Form 99	D
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Department of the Treasury

Internal Revenue Service

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Α	For th	e 2023 calendar year, or tax year beginning and	ending		
В	Check if applicab	le: C Name of organization		D Employer identifica	ation number
	Addre	WACO I.S.D. EDUCATION FOUNDATION			
	Name			74-272876	5
	Initial returr		Room/suite	E Telephone number	
	Final return	V P.O. BOX 2369		254-755-9	
_	termii ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	506,109.
	Amen	WACO, IA 70703		H(a) Is this a group ret	
	Appli tion pendi			for subordinates?	
		SAME AS C ABOVE		H(b) Are all subordinates inc	
		tempt status: $X 501(c)(3) 501(c)() (insert no.) 4947(a)(1)$	or 527		st. See instructions
-	Websi			H(c) Group exemption	
	art I		L Year	of formation: 1994[M	State of legal domicile: TX
		Briefly describe the organization's mission or most significant activities: THE		SD EDUCATION	г
Activities & Governance	'	FOUNDATION STRIVES TO FUND CREATIVE, EDU	CATTON	AL PROGRAMS	AND
nar	2	Check this box if the organization discontinued its operations or dispo			
ver	3				26
ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	0.	4	26
8 8	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		5	0
vitie		Total number of volunteers (estimate if necessary)		6	36
(cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_		Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		95,606.	185,003.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Rev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		183,585.	40,331.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c 10c, and 11e)		118,371.	128,593.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		397,562. 264,077.	353,927.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		204,077.	240,659.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ben	l loa	Total fundraising expenses (Part IX, column (A), line 11e)	37.		••
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		26,372.	17,284.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		290,449.	257,943.
		Revenue less expenses. Subtract line 18 from line 12		107,113.	95,984.
Or			Be	ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		5,243,333.	5,959,042.
dBst	21	Total liabilities (Part X, line 26)		248,077.	231,483.
		Net assets or fund balances. Subtract line 21 from line 20		4,995,256.	5,727,559.
Pa	art II	Signature Block			

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

Sign	Signature of officer		Da	te
	STEVE MYATT, TREASURER			
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	SHARON M. HERWALD, CPA			if self-employed P00079864
Preparer	Firm's name PATTILLO, BROWN &	HILL, L.L.P.	Fir	m'sEIN 74-1130599
Use Only	Firm's address P. O. BOX 20725			
	WACO, TX 76702-07	25	Ph	one no. (254) 772-4901
May the II	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No
LHA For	Paperwork Reduction Act Notice, see the separ	rate instructions. 332001 12-21-23		Form 990 (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form		728765	Page 2
Pa	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission: THE WACO ISD EDUCATION FOUNDATION STRIVES TO FUND CREATIVE,		
	EDUCATIONAL PROGRAMS AND PROJECTS NOT COVERED BY SCHOOL BUDG	ETS OR 7	ГАХ
	DOLLARS, THUS OUR MOTTO, "RAISING THE POWER OF EDUCATION!"	MORE THA	AN
	93% OF ALL FOUNDATION EXPENSES FUND WACO ISD CLASSROOM GRANT	'S AND	
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	XNo
	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	XNo
	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 measure	d by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to	tal expenses, a	Ind
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 196,784. including grants of \$ 196,784.) (Revenue \$)
	BY FUNDING INNOVATIVE EDUCATOR GRANTS, THE WACO ISD EDUCATIO	N	
	FOUNDATION IS ABLE TO IMPACT OUR STUDENTS, TEACHERS, CLASSRO		
	ENTIRE DISTRICT. THE FOUNDATION SEEKS TO PROVIDE FUNDING FOR	WACO IS	SD
	TEACHERS AND SCHOOLS BY AWARDING GRANTS IN FOUR FOCUS AREAS:	EARLY	
	CHILDHOOD DEVELOPMENT, ENHANCED PROGRAMMING FOR ADVANCED STU		
	EXTENDED EDUCATION FOR STAFF, AND EMPHASIS ON STUDENT PERFOR	MANCE. 7	ГО
	DATE, THE FOUNDATION HAS AWARDED OVER \$2,259,972 IN 618 GRAN	TS TO W	ISD
	TEACHERS.		
4b)
	SCHOLARSHIPS ARE AN OPPORTUNITY TO RECOGNIZE STUDENTS FOR TH		
	ACADEMIC ACHIEVEMENTS, LEADERSHIP AND COMMUNITY INVOLVEMENT	AS WELL	AS
	A CONDUIT TO PROVIDE HIGHER EDUCATION OPPORTUNIIES. SCHOLARS		Ξ
	ALSO A GREAT MEMORIAL TO LOVED ONES AND PROVIDE A LASTING LE	GACY. TO	C
		WACO IS	SD
	GRADUATES.		
	· · · · · · · · · · · · · · · · · · ·		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
<u> </u>			
4d		`	
<u> </u>	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 240,659.)	
<u>4e</u>	Total program service expenses 240,659.		90 (2023)
			~~ (2023)

Form	990	(2023)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
F	during the tax year? <i>If "Yes," complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		<u></u>
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	110		x
b	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a		
D.	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	115		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		- 23
5	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		77	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			x
20-	complete Schedule G, Part III	19 20a		X
20a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		- 23
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			37
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
_	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	200	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			<u>-</u> -
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051		
26	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b U Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	Х	

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Form	990 (2023) WACO I.S.D. EDUCATION FOUNDATION 74-2728	765	P	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10	amounts due or received from them.)	10		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans 13b 13c			
		140		х
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		- 23
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
15		15		x
	excess parachute payment(s) during the year?	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
10	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form 990 (2023)

WACO I.S.D. EDUCATION FOUNDATION

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26			
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
-	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	-		
Ū	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6		6		X
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
/ d		70		x
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		- 23
D		76		x
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		- 23
8		0-	х	
	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
<u></u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	v	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		v	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		77	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finar	ncial	
	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			
	STEPHANIE HINES - 254-755-9510			
	501 FRANKLIN AVE, 3RD FLOOR, WACO, TX 76701			

Part VII	Co	pensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
	Em	ployees, and Independent Contractors

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

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

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

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

	1	1				npo				
(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	ntior more	1 than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot pr/trus	h an	compensation	compensation	amount of
	week	<u> </u>	cer an	ia a a	recio) T	lee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for	or di	e,			ated		organization	(W-2/1099-MISC/	from the
	related	stee	ruste		a.	pensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal 1		oloye	com g		1099-NEC)		and related
	below	lividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	Ē	<u> </u>	£	Ke	е, <u>щ</u>	ē			
(1) STEPHANIE HINES	20.00									
EXECUTIVE DIRECTOR		х		Х				73,328.	0.	6,057.
(2) TAYLOR BLEDSOE	2.00					C	0			
CHAIR		Х		х				0.	0.	0.
(3) CHARLOTTE HENDERSON	1.00					\mathcal{D}				
VICE CHAIR		Х		Х				0.	0.	0.
(4) RACHEL WILDE	1.00									
SECRETARY	•	X		X				0.	0.	0.
(5) STEVE MYATT	1.00									
TREASURER		X		X				0.	0.	0.
(6) DR SUSAN KINCANNON	1.00									
DIRECTOR		Х						0.	0.	0.
(7) TONY BROWN	1.00									
DIRECTOR		X						0.	0.	0.
(8) DAN CASTILLO	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JULIE CARLSON	1.00									
DIRECTOR		Х						0.	0.	0.
(10) ANNA CLARK-MARTINEZ	1.00									
DIRECTOR		X						0.	0.	0.
(11) RUTH JACKSON	1.00									
DIRECTOR		X						0.	0.	0.
(12) BRYAN FONVILLE	1.00									
DIRECTOR		X						0.	0.	0.
(13) KIRA HANEY	1.00									
DIRECTOR		X						0.	0.	0.
(14) LONDRIA GILMORE	1.00									
DIRECTOR		X						0.	0.	0.
(15) KIM KLARAS	1.00									
DIRECTOR		Х						0.	0.	0.
(16) MEGAN HENDERSON	1.00									
DIRECTOR		Х						0.	0.	0.
(17) ROMAN NOVIAN	1.00									
DIRECTOR		Х						0.	0.	0.
										D (0000)

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WACO I.S.D. EDUCATION FOUNDATION

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	not of	Pos	ition) than	000	Reportable	Reportable	Estimated
	hours per	box,	, unles	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	or di	æ			ated			(W-2/1099-MISC/	from the
	organizations	ustee	truste		æ	suadu		(W-2/1099-MISC/	1099-NEC)	organization
	below	ual tr	tional		ploye	t con /ee		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) JIM PATTON	1.00	L	-	0	зх Х	Ξē	ш.			
DIRECTOR	1.00	х						0.	Ο.	0.
(19) ROCKI HORNE	1.00								•••	••
DIRECTOR	1.00	х						0.	ο.	0.
(20) MARYANN RIGGS	1.00									••
DIRECTOR	1.00	х						0.	ο.	0.
(21) KHRISTIAN HOWARD	1.00									••
DIRECTOR	1.00	х						0.	Ο.	0.
(22) TY ANDERSON	1.00	23							0.	
DIRECTOR	1.00	х						0.	ο.	0.
(23) EMILY HUNT-HINOJOSA	1.00	Δ							• •	0.
DIRECTOR	1.00	х						0.	ο.	0.
(24) MELISSA JOHNSON	1.00	23								
DIRECTOR	1.00	х						0.	ο.	0.
(25) KELLY LAWSON	1.00								•••	••
DIRECTOR	1.00	х						0.	Ο.	0.
(26) ANNETTE PEREZ	1.00								•••	••
DIRECTOR	1.00	х				N	0	0.	Ο.	0.
dh. Cubtatal								73,328.	0.	6,057.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)								73,328.	0.	6,057.
2 Total number of individuals (including but n				 d al			 20 r		-	0,00,0
compensation from the organization				u a	5000	<i></i>	10 11			0
compensation from the organization										Yes No
3 Did the organization list any former officer,	director truete	، ا مد		mn	love		r hio	hest compensated employ		
line 1a? If "Yes," complete Schedule J for s										3 X
4 For any individual listed on line 1a, is the su								her compensation from the	organization	
and related organizations greater than \$150									organization	4 X
5 Did any person listed on line 1a receive or a									al for services	
rendered to the organization? If "Yes," com	-				-			-		5 X
Section B. Independent Contractors			0. 00		00/0					<u> </u>
1 Complete this table for your five highest co	mpensated inc	lepe	ende	nt c	onti	racto	ors t	hat received more than \$1	00.000 of compensi	ation from
the organization. Report compensation for	-	-							· ·	
(A)								(B)		(C)
Name and business	address	NC	ONE	2				Description of serv	vices C	ompensation
							1			
2 Total number of independent contractors (i	ncluding but n	ot lir	nited	d to		-	stec	above) who received more	e than	
\$100,000 of company time from the					- (n				

Form 990 WACO I.S.	D. EDUC	CAT	CIC	ON	FC	UUC	ND2	ATION	74-272	8765
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	(cł		Pos all t		app	lv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any						.,,,	from the organization	from related organizations (W-2/1099-MISC)	other compensation from the
	hours for related organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	~	(W-2/1099-MISC)		organization and related organizations
	line)	Individ	Institu	Officer	Keyer	Highe	Former			
(27) DR HAZEL ROWE DIRECTOR	1.00	x						0.	0.	0.
(28) EVERETT PHIPPS (12/13-12/31)	1.00	- 23								
DIRECTOR		x						0.	0.	0.
(29) TYLER TALBERT (12/13-12/31)	1.00									
DIRECTOR		х						0.	0.	0.
								0		
						C	6	~		
			-		C	Ď				
	•	C	5							
	\frown									
	5									
Total to Part VII, Section A, line 1c										

Form 990 (20	
Part VIII	

3) WACO I.S.D. EDUCATION FOUNDATION Statement of Revenue

(A) (B) (C) Total revenue Total revenue Related or exempt function revenue Unrelated business reven stars 1 a 1a 1b 1c 115,111. c Fundraising events 1d 1c 115,111. d Related organizations 1d 1e 1c 115,111. e Government grants (contributions) 1e 1f 69,892. 185,003. g Noncash contributions included in lines 1a-1f 185,003. 185,003. 185,003.	(D) Revenue excluded from tax under sections 512 - 514
1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d	
b Membership dues 1b c Fundraising events 1c 115,111. d Related organizations 1d	
c Fundraising events 1c 115,111. d Related organizations 1d	
d Related organizations 1d	
e Government grants (contributions) 1e	
f All other contributions, gifts, grants, and	
similar amounts not included above 1f 69,892.	
g Noncash contributions included in lines 1a-1f	
Business Code	
La contraction con	
e f f All other program service revenue	
g Total. Add lines 2a-2f	
3 Investment income (including dividends, interest, and	
other similar amounts) 148,194.	148,194.
4 Income from investment of tax-exempt bond proceeds	
5 Royalties	
(i) Real (ii) Personal	
6 a Gross rents 6a	
b Less: rental expenses 6b	
c Rental income or (loss) 6c	
d Net rental income or (loss)	
7 a Gross amount from sales of (i) Securities (ii) Other	
assets other than inventory 7a	
b Less: cost or other basis	
and sales expenses 7b 107,863. c Gain or (loss) 7c -107,863.	
	107.962
d Net gain or (loss)107,863.	-107,863.
B a Gross income from fundraising events (not including \$ 115, 111, of	
contributions reported on line 10. See	
Part IV, line 18	
b Less: direct expenses	
c Net income or (loss) from fundraising events	38,751.
9 a Gross income from gaming activities. See	
Part IV, line 19 9a	
b Less: direct expenses	
c Net income or (loss) from gaming activities	
10 a Gross sales of inventory, less returns	
and allowances 10a	
b Less: cost of goods sold 10b	
c Net income or (loss) from sales of inventory	
Business Code Business Code 900099 89,842. 89,842.	
	+
Solution c	
e Total. Add lines 11a-11d	
	0. 79,082.

WACO I.S.D. EDUCATION FOUNDATION

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

De	Check if Schedule O contains a respon	ise or note to any line in (A)	this Part IX	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	1 6 0 0 0 4	1 6 0 0 0 4		
_	and domestic governments. See Part IV, line 21	169,284.	169,284.		
2	Grants and other assistance to domestic	71 275	71 275		
_	individuals. See Part IV, line 22	71,375.	71,375.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
~	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes		·····		
11	Fees for services (nonemployees):				
a	Management				
b	F	E 7/E		E 74E	
С	Accounting	5,745.	S	5,745.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)			1 5 0	
12	Advertising and promotion	150.		150. 2,920.	1 1 2 7
13	Office expenses	4,057.		2,920.	1,137
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2 (24		2 () (
19	Conferences, conventions, and meetings	3,624.		3,624.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,157.		2,157.	
23		4,15/.		2,10/.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	TEACHER APPRECIATION	1,551.		1,551.	
b					
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	257,943.	240,659.	16,147.	1,137
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

	rt X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		15,594.	1	27,588.
	2	Savings and temporary cash investments		173,736.	2	213,773.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		10,000.	4	20,000.
	5	Loans and other receivables from any current of	former officer, director,			
		trustee, key employee, creator or founder, subs	tantial contributor, or 35%			
		controlled entity or family member of any of the		5		
	6	Loans and other receivables from other disquali				
		under section 4958(f)(1)), and persons described			6	
Assets	7	Notes and loans receivable, net			7	
SS	8	Inventories for sale or use		1 000 (8	1 000
4	9			1,000.	9	1,000.
	10a	, 3, 11				
		basis. Complete Part VI of Schedule D				
	b				10c	
	11	Investments - publicly traded securities		F 0 4 2 0 0 2	11	
	12	Investments - other securities. See Part IV, line -		5,043,003.	12	5,696,681.
	13	Investments - program-related. See Part IV, line		-	13	
	14	Intangible assets			14	

	b	Less: accumulated depreciation 10b			10	c
	11	Investments - publicly traded securities			1	
	12	Investments - other securities. See Part IV, line 11		5,043,	003. 12	5,696,681.
	13	Investments - program-related. See Part IV, line 11			13	3
	14	Intangible assets			14	<u>ا</u>
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		5,243,		
	17	Accounts payable and accrued expenses			002. 17	
	18	Grants payable			575. 18	
	19	Deferred revenue		10,	500.19	39,500.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule			2	<u> </u>
es	22	Loans and other payables to any current or former officer, director	3			
iliti		trustee, key employee, creator or founder, substantial contributor,	or 35%			
Liabilities					22	2
	23	Secured mortgages and notes payable to unrelated third parties			23	3
	24	Unsecured notes and loans payable to unrelated third parties			24	<u> </u>
	25	Other liabilities (including federal income tax, payables to related the				
		parties, and other liabilities not included on lines 17-24). Complete	Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		248,	077.26	3 231,483.
s		Organizations that follow FASB ASC 958, check here				
Ce		and complete lines 27, 28, 32, and 33.				
alar	27	Net assets without donor restrictions		1,999,	138. 27	2,639,302.
Ä	28	Net assets with donor restrictions		2,996,	118. 28	3,088,257.
ŭ		Organizations that do not follow FASB ASC 958, check here				
г Т		and complete lines 29 through 33.				
tse	29	Capital stock or trust principal, or current funds			29	·
sse	30	Paid-in or capital surplus, or land, building, or equipment fund			30)
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other fun			3-	
Ne	32	Total net assets or fund balances		4,995,		
	33	Total liabilities and net assets/fund balances		5,243,	333. 33	
						Form 990 (2023)

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Part XI Reconciliation of Net Assets

	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			3,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2			7,9	
3	Revenue less expenses. Subtract line 2 from line 1					84.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4	,99	5,2	56.
5	Net unrealized gains (losses) on investments	5		67	5,8	79.
6	Donated services and use of facilities	6				
7	Investment expenses	7		-3	9,5	60.
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	5	<u>,</u> 72'	7,5	59.
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		÷			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	О.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990 (2023)
	.*.()					
	RUDIO					

WACO I.S.D. EDUCATION FOUNDATION

(Form 990)

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.

OMB No. 1545-0047
2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service		Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection			
Name of the organization			<u>e e e e e e e e e e e e e e e e e e e </u>					Employer	identification number	
		•	WACO	I.S.D. ED	UCATION FOUN	DATIO	N			4-2728765
Pa	rt I	Reason			(All organizations must o			ee instructio	ns.	
The	organ				(For lines 1 through 12, c					
1		A church, co	nvention of ch	urches, or associatio	on of churches describe	d in sectio	on 170(b)(1)(A)(i).		
2		A school des	cribed in sect i	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4		A medical res	search organiz	ation operated in co	njunction with a hospita	l describe	d in sectio	n 170(b)(1)(A	(iii). Enter	the hospital's name,
		city, and state:								
5		An organizati	on operated fo	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit descrik	bed in
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, sta	ite, or local go	vernment or governr	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organizati	on that norma	Illy receives a substa	Intial part of its support f	from a gov	ernmental	unit or from	the general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					\mathbf{V}	
8		A community	r trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultur	al research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	a land-grant	college
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, cit	, and state o	of the colleg	e or
		university:								
10					than 33 1/3% of its sup					
		activities rela	ted to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of	its support	from gross investment
		income and ι	unrelated busir	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	ired by the o	rganization	after June 30, 1975.
				mplete Part III.)						
11					ively to test for public sa					
12					ively for the benefit of, to					
					ed in section 509(a)(1) o					Check the box on
					of supporting organizatio					
а					supervised, or controlled					
					gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting
				complete Part IV, Se					<i>.</i>	
b					d or controlled in connec					
			-		anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	ρροπεα
-				t complete Part IV,		in connoc	tion with	and function	lluintoarat	ad with
с					g organization operated				any megrati	ea with,
d			-		b). You must complete l porting organization oper				ated organi	zation(a)
u					zation generally must sa					
					nplete Part IV, Sections				iu an alleni	IVEIIE33
е		- ·			written determination fro					
Ũ					nally integrated support			x 1 ypo 1, 1 ypo	s n, type m	
f	Ente			• •		ing organi	Lation			
g				n about the supporte						
	(i) Name of supp	orted	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed ing document?	(v) Amount c	of monetary	(vi) Amount of other
		organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)
Tota	l I									

Schedule A (Form 990) 2023

WACO I.S.D. EDUCATION FOUNDATION

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

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	214,546.	144,569.	202,912.	220,787.	99,467.	882,281.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge \dots							
4	Total. Add lines 1 through 3	214,546.	144,569.	202,912.	220,787.	99,467.	882,281.	
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)							
	Public support. Subtract line 5 from line 4.				7		882,281.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022 220,787.	(e) 2023 99,467.	(f) Total 882,281.	
7	Amounts from line 4	214,546.	144,569.	202,912.	220,787.	99,467.	882,281.	
8	Gross income from interest,			6				
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources \dots	49,263.	65,420.	142,263.	166,326.	148,194.	571,466.	
9	Net income from unrelated business							
	activities, whether or not the	•	5					
	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							1,453,747.	
12	Gross receipts from related activities,					12		
13	First 5 years. If the Form 990 is for th		rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)		
800	organization, check this box and stor		rooptogo					
-	ction C. Computation of Publ		-	L			60.69 %	
	Public support percentage for 2023 (14	<u> </u>	
	Public support percentage from 2022					15	7-	
16a	33 1/3% support test - 2023. If the o	-						
	stop here. The organization qualifies							
D	33 1/3% support test - 2022. If the c							
47-	and stop here. The organization qual							
17a	10% -facts-and-circumstances tes							
	and if the organization meets the fact			-		-		
1-	meets the facts and circumstances to	•			•	17a and lina 15 ia		
D	10% -facts-and-circumstances tes						10% OF	
	more, and if the organization meets the							
10	organization meets the facts-and-circ		-					
10	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							

Schedule A (Form 990) 2023

WACO I.S.D. EDUCATION FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e)) 2023	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus- iness under section 513					,		
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf					N	Ť	
5	The value of services or facilities furnished by a governmental unit to the organization without charge				C			
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
	3 received from disqualified persons				$\boldsymbol{\mathcal{O}}$			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			S				
c	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	•						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3	3) organizati	ion,
	check this box and stop here							
Sec	ction C. Computation of Publ	ic Support Pe	ercentage					
15	Public support percentage for 2023 (line 8, column (f), c	divided by line 13,	column (f))		15		%
16	Public support percentage from 2022	Schedule A, Part	: III, line 15			16		%
	ction D. Computation of Inve							
17	Investment income percentage for 20)23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17		%
18	Investment income percentage from	2022 Schedule A,	Part III, line 17			18		%
19a	33 1/3% support tests - 2023. If the	organization did r				33 1/3%	, and line 1	7 is not
	more than 33 1/3%, check this box a	-						
b	33 1/3% support tests - 2022. If the						ı 33 1/3%, ;	and
	line 18 is not more than 33 1/3%, che	eck this box and st	op here. The orga	nization qualifies	as a publicly supp	orted or	ganization	
20	Private foundation. If the organization			•			•	
	23 12-21-23							(Form 990) 2023

1

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990) 2023 WACO I.S.D. EDUCATION FOUNDATION

Pa	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruction	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **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.*

2a

2b

3a

	(Form 990)	
Part V	Type III	Non

(Form 990) 2023				FOUNDATION
Type III Non-Funct	ionally In	tegrated 5	09(a)(3) Support	ting Organizations

1	Check here if the organization satisfied the Integral Part Test as a qualifying All other Type III non-functionally integrated supporting organizations must c			rt VI). See instructions.
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			•
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d (
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integr	ated Type III supporting organ	nization (see

instructions).

Schedule A (Form 990) 2023

Schedule A	(Form 990)	2023
Julieuule A	(101111330)	2020

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Section D - Distributions Current Year								
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1					
2	Amounts paid to perform activity that directly furthers exemp							
	organizations, in excess of income from activity		2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	ns 3					
4	Amounts paid to acquire exempt-use assets		4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5					
6	Other distributions (describe in Part VI). See instructions.		6					
7	Total annual distributions. Add lines 1 through 6.		7					
8	Distributions to attentive supported organizations to which the	he organization is responsive	e					
	(provide details in Part VI). See instructions.		8					
9	Distributable amount for 2023 from Section C, line 6		9					
10	Line 8 amount divided by line 9 amount		10					
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023				
_1	Distributable amount for 2023 from Section C, line 6			·				
2	Underdistributions, if any, for years prior to 2023 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2023							
a	From 2018							
b	From 2019							
C	From 2020							
d	From 2021							
e	From 2022							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2023 distributable amount							
i	Carryover from 2018 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2023 from Section D,							
	line 7: \$							
a	Applied to underdistributions of prior years							
b	Applied to 2023 distributable amount							
C	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2023, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2023. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2024. Add lines 3j and 4c.							
8	Breakdown of line 7:							
a	Excess from 2019							
b	Excess from 2020							
с	Excess from 2021							
d	Excess from 2022							
е	Excess from 2023							

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	WACO	I.S.D.	EDUCATION	FOUNDATION	74-2728765 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, lines 2 and	4b, 4c, 5a, 6, 3; Part IV, Se	9a, 9b, 9c, 11a, 11b ection E, lines 1c, 2a,	, and 11c; Part IV, Section	ne 17a or 17b; Part III, line 12; B, lines 1 and 2; Part IV, Section C, a 1; Part V, Section B, line 1e; Part V,
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Schedule of Contributors

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

2023

Schedule B	
(Form 990)	
Department of the Treasury	

Department of the Treasury Internal Revenue Service

Name of the organization	Employer identification number	
	74-2728765	
Organization type (chec	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ		
	4947(a)(1) nonexempt charitable trust not treated as a private foundat	ion
	527 political organization	1
Form 990-PF	501(c)(3) exempt private foundation	07
	4947(a)(1) nonexempt charitable trust treated as a private foundation	· O ·
	501(c)(3) taxable private foundation)
	on is covered by the General Rule or a Special Rule.	
Note: Only a section 50	1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See instructions.
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution any one contributor. Complete Parts I and II. See instructions for determining a co	
Special Rules		
X For an organiza	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3%	6 support test of the regulations under
5	(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a,	
	ring the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amo	
	EZ, line 1. Complete Parts I and II.	
For an organiza	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recei	ived from any one
	ring the year, total contributions of more than \$1,000 exclusively for religious, char	
literary, or educ	cational purposes, or for the prevention of cruelty to children or animals. Complete	e Parts I (entering
"N/A" in colum	n (b) instead of the contributor name and address), II, and III.	
For an organiza	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recei	ived from any one contributor, during the
year, contributi	ons exclusively for religious, charitable, etc., purposes, but no such contributions	totaled more than \$1,000. If this box
	er here the total contributions that were received during the year for an exclusivel	
	complete any of the parts unless the General Rule applies to this organization be	-
religious, charit	able, etc., contributions totaling \$5,000 or more during the year	\$
Caution: An organization	n that isn't covered by the General Rule and/or the Special Rules doesn't file Sch	edule B (Form 990) but it must
U	line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form	

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

that it doesn't meet the filing requirements of Schedule B (Form 990).

WACO	I.S.D. EDUCATION FOUNDATION	74-2728765	
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
1		\$5,00	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
2		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
3		\$8,00	Person Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
4		\$11,19	Person Payroll Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
5		\$5,00	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
6		\$5,00	Person X Payroll
323452 12-:	26-23 24		Schedule B (Form 990) (202

Name of organization

Employer identification number

74-2728765

Page 2

) (2023)

(a)

No.

12

12-26-23	

Schedule B (Form 990) (2023) Name of organization WACO I.S.D. EDUCATION FOUNDATION Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 Person Payroll 10,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) Type of contribution No. Name, address, and ZIP + 4 Total contributions 8 Person Payroll 000. Noncash (Complete Part II for noncash contributions.) (b) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 9 Person Payroll 7,500. Noncash (Complete Part II for noncash contributions.) (b) (c) (a) Name, address, and ZIP -**Total contributions** Type of contribution No. 10 Person Payroll 7,500. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 11 Person Payroll 9,745. Noncash (Complete Part II for noncash contributions.) (b)

Name, address, and ZIP + 4

25

(c) (d) **Total contributions** Type of contribution X Person Pavroll 5,000. Noncash \$ (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

Employer identification number

(d)

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X

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X

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26-23		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
323452 12-2	6-23		Schedule B (Form 990) (2023)

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WACO I.S.D. EDUCATION FOUNDATION

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

Employer identification number

74-2728765

Schedule B (Form 990) (2023)

Name of organization

Part I

27

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	PAINT PACKAGE AND BATHROOM REMODEL	\$ 8,000.	
	·	*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	KANDI GO KART AND VOLCUN GRUNT ELECTRIC MOTORCYCLE	\$11,198.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
323453 12.2		\$	Sobodulo B (Earm 990) (2022

Name of organization

WACO I.S.D. EDUCATION FOUNDATION

Employer identification number

74-2728765

Schedule	B (Form 990) (2023)			Page 4	
Name of c	organization		E	mployer identification number	
WACO	I.S.D. EDUCATION FOUNDA	TION		74-2728765	
	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, c Use duplicate copies of Part III if additional s	ons to organizations described in se through (e) and the following line entr haritable, etc., contributions of \$1,000 or le	For organizations	t total more than \$1,000 for the year	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	ntion of how gift is held	
		(e) Transfer of gift	I		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transf	feror to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held	
			с ү		
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transf	feror to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held	
		(e) Transfer of gift	_		
	Transferee's name, address, ar		Relationship of transf	feror to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transf	feror to transferee	

(Form 9	9 90)
---------	------------------

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



Department of the Treasury Internal Revenue Service Name of the organization

WACO I.S.D. EDUCATION FOUNDATION

Employer identification number 74-2728765

Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lir				
		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	-			
	are the organization's property, subject to the organization's				
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds car	n be used only		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purp	ose conferring		
Par		-	90, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organizat		~ 0		
	Preservation of land for public use (for example, recrea		n of a historically important land area		
	Protection of natural habitat	Preservatio	n of a certified historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the f	orm of a conservation easement on the last Held at the End of the Tax Year		
	day of the tax year.				
а	Total number of conservation easements				
b					
С	Number of conservation easements on a certified historic str		2c		
d	Number of conservation easements included on line 2c acqu				
-	on a historic structure listed in the National Register				
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated b	y the organization during the tax		
	year				
4	Number of states where property subject to conservation ea		—,		
5	Does the organization have a written policy regarding the pe				
~	violations, and enforcement of the conservation easements				
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing	conservation easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing cons	envation easements during the year		
•			ervation cacements during the year		
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 1	70(h)(4)(B)(i)		
-					
9	In Part XIII, describe how the organization reports conservat		······································		
	balance sheet, and include, if applicable, the text of the foot				
	organization's accounting for conservation easements.	0			
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, o	r Other Similar Assets.		
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statem	ent and balance sheet works		
	of art, historical treasures, or other similar assets held for put	blic exhibition, education, or research	in furtherance of public		
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that describes these	items.		
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement a	and balance sheet works of		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in	furtherance of public service,		
	provide the following amounts relating to these items.				
	(i) Revenue included on Form 990, Part VIII, line 1		\$		
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical tre				
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:			
а	Revenue included on Form 990, Part VIII, line 1		\$		
	Assets included in Form 990, Part X				
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2023		
332051	09-28-23				

	dule D (Form 990) 2023 WACO I.	S.D. EDUCA				28765	
3	Using the organization's acquisition, accessi	on, and other record	is, check any of the	following that make	significant use of its		
-	collection items (check all that apply).						
a		a		hange program			
b	Scholarly research	e	Other				
c	Preservation for future generations				event even ere in Dev	• \////	
4	Provide a description of the organization's co	•		•	• • •	t XIII.	
5	During the year, did the organization solicit o					N N N N N N N N N N	
Do	to be sold to raise funds rather than to be ma					Yes	NoNo
Fai	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		te if the organization	n answered "Yes" on	Form 990, Part IV, I	ine 9, or	
	• *		-11 f		- + (
та	Is the organization an agent, trustee, custodi					7.	 .
	on Form 990, Part X?				L	Yes	No No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing table:			A	
						Amount	
	Beginning balance						
	Additions during the year						
е	Distributions during the year				1e		
f	Ending balance						
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ustodial account liab	ility?	Yes	No No
	If "Yes," explain the arrangement in Part XIII.						
Par	rt V Endowment Funds Complete if						<u> </u>
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance	5,043,002.	5,876,917.	5,175,893.	4,669,745.	4,0	32,685.
b	Contributions						
	Net investment earnings, gains, and losses	713,238.	-784,062.	761,832.	539,088.	7	34,219.
d	Grants or scholarships	20,000.	10,000.	20,000.			65,000.
	Other expenditures for facilities						
	and programs		$\langle () \rangle$				
f	Administrative expenses	39,560	39,853.	40,808.	32,940.		32,159.
g	End of year balance	5,696,680.	5,043,002.		,	4,6	, 69,745
2	Provide the estimated percentage of the curr				, ,	,	,
	Board designated or quasi-endowment	45.7900	%				
	Permanent endowment 38.2300	%	/0				
c	Term endowment 15.9800						
C							
20	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse		ation that are hold a	nd administered for	the		
Ja		ssion of the organiza	allon lhat are helu a	ind administered for	uie		es No
	organization by:						X
	(i) Unrelated organizations?						
_							
b	If "Yes" on line 3a(ii), are the related organization					3b	
4	Describe in Part XIII the intended uses of the		wment funds.				
Par	t VI Land, Buildings, and Equipm						
	Complete if the organization answere			See Form 990, Part X	(, line 10.		
	Description of property	(a) Cost or o			Accumulated	(d) Book v	/alue
		basis (investn	nent) basis	(other) de	epreciation		
1a	Land						
b	Buildings						
	Leasehold improvements						
	Equipment						
	Other						
-	Add lines 1a through 1e. (Column (d) must e		X. line 10c. column	(B))			0.

Schedule D (Form 990) 2023

	EDUCATION FO	UNDATION	74-2728765 Page 3
Part VII Investments - Other Securities	on Form 000 Part IV line	11b Soo Form 000 Port V line	10
Complete if the organization answered "Yes" (a) Description of security or Category (including name of security)	(b) Book value		ost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) WACO FOUNDATION ENDOWMENT			
(B) FUNDS	5,696,681.	END-OF-YEAR MA	RKET VALUE
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			<u> </u>
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	5,696,681.		
Part VIII Investments - Program Related.	on Form 000 Dort IV line	11a Saa Farm 000 Dart V lina	12
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		ist or end-of-year market value
	(b) DOOK value		Storend-or-year market value
<u>(1)</u>			•
<u>(2)</u> (3)			
(4)			
(5)		0.	
(6)		30	
(7)			
(8)			
(9)	C		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line	
(a)	Description		(b) Book value
(1)	· 6		
(2)			
(3)			
(4)			
(5)	•		
(6)			
(7)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	ol. (B))		
Part X Other Liabilities	()/		••••••
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part 2	X, line 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, cc			
2. Liability for uncertain tax positions. In Part XIII, provide	e the text of the foothote to	The organization's financial stat	rements 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) 2023

74-2728765	Page 4

edule D	(Form 990)) 2023	WACO	I.S.D.	EDUCATION	FOUNDAT	ION	74-2
rt XI	Recond	ciliation of	of Revenu	e per Au	dited Financial	Statements	With Revenue	per Return

Sche	dule D (Form 990) 2023 WACO I.S.D. EDUCATION FOUNDA	TION		74-2	728765	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statement	s With Re	venue per R	eturn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	991,	,146.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_				
а	Net unrealized gains (losses) on investments	2a	675,879.			
b		2b				
с		2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	675,	,879.
3	Subtract line 2e from line 1			3	315,	,267.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	39,560.			
b	Other (Describe in Part XIII.)	4b	-900.			
с	Add lines 4a and 4b			4c	38,	,660.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	353,	,927.
Pa	t XII Reconciliation of Expenses per Audited Financial Statemen	its With E	xpenses per	Retur	n	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	258,	,843.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		- () >			
а	Donated services and use of facilities	2a				
b		2b				
с		2c				
d		2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	258,	,843.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	-900.			
с				4c	-	-900.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	257,	,943.
Pa	t XIII Supplemental Information					
Provi	de 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,
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition					
PAI	RT V, LINE 4:					
	+ ()					
то	GENERATE SUFFICIENT EARNINGS TO PROVIDE 1)	COLLEG	E SCHOLA	RSHI	PS TO	
GR <i>I</i>	ADUATES OF WACO ISD AND 2) GRANTS FOR WACO I	SD CLA	SSROOMS.			
PAI	RT X, LINE 2.					
	▼					

UNDER 3	INTE	RNAL	REVE	NUE	CODE	SECT	ION	501	(C)	(3)	AS	LONG	; AS	THE	INC	COME	
DERIVEI	D IS	FRO	M THE	ACT	IVIT	IES F	OR 1	WHIC	H I	rs (CHAF	RITAE	BLE 1	EXEMI	PTIC	ON WAS	5
GRANTEI	D. U	NREL	ATED	BUSI	NESS	INCO	ME :	is s	UBJI	ЕСТ	то	FEDE	RAL	INCO	OME	TAXES	5 AT
CORPORA	ATE	TAX	RATES	. тн	E FOU	JNDAT	ION	HAD	NO	UN	RELA	TED	BUS	INESS	S IN	ICOME	IN

THE FOUNDATION IS A TAX EXEMPT ENTITY FOR FEDERAL INCOME TAX PURPOSES

THE YEARS ENDED DECEMBER 31, 2023 AND 2022, RESPECTIVELY. THERE WERE NO

UNCERTAIN TAX POSITIONS IN EITHER YEAR.

Part XIII Supplemental Information (continued)
THE FOUNDATION'S TAX RETURNS ARE GENERALLY NO LONGER SUBJECT TO
EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR THREE YEARS AFTER THE DATE
OF FILING.
PART XI, LINE 4B - OTHER ADJUSTMENTS:
FOUNDATION GRANTS OFFSET AGAINST DESIGNATED OUT EXPENSES
RETURN OF UNUSED GRANT FUNDS OFFSET AGAINST EXPENSE ON 990 -900.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
FOUNDATION GRANTS OFFSET AGAINST DESIGNATED OUT EXPENSES
RETURN OF UNUSED GRANT FUNDS OFFSET AGAINST EXPENSE ON 990 -900.
<u> </u>

WACO I.S.D. EDUCATION FOUNDATION

74-2728765 Page 5

Schedule D (Form 990) 2023

SCHEDULE G	Suppleme	ntal Information Regardi	ng Fundrais	sing or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" rganization entered more than			19, or if the	2023
Department of the Treasury Internal Revenue Service	- ·	Attach to Form 99				Open to Public Inspection
Name of the organization		o www.irs.gov/Form990 for inst	ructions and t	ine latest information.		identification number
	WACO I.	S.D. EDUCATION F	OUNDATIC	N	74-272	28765
	complete this part	Complete if the organization ans	swered "Yes" o	n Form 990, Part IV, lin	e 17. Form 990)-EZ filers are not
 a Mail solicitat b Internet and c Phone solici d In-person so 2 a Did the organization key employees list 	ions email solicitations tations vlicitations on have a written o red in Form 990, P) highest paid indiv	f Solic g Spec or oral agreement with any individ art VII) or entity in connection wit viduals or entities (fundraisers) pu	itation of non-g itation of gover cial fundraising ual (including c h professional	overnment grants rnment grants events officers, directors, truste fundraising services?		Yes No to be
		organization.			\sim	
(i) Name and addres or entity (fund		(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(v) Amount pai o (or retained b fundraiser listed in col. (i)	by) to (or retained by)
			Yes No	.0.		
			6			
			O'			
		C				
		· S				
		·				
Total	\mathbf{O}					
3 List all states in whitor licensing.	ich the organizatio	n is registered or licensed to soli	cit contribution	s or has been notified i	t is exempt froi	n registration
						<u></u>

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

Schedule G (Form 990) 2023

WACO I.S.D. EDUCATION FOUNDATION

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, FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		CELEBRITY		NONE	(add col. (a) through
		COOK OFF	STAFF DRIVE		
		(event type)	(event type)	(total number)	col. (c))
	1 Gross receipts	169,736.	28,445.		198,181
	2 Less: Contributions	115,111.			115,111
	3 Gross income (line 1 minus line 2)	54,625.	28,445.		83,070
	4 Cash prizes				
	5 Noncash prizes				
-	6 Rent/facility costs	13,867.		~~~~	13,867
	7 Food and beverages	8,280.			8,280
	9 Entortainmont				
	8 Entertainment9 Other direct expenses		3,843.		22,172
	10 Direct expense summary. Add lines 4 through				44,319
l	11 Net income summary. Subtract line 10 from li	.,			38,751
	\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
	1 Gross revenue	<u> </u>			
	2 Cash prizes	is			
-	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7 Direct expense summary. Add lines 2 through	n 5 in column (d)			
	9 Not coming income summary Subtract line 7	from line 1 column (-1)			
T	8 Net gaming income summary. Subtract line 7	nom line 1, column (d)			l
	Enter the state(s) in which the organization condu Is the organization licensed to conduct gaming ac		states?		Yes N
u	If "No," explain:				
b	Were any of the organization's gaming licenses re	evoked, suspended, or t	erminated during the tax	year?	Yes N

332082 09-13-23

Schedule G (Form 990) 2023

Schedule G (Form 990) 2023 WACO I.S.D. EDUCATION FOUNDATION	74-2728765 Pa	ige 3
11 Does the organization conduct gaming activities with nonmembers?		No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		7
to administer charitable gaming?	Yes	No
13 Indicate the percentage of gaming activity conducted in:a The organization's facility	13a	%
b An outside facility		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and rec		
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 a	amount	
of gaming revenue retained by the third party \$	\sim	
c If "Yes," enter name and address of the third party:		
Name	5	
Address		
16 Gaming manager information:		
Name		
Gaming manager compensation \$		
Description of services provided		
Director/officer Employee Independent contractor		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spe		No
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 G	a (Form	990)
D · I) /	•	

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· 5
X

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	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			_				Employer identification number			
	I.S.D. EDUCAT	ION FOUNDAT	TON			4	74-2728765			
1 Does the organization maintain criteria used to award the grant	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? X Yes No									
	tance to Domestic Organi ore than \$5,000. Part II can				anization answered ")	es" on Form 990, Par	t IV, line 21, for any			
1 (a) Name and address of organ or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
WACO ISD 501 FRANKLIN WACO, TX 76701	74-6002532		169,284.		0		TO ASSIST WITH NON BUDGETED DISTRICT EXPENSES, BANQUET, AND GWAMA SPONSORSHIP			
				5						
).	S							
		ji C								
		Q,								
	X									

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

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

Schedule I (Form 990) 2023 WACO I.S.D. EDUCATION FOUNDATION

74-2728765

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HURD SCHOLARSHIP	2	20,000.	0.		
				0	
TEACHER AWARDS	3	2,000.	0.	$c^{O^{\chi}}$	
				0	
OTHER SCHOLARSHIPS	10	23,875.	0.)	
NEW TEACHER GRANTS	85	25,500.	0.		
		<i></i>			
Part IV Supplemental Information. Provide the information rec	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
THE FOUNDATION HAS A COMPREHENSIVE	SYSTEM	FOR RECORD	ING THE US	E OF FUNDS	
AND ACTIVITIES RELATED TO GRANTS.					

SCI	HEDULE J	Compensation Information	OMB N	o. 1545-00)47
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	21)2 3	2
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		JZU	
Depar	tment of the Treasury	Attach to Form 990.		to Publ	
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		pection	
Nam	e of the organizatio		Employer identifica		mber
		WACO I.S.D. EDUCATION FOUNDATION	74-27287	65	
Pa	rt I Question	s Regarding Compensation		1	<u> </u>
				Yes	No
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form s	990,		
		line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or c				
	Travel for com	panions Payments for business use of personal res cation and gross-up payments I Health or social club dues or initiation fees			
		spending account Personal services (such as maid, chauffeur	r, chel)		
h	If any of the boyce	on line 1a are checked, did the organization follow a written policy regarding payment or			
b		provision of all of the expenses described above? If "No," complete Part III to explain	11		
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors	······	,	
-	•	ers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
	trustees, and onlee		·····		
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization's			
-		ector. Check all that apply. Do not check any boxes for methods used by a related organization			
		ation of the CEO/Executive Director, but explain in Part III.			
	Compensation				
	·	compensation consultant Compensation survey or study			
		ther organizations Approval by the board or compensation co	ommittee		
		, , , , , , , , , , , , , , , , ,			
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 re				
а	Receive a severand	ce payment or change-of-control payment?	4a	1	Х
b	Participate in or rec	ceive payment from a supplemental nonqualified retirement plan?	46	,	X
с	Participate in or rec	ceive payment from an equity-based compensation arrangement?	40	;	Х
	If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	-				
	Only section 501(d	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n		
	contingent on the r	evenues of:			
а	The organization?	ration? or 5b, describe in Part III.		1	X
b	Any related organiz	ation?)	X
	If "Yes" on line 5a o	or 5b, describe in Part III.			
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n		
	contingent on the r				
а	The organization?		6a	1	X
b	Any related organiz	ration?			X
		or 6b, describe in Part III.			
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
		nes 5 and 6? If "Yes," describe in Part III		_	X
8	•	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
_		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			X
9		id the organization also follow the rebuttable presumption procedure described in			
		n 53.4958-6(c)?			
For	Paperwork Reduct	ion Act Notice, see the Instructions for Form 990.	Schedule J (Fo	orm 990) 2023

74-2728765

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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.

	(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	0		reported as deferred on prior Form 990
(i)							
(ii)							
(1)							
(ii)							
(i) (ii)							
(i)							
(i)							
(i)				5			
(ii)			S				
(i)							
(ii)							
(i)							
(ii)		C					
(i) (ii)							
(i)							
(i)							
(i)		C					
(ii)		U					
(i)							
(ii)							
(i)							
(ii)	hV-						
(i). (ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990, PART VII, SECTION A, QUESTION 5
THE SALARY AND BENEFITS OF THE EXECUTIVE DIRECTOR OF THE WACO ISD
EDUCATION FOUNDATION ARE PAID FOR IN FULL BY THE WACO INDEPENDENT
SCHOOL DISTRICT. THE NAME, SALARY, AND BENEFITS OF THE EXECUTIVE
DIRECTOR ARE LISTED ON FORM 990, PART VII.
• • •

Schedule J (Form 990) 2023

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047 2023

Open to Public

. Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 o
Attach to Form 990.

Department of the Treasury Internal Revenue Service

or 30.

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

Name of the organization

WACO T.S.D EDUCATION FOUNDATION

Employer identification number 74-2728765

Pa		HDUCAI				1720		
I U		(a)	(b)	(c)	(d)			
		Check if	Number of	Noncash contribution	Method of de		ing	
		applicable	contributions or	amounts reported on Form 990, Part VIII, line ⁻	noncash contribu	ution ar	nount	S
4	Art Works of art			T OITH 990, Fait VIII, IIIIe	9			
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 $_{\dots}$							
15	Real estate - Residential		C					
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 (AUCTION ITEMS)	X	39	39,075	′ •			
26	Other (
27	Other (
28	Other (
29	Number of Forms 8283 received by the organi	ization durin	g the tax year for c	contributions				
	for which the organization completed Form 82	83, Part V, I	Donee Acknowledg	ement				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	ported in Part I, lines 1 thr	ough 28, that it			
	must hold for at least 3 years from the date of	the initial co	ontribution, and wh	ich isn't required to be us	ed for			
	exempt purposes for the entire holding period	?		·		30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any nonstandard cont	ibutions?	31		Х
	Does the organization hire or use third parties							
	contributions?		-			32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	column (c) fo	r a type of propert	v for which column (a) is a	hecked.			
	describe in Part II.		-71 21 81 81 81 81 81 81 81 81 81 81 81 81 81	,	··,			

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

Schedule M (Form 990) 2023

Schedule M	(Form 990) 2023	WACO	I.S.D.	EDUCATION	FOUNDATION		74-2728765	Page 2
Part II	Supplemental	Inform	ation. Provid	de the information re	equired by Part I, lines 30)b, 32b, and 33,	and whether the organiz	ation
	is reporting in Part this part for any a	: I, column Iditional ir	(b), the numb formation.	per of contributions,	the number of items rec	eived, or a comb	ination of both. Also con	nplete
							X	
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SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.	-EZ						
Name of the organizatio	WACO I.S.D. EDUCATION FOUNDATION	Employer identification number 74-2728765						
FORM 990, PA	RT I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:						
PROJECTS NOT	COVERED BY SCHOOL BUDGETS OR TAX DOLLARS, TH	US OUR MOTTO,						
"RAISING THE	POWER OF EDUCATION!" MORE THAN 93% OF ALL FO	UNDATION						
EXPENSES FUN	D WACO ISD CLASSROOM GRANTS AND STUDENT SCHOL	ARSHIPS. THE						
FOUNDATION W	AS FOUNDED FOR THE PURPOSE OF RECEIVING AND D	ISBURSING						
FUNDS, PROPE	RTY AND GIFTS OF ANY KIND EXCLUSIVELY FOR THE	BENEFIT OF						
THE WACO IND	EPENDENT SCHOOL DISTRICT.	X						
FORM 990, PA	RT III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:						
STUDENT SCHO	LARSHIPS. THE FOUNDATION WAS FOUNDED FOR THE	PURPOSE OF						
RECEIVING AN	D DISBURSING FUNDS, PROPERTY AND GIFTS OF ANY	KIND						
EXCLUSIVELY	FOR THE BENEFIT OF THE WACO INDEPENDENT SCHOO	L DISTRICT.						
FORM 990, PA	RT VI, SECTION B, LINE 11B:							
THE EXECUTIV	E COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS	THE FORM 990						
BEFORE FILIN	g.							
FORM 990, PA	RT VI, SECTION B, LINE 12C:							
	SSION AND SIGNATURE REQUIRED ON CONFLICT OF I	NTEREST STATEMENT						
FORM 990, PA	RT VI, SECTION C, LINE 19:							
THE ORGANIZA	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND							
FINANCIAL ST	ATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQ	UEST.						
FORM 990, PA	RT XII, LINE 2C							

Schedule O (Form 990) 20 Name of the organization						Page Employer identification numbe
	WACO	I.S.D.	EDUCATION	FOUNDATION		Employer identification numbe $74 - 2728765$
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