

Form 8879-TE

IRS E-file Signature Authorization
for a Tax Exempt Entity

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20____

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

2023

Name of filer

SAN ANGELO HEALTH FOUNDATION

EIN or SSN

75-1315145

Name and title of officer or person subject to tax
DEBORAH WATSON
PRESIDENT**Part I** Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here	<input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b 27,940.
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize OLIVER, RAINEY, & WOJTEK LLP

to enter my PIN 15145

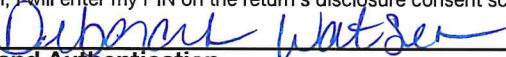
ERO firm name

Enter five numbers, but
do not enter all zeros

as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax



Date

6.20.24

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

75467676679

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature OLIVER, RAINEY, & WOJTEK LLP

Date

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form 8879-TE (2023)

LHA 302521 01-05-24

13120508 134670 00486

2023.03040 SAN ANGELO HEALTH FOUNDAT 00486__1

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

For calendar year 2023 or tax year beginning , and ending

Name of foundation SAN ANGELO HEALTH FOUNDATION		A Employer identification number **-***5145
Number and street (or P.O. box number if mail is not delivered to street address) P. O. BOX 3550	Room/suite	B Telephone number 3254860185
City or town, state or province, country, and ZIP or foreign postal code SAN ANGELO, TX 76902		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 57,545,223.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		1,113.	1,113.		STATEMENT 2
4 Dividends and interest from securities		927,498.	1,246,591.		STATEMENT 3
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		-1,250,305.			STATEMENT 1
b Gross sales price for all assets on line 6a 12,825,706.					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income		1,345,758.	1,012,022.		STATEMENT 4
12 Total. Add lines 1 through 11		1,024,064.	2,259,726.		
13 Compensation of officers, directors, trustees, etc.		163,400.	11,438.		151,962.
14 Other employee salaries and wages		35,751.	2,503.		33,248.
15 Pension plans, employee benefits		15,283.	1,070.		14,213.
16a Legal fees					
b Accounting fees STMT 5		43,870.	21,885.		21,885.
c Other professional fees					
17 Interest					
18 Taxes STMT 6		64,554.	5,847.		13,984.
19 Depreciation and depletion		124,678.	8,727.		
20 Occupancy		13,996.	980.		13,016.
21 Travel, conferences, and meetings		31,320.	2,192.		29,128.
22 Printing and publications		6,017.	0.		6,017.
23 Other expenses STMT 7		282,562.	195,000.		94,325.
24 Total operating and administrative expenses. Add lines 13 through 23		781,431.	249,642.		377,778.
25 Contributions, gifts, grants paid		2,173,168.			2,178,269.
26 Total expenses and disbursements. Add lines 24 and 25		2,954,599.	249,642.		2,556,047.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		-1,930,535.			
b Net investment income (if negative, enter -0-)			2,010,084.		
c Adjusted net income (if negative, enter -0-)				N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	202.	200.	200.
	2 Savings and temporary cash investments	96,991.	91,305.	91,305.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	55,150.	68,350.	
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis	837,000.		
Less: accumulated depreciation	837,000.	837,000.	837,000.	
12 Investments - mortgage loans				
13 Investments - other	STMT 9	54,291,419.	52,482,687.	53,699,362.
14 Land, buildings, and equipment: basis	5,690,742.			
Less: accumulated depreciation	2,773,386.	3,022,388.	2,917,356.	2,917,356.
15 Other assets (describe STATEMENT 10)	-6,343,212.	1,291,614.	0.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	51,959,938.	57,688,512.	57,545,223.	
Liabilities	17 Accounts payable and accrued expenses	118,351.	115,430.	
	18 Grants payable	557,725.	570,440.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe EXCISE TAX PAYABLE)	90,698.	112,230.	
23 Total liabilities (add lines 17 through 22)	766,774.	798,100.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	51,193,164.	56,890,412.	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances	51,193,164.	56,890,412.	
30 Total liabilities and net assets/fund balances	51,959,938.	57,688,512.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	51,193,164.
2 Enter amount from Part I, line 27a	2	-1,930,535.
3 Other increases not included in line 2 (itemize) SEE STATEMENT 8	3	7,634,826.
4 Add lines 1, 2, and 3	4	56,897,455.
5 Decreases not included in line 2 (itemize) NON-CASH INVESTMENT ACTIVITY	5	7,043.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	56,890,412.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a WESTWOOD COMMON FUND	P	01/01/23	12/31/23
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 12,825,706.		14,015,678.	-1,189,972.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			-1,189,972.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7
If (loss), enter -0- in Part I, line 7 2 -1,189,972.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 3 N/A

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	27,940.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0.
3 Add lines 1 and 2	3	27,940.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	27,940.
6 Credits/Payments:		
a 2023 estimated tax payments and 2022 overpayment credited to 2023	6a	28,423.
b Exempt foreign organizations - tax withheld at source	6b	0.
c Tax paid with application for extension of time to file (Form 8868)	6c	0.
d Backup withholding erroneously withheld	6d	0.
7 Total credits and payments. Add lines 6a through 6d	7	28,423.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	483.
11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 483. Refunded	11	0.

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Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. TX		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address SAHFOUNDATION.ORG	X	
14 The books are in care of OLIVER, RAINEY, & WOJTEK Telephone no. (325) 942-6713 Located at 2909 SHERWOOD WAY STE 300, SAN ANGELO, TX ZIP+4 76901		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year		N/A
16 At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		X
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	
c Organizations relying on a current notice regarding disaster assistance, check here		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023?		X
If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		X
b If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023?		X

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)	X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)	X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)	X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)	X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)	X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	5b
c Organizations relying on a current notice regarding disaster assistance, check here		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A	5d
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	6a	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b	X
If "Yes" to 6b, file Form 8870.		
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a	X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	8	X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11		163,400.	11,401.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
WESTWOOD TRUST - 200 CRESCENT COURT, SUITE 1200, DALLAS, TX 75201	INVESTMENT FEES	159,620.

Total number of others receiving over \$50,000 for professional services

0

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part VIII-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	49,940,628.
b	Average of monthly cash balances	1b	136,309.
c	Fair market value of all other assets (see instructions)	1c	6,623,494.
d	Total (add lines 1a, b, and c)	1d	56,700,431.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	56,700,431.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	850,506.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	55,849,925.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,792,496.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	2,792,496.
2a	Tax on investment income for 2023 from Part V, line 5	2a	27,940.
b	Income tax for 2023. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	27,940.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,764,556.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,764,556.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	2,764,556.

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,556,047.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,556,047.

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Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				2,764,556.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2023:				
a From 2018				
b From 2019				
c From 2020				
d From 2021				
e From 2022	225,815.			
f Total of lines 3a through e	225,815.			
4 Qualifying distributions for 2023 from Part XI, line 4: \$ 2,556,047.				
a Applied to 2022, but not more than line 2a ..			0.	
b Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2023 distributable amount				2,556,047.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	208,509.			208,509.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	17,306.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2018 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	17,306.			
10 Analysis of line 9:				
a Excess from 2019				
b Excess from 2020				
c Excess from 2021				
d Excess from 2022	17,306.			
e Excess from 2023				

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Prior 3 years				(e) Total
	(a) 2023	(b) 2022	(c) 2021	(d) 2020	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

DEBORAH WATSON, 325-486-0185, DWATSON@SAHFOUNDATION.ORG
P.O. BOX 3550, SAN ANGELO, TX 76902-3550

b The form in which applications should be submitted and information and materials they should include:

SEE WEB SITE AT WWW.SAHFOUNDATION.ORG

c Any submission deadlines:

2-3 MONTHS PRIOR TO WHEN A DECISION IS NEEDED

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SAN ANGELO, TEXAS AREA

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
a Paid during the year				
BALLET SAN ANGELO 82 GILLIS ST SAN ANGELO, TX 76903	NONE		FUNDING FOR LIGHT UP THE NIGHT EVENT OVER TWO YEARS	11,788.
CONCHO VALLEY COMMUNITY ACTION AGENCY 133 W CONCHO AVE SUITE 301 SAN ANGELO, TX 76903	NONE		PROGRAMMATIC EXPANSION INITIATIVE	70,000.
CONCHO VALLEY HOME FOR GIRLS 412 PREUSSER ST SAN ANGELO, TX 76903	NONE		SAVE CVHG	55,000.
GALILEE COMMUNITY DEVELOPMENT CORP 39 BUICK ST SAN ANGELO, TX 76901	NONE		PURCHASE OF A WAREHOUSE TO STORE MATERIALS AND SUPPLIES FOR OUR REMODEL/REHAB/NEW HOME	150,000.
HOWARD COLLEGE 3501 N US HWY 67 SAN ANGELO, TX 76905	NONE		LEAD IN 10, LEADERSHIP INITIATIVE	37,497.
Total SEE CONTINUATION SHEET(S)				3a 2,178,269.
b Approved for future payment				
CONCHO VALLEY HOME FOR GIRLS 412 PREUSSER ST SAN ANGELO, TX 76903	NONE		SAVE CVHG	55,000.
GALILEE COMMUNITY DEVELOPMENT CORP 39 BUICK ST SAN ANGELO, TX 76901	NONE		REMODEL OF 9TH ST. APARTMENTS	150,000.
INSTITUTE FOR COGNITIVE DEVELOPMENT, INC (ICD) 20 S KOENIGHEIM ST SAN ANGELO, TX 76903	NONE		ICD PROPERTY PURCHASE	150,000.
Total SEE CONTINUATION SHEET(S)				3b 1,239,693.

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Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | | |
|---|--|-------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | Yes | No |
| | | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions: | | |
| | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.			May the IRS discuss this return with the preparer shown below? See instr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee _____	Date _____	Title <u>PRESIDENT</u>	

May the IRS discuss this return with the preparer shown below? See instr.

☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name MEGHAN D. KAUTEN, CPA	Preparer's signature MEGHAN D. KAUTEN,	Date	Check <input type="checkbox"/> if self-employed	PTIN P01320734
	Firm's name OLIVER, RAINEY, & WOJTEK LLP				Firm's EIN ** - ***8464
	Firm's address 2909 SHERWOOD WAY, SUITE 300 SAN ANGELO, TX 76901				Phone no. 325-942-6713

SAN ANGELO HEALTH FOUNDATION

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Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JUNCTION COMMUNITY AFTER SCHOOL PROGRAM & FAMILY CENTER P.O. BOX 697 JUNCTION, TX 76849	NONE		AFFORDABLE ENRICHMENT FOR AT-RISK RURAL STUDENTS	28,000.
LA ESPERANZA CLINIC 1610 S CHADBOURNE SAN ANGELO, TX 76903	NONE		RENOVATION OF NEW MEDICAL AND BEHAVIORAL HEALTH CLINIC BUILDING	250,000.
NEW HORIZONS RANCH & CENTER, INC. 147 SAYLES BLVD ABILENE, TX 79605	NONE		CASE MANAGER FOR SAN ANGELO	15,000.
PLAYLAND COMMUNITIES FOUNDATION P.O. BOX 494 CHRISTOVAL, TX 76935	NONE		PLAYGROUND EQUIPMENT AND SURFACING FOR THE CITY PARK IN CHRISTOVAL	100,000.
SAN ANGELO AREA FOUNDATION 221 S IRVING ST SAN ANGELO, TX 76903	NONE		RESTROOMS AT MLK, JR. PARK	125,000.
SAN ANGELO AREA FOUNDATION 221 S IRVING ST SAN ANGELO, TX 76903	NONE		SAN ANGELO GIVES 2023-AMPLIFICATION	100,000.
SAN ANGELO AREA FOUNDATION 221 S IRVING ST SAN ANGELO, TX 76903	NONE		SAN ANGELO NAACP BUFFALO SOLDIER MEMORIAL PROJECT	65,000.
SAN ANGELO AREA FOUNDATION 221 S IRVING ST SAN ANGELO, TX 76903	NONE		MEMORIAL	500.
SAN ANGELO AREA FOUNDATION 221 S IRVING ST SAN ANGELO, TX 76903	NONE		IN HONOR OF DR. ROB PATYRAK AND THE HON. MARILYN ABOUSSIE TRUST SETUP AND CONTRIBUTION	20,000.
SAN ANGELO DIABETES COALITION 2601 W AVENUE N SAN ANGELO, TX 76903	NONE		SAN ANGELO DIABETES COALITION	143,230.
Total from continuation sheets				1,853,984.

SAN ANGELO HEALTH FOUNDATION

-*5145

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SAN ANGELO MUSEUM OF FINE ARTS 1 LOVE ST SAN ANGELO, TX 76903	NONE		CONSTRUCT A TEXAS CULTURAL RESOURCE AND COLLECTION CENTER (TEXAS CRCSC)	200,000.
SEASONAL ASSISTANCE VARIOUS SAN ANGELO, TX 76903	NONE		SEASONAL ASSISTANCE	13,200.
SIGHT SAVERS AMERICA 337 BUSINESS CIR PELHAM, AL 35124	NONE		CHANGING THE LIVES OF CHILDREN WITH LOW VISION IN SAN ANGELO	12,160.
SUR INCORPORATED 221 S IRVING ST SAN ANGELO, TX 76903	NONE		BUILDING IMPROVEMENTS (HANDICAP STALLS AND CEILING TILE REPAIR)	47,225.
SUTTON COUNTY PUBLIC LIBRARY 301 W BEAUREGARD SAN ANGELO, TX 76903	NONE		SUTTON COUNTY PUBLIC LIBRARY FLOORING UPDATE	25,000.
TEXAS RAMP PROJECT 221 S IRVING ST SAN ANGELO, TX 76903	NONE		SAN ANGELO RAMP PROJECT	30,000.
THE JUNIOR LEAGUE OF SAN ANGELO 36 E TWOHIG AVE #100 SAN ANGELO, TX 76903	NONE		PERSONALLY AVAILABLE CARE KITS	15,600.
THE WHIT PROGRAM INC PO BOX 928 SAN ANGELO, TX 76902	NONE		ONLINE DATABASE APPLICATION	27,072.
UNITED WAY OF THE CONCHO VALLEY, INC. 955 TURNER ST SAN ANGELO, TX 76903	NONE		UNITED WE READ	20,000.
WATER VALLEY VOLUNTEER FIRE DEPARTMENT INC 17667 BOOTH ST WATER VALLEY, TX 76958	NONE		PURCHASE OF A WATER TANKER TRUCK AND RADIO EQUIPMENT	85,000.
Total from continuation sheets				

-*5145

3 Grants and Contributions Paid During the Year (Continuation)

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04-01-23

SAN ANGELO HEALTH FOUNDATION

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Part XIV Supplementary Information**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LA ESPERANZA CLINIC 1610 S CHADBOURNE SAN ANGELO, TX 76903	NONE		RENOVATION OF NEW MEDICAL AND BEHAVIORAL HEALTH CLINIC BUILDING	250,000.
LAKE IVIE VOLUNTEER FIRE DEPARTMENT 10349 LAKE COUNTRY ROAD PAINT ROCK, TX 76866	NONE		REPLACING FOUR OF OUR EXISTING 12' X12' SLIDING DOORS IN OUR FIRE HALL.	22,000.
MHMR SERVICES FOR THE CONCHO VALLEY 202 N MAIN ST SAN ANGELO, TX 76903	NONE		MHMRVC IT UPGRADES	100,000.
MILES EMPOWERMENT ASSOCIATION 110 ROBINSON ST MILES, TX 76861	NONE		MULTI-PURPOSE CONCRETE SLAB	20,000.
SAN ANGELO AREA FOUNDATION 221 S IRVING ST SAN ANGELO, TX 76903	NONE		SAN ANGELO GIVES 2024 - AMPLIFICATION	100,000.
SAN ANGELO MUSEUM OF FINE ARTS 1 LOVE ST SAN ANGELO, TX 76903	NONE		CONSTRUCT A TEXAS CULTURAL RESOURCE AND COLLECTION CENTER (TEXAS CRCSC)	200,000.
SCHLEICHER COUNTY PUBLIC LIBRARY 201 SW MAIN ST ELDORADO, TX 76936	NONE		BUILDING RENOVATIONS / EQUIPMENT, FURNISHINGS, AND TECHNOLOGY / SECURITY EQUIPMENT AT NEW	100,000.
WEST TEXAS COUNSELING & GUIDANCE 242 MAGDALEN ST, SUITE 102 SAN ANGELO, TX 76903	NONE		MENTAL HEALTH EXPANSION PROJECT	61,493.
YMCA OF SAN ANGELO 353 S RANDOLPH ST SAN ANGELO, TX 76903	NONE		E-SPORTS GAMING LOUNGE	31,200.
Total from continuation sheets				884,693.

Part XIV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - GALILEE COMMUNITY DEVELOPMENT CORP

PURCHASE OF A WAREHOUSE TO STORE MATERIALS AND SUPPLIES FOR OUR

REMODEL/REHAB/NEW HOME CONSTRUCT

Part XIV Supplementary Information

3b Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - SCHLEICHER COUNTY PUBLIC LIBRARY

BUILDING RENOVATIONS / EQUIPMENT, FURNISHINGS, AND TECHNOLOGY /

SECURITY EQUIPMENT AT NEW

SCPL

FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 1

(A) DESCRIPTION OF PROPERTY		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
WESTWOOD COMMON FUND		PURCHASED	01/01/23	12/31/23
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
12,825,706.	14,076,011.	0.	0.	-1,250,305.

CAPITAL GAINS DIVIDENDS FROM PART IV 0.

TOTAL TO FORM 990-PF, PART I, LINE 6A -1,250,305.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
TEXAS STATE BANK	1,113.	1,113.	
TOTAL TO PART I, LINE 3	1,113.	1,113.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 3

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
WESTWOOD TRUST (DIVIDENDS)	927,498.	0.	927,498.	638,522.	
TO PART I, LINE 4	927,498.	0.	927,498.	638,522.	

FORM 990-PF

OTHER INCOME

STATEMENT 4

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY INCOME	20,041.	20,041.	
LEASE BONUS	991,333.	991,333.	
OTHER INCOME	648.	648.	
PASSTHROUGH INVESTMENT INCOME	332,000.	0.	
CHANGE IN ACCRUED INCOME	1,736.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,345,758.	1,012,022.	

FORM 990-PF

ACCOUNTING FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	23,770.	11,885.		11,885.
AUDIT AND TAX RETURN FEES	20,100.	10,000.		10,000.
TO FORM 990-PF, PG 1, LN 16B	43,870.	21,885.		21,885.

FORM 990-PF

TAXES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROPERTY TAXES	4,794.	4,794.		0.
PAYROLL TAX	15,037.	1,053.		13,984.
EXCISE TAX	44,723.	0.		0.
TO FORM 990-PF, PG 1, LN 18	64,554.	5,847.		13,984.

FORM 990-PF	OTHER EXPENSES		STATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	159,951.	159,951.		0.
INSURANCE	33,241.	16,620.		16,620.
DUES AND SUBSCRIPTIONS	928.	65.		863.
POSTAGE	322.	6.		316.
OTHER EXPENSE	2,654.	186.		2,468.
OFFICE EXPENSES	17,000.	340.		16,660.
TELEPHONE & WEB PAGE	6,386.	447.		5,939.
SERVICE CONTRACTS	55,332.	3,873.		51,459.
REPAIRS AND MAINTENANCE	6,748.	13,512.		0.
TO FORM 990-PF, PG 1, LN 23	282,562.	195,000.		94,325.

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 8
DESCRIPTION		AMOUNT
NET UNREALIZED GAIN OR LOSSES ON INVESTMENTS		7,634,826.
TOTAL TO FORM 990-PF, PART III, LINE 3		7,634,826.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT SECURITIES	COST	51,486,578.	52,703,253.
TEXAS STATE BANK MONEY MARKET	COST	996,109.	996,109.
TOTAL TO FORM 990-PF, PART II, LINE 13		52,482,687.	53,699,362.

FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
UNREALIZED GAIN/(LOSS) ON INVESTMENTS	-6,343,212.	1,291,614.	0.
TO FORM 990-PF, PART II, LINE 15	-6,343,212.	1,291,614.	0.

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DAVID LUPTON P.O. BOX 3550 SAN ANGELO, TX 76902	CHAIRMAN 4.00	0.	0.	0.
STEVE CECIL P.O. BOX 3550 SAN ANGELO, TX 76902	VICE CHAIRMAN 4.00	0.	0.	0.
MARY JANE STEADMAN P.O. BOX 3550 SAN ANGELO, TX 76902	SECRETARY 4.00	0.	0.	0.
CARLOS RODRIGUEZ P.O. BOX 3550 SAN ANGELO, TX 76902	TREASURER 4.00	0.	0.	0.
MARILYN ABOUSSIE P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
DEVIN BATES P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
CASEY BARRETT P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
MIKE BOYD P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
SANDE VINCENT HARRISON P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
JEFFREY MCCORMICK P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.

SAN ANGELO HEALTH FOUNDATION

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T RICHEY OLIVER, CPA P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
ROBERT S. PATYRAK, M.D. P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
JOANNE RICE P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
JOE B WILKINSON, M.D. P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.
GEORGE ALEXANDER P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISORY TRUSTEE 2.00	0.	0.	0.
JOHN MARK MCLAUGHLIN P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISORY TRUSTEE 2.00	0.	0.	0.
KAREN PLUGER P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISORY TRUSTEE 2.00	0.	0.	0.
F.L. "STEVE" STEPHENS P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISORY TRUSTEE 2.00	0.	0.	0.
THOMAS EARLY P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISORY TRUSTEE 2.00	0.	0.	0.
HUGH LAMER STONE III P.O. BOX 3550 SAN ANGELO, TX 76902	ADVISORY TRUSTEE 2.00	0.	0.	0.
DEBORAH WATSON P.O. BOX 3550 SAN ANGELO, TX 76902	PRESIDENT 40.00	163,400.	11,401.	0.
VALERY FRANK P.O. BOX 3550 SAN ANGELO, TX 76902	TRUSTEE 2.00	0.	0.	0.

SAN ANGELO HEALTH FOUNDATION

--*5145

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII

163,400.

11,401.

0.

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

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

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

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

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. SAN ANGELO HEALTH FOUNDATION	Taxpayer identification number (TIN) **-***5145
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. P. O. BOX 3550	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN ANGELO, TX 76902	

Enter the Return Code for the return that this application is for (file a separate application for each return) **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____

Plan Number _____

Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **OLIVER, RAINEY, & WOJTEK**
2909 SHERWOOD WAY STE 300 - SAN ANGELO, TX 76901

Telephone No. **(325) 942-6713**

Fax No. _____

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

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
☒ calendar year 20 **23** or
☐ tax year beginning _____, 20 _____, and ending _____, 20 _____

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

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	27,940.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	28,423.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

Form **8868** (Rev. 1-2024)