN A PROCESS OF SELF-EDUCATION WHICH WILL ASSIST HIM OR HER IN DEVELOPING AS AN INFORMED AND RESOURCEFUL PERSON IN TODAY'S RAPIDLY CHANGING WORLD. IT PROVIDES AN ACADEMIC PROGRAM BASED UPON THE TRADITION OF THE LIBERAL ARTS AND DESIGNED TO SERVE A DIVERSIFIED COMMUNITY.

AS A COMMUNITY OF FAITH, THE UNIVERSITY CELEBRATES THE LIBERATING POWER OF GOSPEL AS APPLIED TO THE WHOLE OF HUMAN LIFE. THE BIBLICAL VISION OF THE WORLD AS CREATED, JUDGED, REDEEMED AND FULFILLED BY GOD IN CHRIST IS RICH IN SIGNIFICANCE FOR THE WORK AND HOPES OF PERSONS TODAY. IT IS THE UNIQUE PRIVILEGE AND RESPONSIBILITY OF THE CHRISTIAN UNIVERSITY TO EXPLORE THESE IMPLICATIONS FREELY AND BOLDLY. THUS IT LEADS THE CHURCH TO FACE THE CHALLENGE OF NEW INSIGHTS AND TO FORMULATE FRESH MEANS OF CREATIVE SERVICE.

AS AN INSTITUTION OF THE CHURCH, THE UNIVERSITY PROVIDES AN EDUCATION IN THE ARTS AND SCIENCES WHICH IS GIVEN PERSPECTIVE BY THE CHRISTIAN FAITH. THIS FUNCTION IS CARRIED OUT THROUGH AN UNDERGRADUATE CURRICULUM.
LEADING TO THE BACHELOR'S DEGREE, A DIVERSE CONTINUING EDUCATION PROGRAM, AND A VARIETY OF CO-CURRICULAR PROGRAMS. THE UNIVERSITY ENCOURAGES STUDENTS TO PARTICIPATE IN SERVICE WORK TIED TO REFLECTIVE DISCUSSIONS ABOUT ITS PLACE IN THEIR LIVES.


FORM 990, PART VI, SECTION A, LINE 7A:

FORM 990, PART VI, SECTION B, LINE 11B:
THE VICE PRESIDENT OF FINANCE REVIEWS THE FORM 990 AND EMAILS AN ELECTRONIC COPY OF THE RETURN TO THE BOARD OF REGENTS FOR THEIR REVIEW. THE BOARD IS
GIVEN ONE WEEK TO PROVIDE COMMENTS. AT THE END OF THE COMMENT PERIOD ANY
REQUESTED CHANGES ARE MADE AND THE RETURN IS FILED.

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

EACH YEAR, BOARD MEMBERS SIGN A CONFLICT OF INTEREST STATEMENT. WE HAVE
SUCH STATEMENTS SIGNED BY EVERY MEMBER OF THE BOARD. IF THERE IS A CONFLICT
OF INTEREST, THE BOARD IS MADE AWARE OF THIS AND THE BOARD MEMBER INVOLVED
DOES NOT SPEAK OR VOTE ON THOSE RELATED ISSUES.

FORM 990, PART VI, SECTION B, LINE 15A:

THE PROCESS FOR DETERMINING COMPENSATION FOR THE ORGANIZATION'S CEO,
EXECUTIVE DIRECTOR, AND TOP MANAGEMENT OFFICIAL INCLUDE A REVIEW AND
APPROVAL BY THE BOARD OF REGENTS. THE COMPENSATION COMMITTEE REVIEWS THE
PRESIDENT'S COMPENSATION AND MAKES A RECOMMENDATION TO THE BOARD OF
REGENTS. COMPENSATION FOR OTHER INDIVIDUALS ARE SET AT THE PRESIDENT'S
DISCRETION.

FORM 990, PART VI, SECTION C, LINE 18:

THREE YEARS OF 990 IS AVAILABLE ON WEBSITE. 990-T IS AVAILABLE UPON
REQUEST.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICTS OF INTEREST POLICY IS
AVAILABLE TO THE PUBLIC UPON REQUEST; THE THREE MOST RECENT FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGES IN SPLIT-INTEREST AGREEMENTS -174,270.
FORM 990, PART IV, LINE 12, AUDITED FINANCIAL STATEMENTS:

THE FINANCIAL STATEMENTS WERE AUDITED BY AN INDEPENDENT ACCOUNTANT. THE ORGANIZATION DOES HAVE A COMMITTEE THAT IS RESPONSIBLE UNDER ITS GOVERNING DOCUMENTS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.
# SCHEDULE R (Form 990)

## Related Organizations and Unrelated Partnerships

- Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- Go to www.irs.gov/Form990 for instructions and the latest information.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEXAS LUTHERAN UNIVERSITY</td>
<td>74-1109748</td>
</tr>
</tbody>
</table>

## Part I

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

<table>
<thead>
<tr>
<th>Name, address, and EIN (if applicable)</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Total income</th>
<th>End-of-year assets</th>
<th>Direct controlling entity</th>
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<tbody>
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</table>

## Part II

**Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>Name, address, and EIN of related organization</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Exempt Code section</th>
<th>Public charity status (if section 501(c)(3))</th>
<th>Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>WESTON RANCH FOUNDATION - 71-0932352</td>
<td></td>
<td></td>
<td></td>
<td>501(C)(3)</td>
<td>X</td>
</tr>
<tr>
<td>1000 W COURT ST</td>
<td>SUPPORT TEXAS LUTHERAN</td>
<td>TEXAS</td>
<td></td>
<td>LINE 12A, I UNIVERISTY</td>
<td></td>
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<tr>
<td>SEGUIN, TX 78155</td>
<td>UNIVERSITY</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III
**Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
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<td>Yes</td>
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</table>

### Part IV
**Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
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</thead>
<tbody>
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<td>Yes</td>
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</tbody>
</table>

**Schedule R (Form 990) 2019**

**TEXAS LUTHERAN UNIVERSITY**

**74-1109748**

**Page 2**
**Part V  Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

### Note:
- Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.
- If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

#### 1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- **a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- **b** Gift, grant, or capital contribution to related organization(s)
- **c** Gift, grant, or capital contribution from related organization(s)
- **d** Loans or loan guarantees to or for related organization(s)
- **e** Loans or loan guarantees by related organization(s)
- **f** Dividends from related organization(s)
- **g** Sale of assets to related organization(s)
- **h** Purchase of assets from related organization(s)
- **i** Exchange of assets with related organization(s)
- **j** Lease of facilities, equipment, or other assets to related organization(s)
- **k** Lease of facilities, equipment, or other assets from related organization(s)
- **l** Performance of services or membership or fundraising solicitations for related organization(s)
- **m** Performance of services or membership or fundraising solicitations by related organization(s)
- **n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- **o** Sharing of paid employees with related organization(s)
- **p** Reimbursement paid to related organization(s) for expenses
- **q** Reimbursement paid by related organization(s) for expenses
- **r** Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

#### 2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>Name of related organization</th>
<th>Transaction type (a-s)</th>
<th>Amount involved</th>
<th>Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(1) WESTON RANCH FOUNDATION</strong></td>
<td>C</td>
<td>82,499</td>
<td>CASH</td>
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<td><strong>(2)</strong></td>
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</tbody>
</table>
**Part VI Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners sec. 501(c)(3) orgs.?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>74-1109748 TEXAS LUTHERAN UNIVERSITY</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.
## Application for Automatic Extension of Time To File an Exempt Organization Return

**File by the due date for filing your return.**  
**Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Type or print**  
File by the due date for filing your return. See instructions.

<table>
<thead>
<tr>
<th>Name of exempt organization or other filer, see instructions.</th>
<th>Taxpayer identification number (TIN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEXAS LUTHERAN UNIVERSITY</td>
<td>74-1109748</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number, street, and room or suite no. If a P.O. box, see instructions.</th>
<th>City, town or post office, state, and ZIP code. For a foreign address, see instructions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1000 WEST COURT STREET</td>
<td>SEGUIN, TX 78155</td>
</tr>
</tbody>
</table>

Enter the Return Code for the return that this application is for (file a separate application for each return).

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or Form 990-EZ</td>
<td>01</td>
<td>Form 990-T (corporation)</td>
<td>07</td>
</tr>
<tr>
<td>Form 990-BL</td>
<td>02</td>
<td>Form 1041-A</td>
<td>08</td>
</tr>
<tr>
<td>Form 4720 (individual)</td>
<td>03</td>
<td>Form 4720 (other than individual)</td>
<td>09</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>04</td>
<td>Form 5227</td>
<td>10</td>
</tr>
<tr>
<td>Form 990-T (sec. 401(a) or 408(a) trust)</td>
<td>05</td>
<td>Form 6069</td>
<td>11</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
<td>Form 8870</td>
<td>12</td>
</tr>
</tbody>
</table>

**EDIE RICHARDSON, VP FOR FINANCE**  
Telephone No. ★ 830-372-8016 ★ Fax No. ★

- If the organization does not have an office or place of business in the United States, check this box  
- If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) __________. If this is for the whole group, check this box __________. If it is for part of the group, check this box __________ and attach a list with the names and TINs of all members the extension is for.

- **The books are in the care of**: ★ 1000 WEST COURT STREET - SEGUIN, TX 78155 ★

1. I request an automatic 6-month extension of time until **APRIL 15, 2021**, to file the exempt organization return for the organization named above. The extension is for the organization’s return for:
   - ★ calendar year ★
   - ★ X tax year beginning **JUN 1, 2019**, and ending **MAY 31, 2020**.

2. If the tax year entered in line 1 is for less than 12 months, check reason:
   - Initial return ★
   - Final return ★
   - Change in accounting period ★

3a. If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  
   - **3a** $ 0.

b. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated taxes payments made. Include any prior year overpayment allowed as a credit.  
   - **3b** $ 0.

c. **Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  
   - **3c** $ 0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

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**Form 8868 (Rev. 1-2020)**  
**OMB No. 1545-0047**  
**923841 12-30-19**