

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

2016

Open to Public Inspection

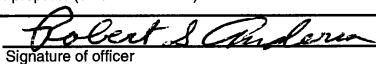
Department of the Treasury
Internal Revenue Service

A For the 2016 calendar year, or tax year beginning <u>2016</u> , and ending <u>2016</u>																						
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization <u>The Eagle Mountain-Saginaw ISD Education Foundation</u></td> <td>D Employer identification number <u>75-2848881</u></td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number <u>(817) 232-0880</u></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td></td> </tr> <tr> <td><u>1200 Old Decatur Road</u></td> <td></td> <td></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <u>Fort Worth TX 76179</u></td> <td>G Gross receipts \$ <u>184,666.</u></td> </tr> <tr> <td colspan="2">F Name and address of principal officer: <u>Robert Anderson 717 W BAILEY BOSWELL RD SAGINAW TX 76179</u></td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2"></td> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)</td> </tr> </table>	C Name of organization <u>The Eagle Mountain-Saginaw ISD Education Foundation</u>		D Employer identification number <u>75-2848881</u>	Doing business as		E Telephone number <u>(817) 232-0880</u>	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		<u>1200 Old Decatur Road</u>			City or town, state or province, country, and ZIP or foreign postal code <u>Fort Worth TX 76179</u>		G Gross receipts \$ <u>184,666.</u>	F Name and address of principal officer: <u>Robert Anderson 717 W BAILEY BOSWELL RD SAGINAW TX 76179</u>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)
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I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ▶ <u>N/A</u>																					
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: <u>1999</u> M State of legal domicile: <u>TX</u>																					

Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>To provide enrichment to the educational process of the Eagle Mountain - Saginaw Independent School District through grants and scholarships to teachers and students.</u>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5
	6	Total number of volunteers (estimate if necessary)	6
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	205,118.
	9	Program service revenue (Part VIII, line 2g)	183,045.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,153.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,621.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	206,271.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	107,672.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	126,532.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	24,888.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	38,532.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	33,976.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	146,204.
	20	Total assets (Part X, line 16)	60,067.
	21	Total liabilities (Part X, line 26)	24,158.
	22	Net assets or fund balances. Subtract line 21 from line 20	540,248.
		Beginning of Current Year	End of Year
		540,248.	563,321.

Part II Signature Block

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

Sign Here		<u>05/15/17</u>	
	Signature of officer	Date	
	<u>ROBERT ANDERSON</u>	<u>CHAIRMAN</u>	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	<u>LARRY A. ROBERTSON, CPA</u>		
	Firm's name ▶ <u>Larry A. Robertson, CPA</u>	Check <input checked="" type="checkbox"/> if self-employed PTIN <u>P00737188</u>	
	Firm's address ▶ <u>7101 Denver City Dr. Fort Worth TX 76179</u>	Firm's EIN ▶ <u>75-1970142</u> Phone no. <u>(817) 236-8484</u>	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No