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.

OMB No. 1545-0047

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. 2024 A For the 2023 calendar year, or tax year beginning JUL 2023 and ending JUN Check if applicable: C Name of organization D Employer identification number TEXAS STATE UNIVERSITY DEVELOPMENT Address change FOUNDATION Name change 74-1982979 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 601 UNIVERSITY DRIVE 512-245-3860 20,759,202. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return SAN MARCOS, TX 78666-4612 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: BROOKS HULL for subordinates? Yes X No SAME AS C ABOVE _ Yes 「 **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.DEVELOPMENTFOUNDATION.TXSTATE.EDU H(c) Group exemption number Trust L Year of formation: 1977 M State of legal domicile: TX **K** Form of organization: **X** Corporation Association Part I Summary Briefly describe the organization's mission or most significant activities: ACCEPTING AND INVESTING GIFTS Activities & Governance ESTABLISHED AS ENDOWMENTS BENEFITING THE MISSION OF TEXAS STATE 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 50 3 Number of voting members of the governing body (Part VI, line 1a) 50 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 2,906,534. 5,866,619. Contributions and grants (Part VIII, line 1h) 8 0. 0. Program service revenue (Part VIII, line 2g) 2,173,457. 5,025,029. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 198,461 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 78,145. 11 5,278,452. 10,969,793. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 4,635,152. 4,462,497. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 15 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,321,839. 1,798,576. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) $6,26\overline{1,073}$. 5,956,991. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,708,720. -678,539. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 116,488,847. 130,143,929 Total assets (Part X, line 16) 2,868,668. 1,415,821. 21 Total liabilities (Part X, line 26) 三年 113,620,179. 128,728,108 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date BROOKS HULL, EXECUTIVE DIRECTOR Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature

Sign Here Kerrae 02/14/25 self-employed P01257722 RENAE DUNCAN Paid CPA mucan ATCHLEY & ASSOCIATES, LLP Firm's EIN 74-2920819 Preparer Firm's name 1005 LA POSADA DRIVE Use Only Firm's address Phone no. (512)346-2086TX 78752 AUSTIN, X Yes May the IRS discuss this return with the preparer shown above? See instructions

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
1	Briefly describe the organization's mission:	STIGIT
	TO SUPPORT AND FURTHER THE MISSION OF TEXAS STATE UNIVERSITY THRO	JUGH
	THE ACCEPTANCE AND INVESTMENT OF GIFTS ESTABLISHED AS ENDOWMENTS	
	BENEFITING THE STUDENTS, FACULTY AND STAFF.	
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 X No
	If "Yes," describe these new services on Schedule O.	¬., ¬.,
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	nses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 4,462,497. including grants of \$ 4,462,497.) (Revenue \$	(TENTILL)
	THE ORGANIZATION INVESTS AND ADMINISTERS FUNDS, CONDUCTS DEVELOPM	
	EFFORTS AND WORKS WITH GROUPS WHICH EXPRESS AN INTEREST IN FUND-FEFFORTS, ALL FOR THE BENEFIT OF TEXAS STATE UNIVERSITY.	CAISING
	EFFORTS, ALL FOR THE BENEFIT OF TEXAS STATE UNIVERSITY.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
710	(Code:) (Expenses #	,
4c	(Code:) (Expenses \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses 4,462,497.	Form 990 (2023)
		FUITH 556 (2023)

TEXAS STATE UNIVERSITY DEVELOPMENT

Form 990 (2023)

FOUNDATION

Part IV Checklist of Required Schedules

			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	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in 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			
	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		<u>X</u>
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_X_	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			7.7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	<u>X</u>
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		77	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		77	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	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)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
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			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا ہے ا		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا مد ا		v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ارما	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

TEXAS STATE UNIVERSITY DEVELOPMENT

Form 990 (2	2023) FOUNDATION	74-1982979	Pa	age '
Part IV	Checklist of Required Schedules (continued)			

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			
	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			
	Schedule K. If "No," go to line 25a	24a		X
b	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			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
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		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	X	
Pai	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	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
			$\Omega\Omega\Omega$	

Form 990	(2023)	FOUNDATION	
Part V	Sta	atements 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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		X
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		X
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			v
	any contributions that were not tax deductible as charitable contributions?	6a		X
р	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). 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?	7-		Х
a		7a 7b		Λ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.5		
С	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	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. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	ISa		
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			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
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)

Form 990 (2023)

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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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 50 **1a** Enter the number of voting members of the governing body at the end of the tax year 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. 50 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х 15b Other officers or key employees of the organization 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 Х taxable entity during the year? 16a 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? 16h Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website X Upon request Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records BROOKS HULL - 512-245-3860 UNIVERSITY DR. JCK 960, SAN MARCOS 78666 601

FOUNDATION

74-1982979

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Form 990 (2023) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 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-NEĆ) 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.

X Check this box if neither the organization no	or any related	orga	niza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do		Posi) than c	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of
	week		Ler an	uau	recto	JI/II US	lee)	from	from related	other
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or d	tee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ruste	ll trus		ee/	mpen		1099-NEC)	1099-NEO)	and related
	below	Individual trustee or director	Institutional trustee	Į.	Key employee	st co	Ē	.555 ,		organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			, o
(1) RONNYE J. COWELL	0.30									
BOARD CHAIR		Х		Х				0.	0.	0.
(2) CHRISTOPHER L. MITCHELL	0.30									
BOARD VICE CHAIR		Х		Х				0.	0.	0.
(3) LEE DOUGHTIE, III	0.30									
BOARD TREASURER		Х		Х				0.	0.	0.
(4) VILMA LUNA	0.30									
SECRETARY		Х		Х				0.	0.	0.
(5) SCOTT L. IRVINE	0.30									
AUDIT/FINANCE CHAIR		Х		Х				0.	0.	0.
(6) MICHAL E. WAECHTER	0.30								•	•
BOARD DEVELOPMENT CHAIR	0 20	Х		Х				0.	0.	0.
(7) CHRISTOPHER M. GARCIA	0.30			7.7						0
INVESTMENT CHAIR	0 20	Х		Х				0.	0.	0.
(8) VIRGINIA BARLOW, MD	0.30	.,								•
BOARD MEMBER	0 20	Х						0.	0.	0.
(9) JASON S. BRADSHAW	0.30	37							0	0
BOARD MEMBER	0.30	Х						0.	0.	0.
(10) JODI L. EDGAR BOARD MEMBER	0.30	Х						0.	0.	0.
(11) RICHARD FLOREZ	0.30	Λ						0.	0.	0.
BOARD MEMBER	0.30	Х						0.	0.	0.
(12) LESLIE K. FOSSLER	0.30							· ·	•	<u>.</u>
BOARD MEMBER		Х						0.	0.	0.
(13) BRIAN FRANCIS	0.30									
BOARD MEMBER		Х						0.	0.	0.
(14) RICHARD T. GARCIA	0.30									
BOARD MEMBER		Х						0.	0.	0.
(15) SERGIO GARCIA	0.30									
BOARD MEMBER		Х						0.	0.	0.
(16) SUSAN GARCIA	0.30									
BOARD MEMBER		Х						0.	0.	0.
(17) BRYAN GATES	0.30									
BOARD MEMBER		Х						0.	0.	0.

Form 990 (2023)

Dord VIII	 -									- 1 ago -
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	es,			ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average hours per week	box,	Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) STEVEN L. HARVEY	0.30									
BOARD MEMBER		Х						0.	0.	0.
(19) ERNEST J. HORN	0.30									
BOARD MEMBER		Х						0.	0.	0.
(20) PAMELA C. HUEWITT	0.30	7.7							,	0
BOARD MEMBER	0 20	Х						0.	0.	0.
(21) CARRIE A. HURT BOARD MEMBER	0.30	Х						0.	0.	0.
(22) STEVE W. ISON	0.30	Λ						· ·	0.	<u>0 •</u> _
BOARD MEMBER	0.30	х						0.	0.	0.
(23) DAUPHEN C. JACKSON	0.30							-	-	
BOARD MEMBER		Х						0.	0.	0.
(24) JAY JANECEK	0.30									
BOARD MEMBER		Х						0.	0.	0.
(25) ALEX KAKHNOVETS	0.30									
BOARD MEMBER		Х						0.	0.	0.
(26) ALAN MANN	0.30									
BOARD MEMBER		Х						0.	0.	0.
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part V	I, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.
2 Total number of individuals (including but r	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	0

			Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		X

Section B. Independent Contractors

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

the organization. Report compensation for the calendar year ending with or within	Title Organization 3 tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
CAMBRIDGE ASSOCIATES, LLC		
PO BOX 412015, BOSTON, MA 02241-2015	INVESTMENT ADVISING	228,959.
2 Total number of independent contractors (including but not limited to those listed	l above) who received more than	

\$100,000 of compensation from the organization SEE PART VII, SECTION A CONTINUATION SHEETS

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74-1982979 FOUNDATION Form 990

Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated employee	Former Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
27) WESLEY MELCHER	0.30									
BOARD MEMBER		Х						0.	0.	0.
28) BRAD NATIONS	0.30									
BOARD MEMBER		Х						0.	0.	0.
29) JONAHTHAN P. NELSON	0.30									
BOARD MEMBER		Х						0.	0.	0.
30) JD PEREZ	0.30									
SOARD MEMBER		Х						0.	0.	0.
31) TONY S. RIDOUT	0.30									
SOARD MEMBER		Х						0.	0.	0.
32) CHRISTIAN RUNDBERG	0.30									
SOARD MEMBER		Х						0.	0.	0.
33) KRISTIN SCHOLER	0.30									
SOARD MEMBER		Х						0.	0.	0.
34) WANDA R. SDAO	0.30									
SOARD MEMBER		Х						0.	0.	0.
35) ERNESTO S. SILVA	0.30									
BOARD MEMBER		Х						0.	0.	0.
36) BRUCE H. SMITH	0.30									
BOARD MEMBER		Х						0.	0.	0.
37) KAREN A. SOEFJE	0.30									
BOARD MEMBER		Х						0.	0.	0.
38) LANCE SPRUIELL	0.30									
BOARD MEMBER		Х						0.	0.	0.
39) JOEY TREVINO	0.30									
BOARD MEMBER		Х						0.	0.	0.
40) ANDRAE L. TURNER	0.30									
SOARD MEMBER		Х						0.	0.	0.
41) JOHN TURNER	0.30									
SOARD MEMBER		Х						0.	0.	0.
42) JERRY VILLEGAS	0.30									
SOARD MEMBER		Х						0.	0.	0.
43) BRADLEY B. WESTMORELAND	0.30									
SOARD MEMBER		Х						0.	0.	0.
44) PAMELA L. WILLS-WARD	0.30									
BOARD MEMBER		Х	\bigsqcup					0.	0.	0.
45) BROOKS HULL	0.30									
EXECUTIVE DIRECTOR			\bigsqcup	X				0.	0.	0.
46) ALISON MOTT	40.00	Ì								
		1	, ,	Х	ı			0.	0.	0.

Form 990 FOUNDATION 74-1982979

form 990 F'OUNDA'I'I (<u> </u>								74-198	
Part VII Section A. Officers, Directors, True	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	neck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					yee		the	organizations	compensation
	(list any	ector				n plo		organization	(W-2/1099-MISC)	from the
	hours for	rdire				ted e		(W-2/1099-MISC)		organization
	related	tee o	uste			en sa				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	vidua	itutio	Je.	emp	nest (ner			
	line)	Indi	Insti	Officer	Key	High	Former			
47) DEVIN WILLIAMS	0.30									
USINESS MANAGER				Х				0.	0.	0
48) DR. KELLY R. DAMPHOUSSE	0.30									
RESIDENT		Х						0.	0.	0
49) DR. GENE J. BOURGEOIS II	0.30							-	-	
ROVOST & VP FOR ACADEMIC		х						0.	0.	0
50) ERIC ALGOE	0.30									
P FOR FINANCE & SUPPORT S		Х						0.	0.	0
I TON TIMENOL & BOTTONI B		22						0.	0.	
		ł								
		ł								
		ŀ								
		 								1
		1								
	1	-			\vdash					

Form 990 (2023) FOUNDAT
Part VIII Statement of Revenue

			Check if Schedule O contains a	response (or note to anv lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
S S	1	_	Federated campaigns	1a					
ant	'			1b					
Ę g			Membership dues	1c					
fts, Ar			Fundraising events	1d					
ij Gi			Related organizations						
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contributions)	1e					
		Ť	All other contributions, gifts, grants, and		F 066 610				
			similar amounts not included above	1f	5,866,619.				
		_	Noncash contributions included in lines 1a-1f	1g \$	304,826.	F 066 610			
<u>0</u> <u>8</u>		h	Total. Add lines 1a-1f			5,866,619.			
					Business Code				
ce	2	а							
ř vi		b							
Sen		С							
eve		d							
Program Service Revenue		е							_
Ā		f	All other program service revenue						
		g	Total. Add lines 2a-2f						
	3		Investment income (including divider	nds, intere	st, and				
			other similar amounts)			1,944,896.			1944896.
	4		Income from investment of tax-exem	pt bond p	roceeds				
	5		Royalties			78,145.			78,145.
			(i)) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)		•				
			` '	ecurities	(ii) Other				
	-		assets other than inventory 7a 12,8	869,542.					
		h	Less: cost or other basis	,					
<u>o</u>		~		789,409.					
enu		c		80,133.					
her Revenue			Net gain or (loss)			3,080,133.			3080133.
Ϋ́			Gross income from fundraising events (n		<u> </u>	7,000,7=00			
Othe	0	а	including \$						
٥			contributions reported on line 1c). Se	.					
				I					
		L	Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraising						
	9	а	Gross income from gaming activities						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming act						
	10	а	Gross sales of inventory, less returns	I					
			and allowances						
			Less: cost of goods sold		•				
		С	Net income or (loss) from sales of inv	entory					
Ø					Business Code				
on e	11	а							
ant epu		b							
Miscellaneous Revenue		С							
Mis		d	All other revenue						
		е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions			10,969,793.	0.	0.	5103174.

Form 990 (2023) FOUNDATION Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,462,497.	4,462,497.		
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
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):				
а	Management				
b		121,337.		121,337.	
С		16,853.		16,853.	
d		,		,	
e					
f	Investment management fees				
g					
9	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	0.006		0 006	
13	Office expenses	2,836.		2,836.	
14	Information technology	11,480.		11,480.	
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,668.		11,668.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	500.		500.	
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.) ALLOCATED SERVICES	1,062,577.		253,892.	808,685.
a	TITUDD 3 T CTMC	515,611.		433,034.	515,611.
b	DOADD HYDHMAHA	47,489.		47,489.	JIJ, 011.
C	DANIE AND CREDER CARD OU	7,429.		7,429.	
d		7,429.		7,429.	
	All other expenses		1 162 107		1 224 206
25	Total functional expenses. Add lines 1 through 24e	6,261,073.	4,462,497.	474,280.	1,324,296.
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)				Form 990 (2023

Form 990 (2023)

Part X | Balance Sheet

Par	tΧ	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments			3,701,331.	2	4,405,354
	3	Pledges and grants receivable, net	1,652,302.	3	2,304,951		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current of	r forme	officer, director,			
		trustee, key employee, creator or founder, subs	tantial o	ontributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disqual	ified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other		24 222			
		basis. Complete Part VI of Schedule D		21,822.			
	b	Less: accumulated depreciation		21,822.	0.	10c	0
	11	Investments - publicly traded securities			67,611,675.	11	68,842,274
	12	Investments - other securities. See Part IV, line	43,523,539.	12	54,591,350		
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		14			
	15	· · · · · · · · · · · · · · · · · · ·			116 400 047	15	120 142 000
	16	Total assets. Add lines 1 through 15 (must equ			116,488,847.	16	130,143,929
	17	Accounts payable and accrued expenses			2,584,696.	17	1,140,485
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to any current or forr					
≣∣		trustee, key employee, creator or founder, subs				22	
Lia	23	controlled entity or family member of any of the Secured mortgages and notes payable to unrel				23	
	23 24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa				24	
	25	parties, and other liabilities not included on line	,				
		of Schedule D	•	· ·	283,972.	25	275,336
	26	Total liabilities. Add lines 17 through 25			2,868,668.	26	1,415,821
		Organizations that follow FASB ASC 958, che					
es		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			1,285,662.	27	1,160,472
Bal	28	Net assets with donor restrictions			112,334,517.	28	127,567,636
힏		Organizations that do not follow FASB ASC 9					
ᇳ		and complete lines 29 through 33.					
ρ̈́	29	Capital stock or trust principal, or current funds				29	
Sets	30	Paid-in or capital surplus, or land, building, or e				30	
As	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			113,620,179.	32	128,728,108.
_	33	Total liabilities and net assets/fund balances			116,488,847.	33	130,143,929.

Form **990** (2023)

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Pa	rt 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		,96		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,26		
3	3 Revenue less expenses. Subtract line 2 from line 1 3					<u> 20.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,62		
5	Net unrealized gains (losses) on investments	5	10	,62	<u>8,1</u>	<u>68.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7		-22	8,9	<u>59.</u>
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,		100		o 1	0.0
Da	column (B))	10	128	72	8,I	08.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X
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 Schedule	Ο.			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b				2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	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	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho					
За	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 required audit or audits? If the organization did not undergo the required audit or audits, and the organization did not undergo the required audit or audits.	ed audi	it	۵.		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

ZUZ3

OMB No. 1545-0047

Open to Public Inspection

Name of the organization TEXAS STATE UNIVERSITY DEVELOPMENT FOUNDATION

Employer identification number 74-1982979

Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.	
The	organ	nization is not a private found						
1	\Box	A church, convention of ch					1)(A)(i).	
2	一	A school described in sect					-76-76-7	
3	H	A hospital or a cooperative		•		V6V1VAVii	ii\	
4	H	A medical research organiz					•	the hospital's name
7		city, and state:	acion operated in con	njanotion with a noophar	400011004	000110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	the respitate riams,
_	X	An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental unit describe	ad in
3	21	•		nege of university owned	or operati	ed by a go	Werrimental unit describe	5 u III
_		section 170(b)(1)(A)(iv). (C	•	and the second s		70/1-1/41/41	<i>t</i> . A	
6	Н	A federal, state, or local go	· ·				• •	
7	Ш	An organization that norma	•	ntial part of its support fr	om a gove	ernmentai	unit or from the general	public described in
_		section 170(b)(1)(A)(vi). (C	-					
8	Н	A community trust describe			•			
9		An agricultural research org	-			-	-	-
		or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of the college	eor
		university:						
10		An organization that norma						
		activities related to its exen		·	. ,		• • •	•
		income and unrelated busing		(less section 511 tax) fro	m busines	sses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)					
11	\sqsubseteq	An organization organized a	and operated exclusi	ively to test for public saf	ety. See	section 50	09(a)(4).	
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to carry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on
	_	lines 12a through 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and 12g.	
а	ı		anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), typically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	ctors or trustees of the su	upporting
		organization. You must o	complete Part IV, Se	ections A and B.				
b	, L		anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by have	/ing
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
c	:	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ections A,	D, and E.	
c	ı 🗀	Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organiz	zation(s)
		that is not functionally int	tegrated. The organiz	ation generally must sati	sfy a distr	ibution red	quirement and an attentiv	veness
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
e		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	r Type III non-function	nally integrated supportir	ng organiz	ation.		
f	Ente	er the number of supported o	organizations					
		vide the following information		<u> </u>	6 N In III	orton Para Pata d		T
	((i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10		anization listed ing document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
	al							

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	tion 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.")	5078114.	2098987.	5244160.	2906534.	5866619.	21194414.
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						
4	Total. Add lines 1 through 3	5078114.	2098987.	5244160.	2906534.	5866619.	21194414.
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)						1888792.
6	Public support. Subtract line 5 from line 4.						19305622.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	5078114.	2098987.	5244160.	2906534.	5866619.	21194414.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2194692.	2058721.	3252215.	1736701.	2023041.	11265370.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						32459784.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stop						
	tion C. Computation of Publi						
	Public support percentage for 2023 (li					14	59.48 %
	Public support percentage from 2022					15	58.37 <u>%</u>
16a	33 1/3% support test - 2023. If the o						
	$\ensuremath{\mathbf{stop}}$ here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the o	•		•		•	
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ition			
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	r e. Explain in Part	VI how the organi	zation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	ck this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instruction	s

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.)

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)	(12)	(2) = = 1	(-7	(5) = 5 = 5	χ,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(-, : -	(-,	(-)	(-,	(-,	(-,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	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						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		1	1	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•	. , . ,	· —
<u> </u>	check this box and stop here	a Cummant Da					
	ction C. Computation of Publi					T .= T	
	Public support percentage for 2023 (I	, ,,,	•	column (f))		15	<u>%</u>
	Public support percentage from 2022 ction D. Computation of Inves					16	%
	•			ing 10 galuma (f)		17	0/
	Investment income percentage for 20					17	%
	Investment income percentage from						7 is not
198	a 33 1/3% support tests - 2023. If the					- 4.5	
k	more than 33 1/3%, check this box as 33 1/3% support tests - 2022. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	1 7

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.)

		Yes	No
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JIe	10b A (Forn	n 990)	2023

	rt IV Supporting Organizations (continued)			age o
	Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		162	NO
11	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а		110		
	11c below, the governing body of a supported organization?	11a		
	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	44.		
<u>Sac</u>	<u>detail in</u> Part VI. rtion B. Type I Supporting Organizations	11c		
300	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 year (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	struction	ıs).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		54		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*32025 12-21-23

Schedule A (Form 990) 2023

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	na Organi	zations	TELEVISION Page 6
				Dart VI) Coo instructions
1	Check here if the organization satisfied the Integral Part Test as a qualifying		•	Part vi). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations mus ion A - Adjusted Net Income	st complete s	(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		
	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		

Schedule A (Form 990) 2023

__ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

	dule A (Form 990) 2023 FOUNDATION			74	1-1982979 r	Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _{(continued}	<u>d)</u>		
<u>Secti</u>	on D - Distributions				Current Year	•
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	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	ne organization is responsive				
	(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		<u> </u>	10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023		(iii) Distributable Amount for 202	
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					
<u>a</u>	From 2018					
<u>b</u>	From 2019					
c	From 2020					
d	From 2021					
<u>e</u>	From 2022					
f	Total of lines 3a through 3e					
<u>g</u>	Applied to underdistributions of prior years			_		
<u>h</u>	Applied to 2023 distributable amount					
<u>i</u>	Carryover from 2018 not applied (see instructions)			_		
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			_		
4	Distributions for 2023 from Section D,					
	line 7: \$					
<u>a</u>	Applied to underdistributions of prior years			_		
<u> </u>	Applied to 2023 distributable amount					
<u>c</u>	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:					
<u>a</u>	Excess from 2019					
<u>b</u>	Excess from 2020					
c	Excess from 2021					
d	Excess from 2022					
е	Excess from 2023					

Schedule A (Form 990) 2023

TEXAS STATE UNIVERSITY DEVELOPMENT FOUNDATION

74-198<u>2979 Page 8</u> FOUNDATION Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)

Schedule A (Form 990) 2023

Schedule B

Organization type (check one):

(Form 990)

Department of the Treasury
Internal Revenue Service

Attach to Form 990
Go to www.irs.gov/Form990

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

Name of the organization
TEXAS STATE UNIVERSITY DEVELOPMENT
FOUNDATION

Employer identification number
74-1982979

Filers of:		Section:		
Form 990	or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization		
		4947(a)(1) nonexempt charitable trust not treated as a private foundation		
		527 political organization		
Form 990	-PF	501(c)(3) exempt private foundation		
		4947(a)(1) nonexempt charitable trust treated as a private foundation		
		501(c)(3) taxable private foundation		
	-	covered by the General Rule or a Special Rule. (), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.		
General l	Rule			
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.		
Special F	Rules			
:	sections 509(a)(1) a contributor, during t	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.		
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.			
	year, contributions of the checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year \$		
answer "I	No" on Part IV, line 2	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).		

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

Schedule B (Form 990) (2023)

Name of organization
TEXAS STATE UNIVERSITY DEVELOPMENT
FOUNDATION

Employer identification number

74-1982979

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,435,576.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 175,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 143,335.	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 Occupate Part II for noncash contributions.)

Name of organization
TEXAS STATE UNIVERSITY DEVELOPMENT
FOUNDATION
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I STOCKS 5 06/25/24 143,335. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

Name of organization **Employer identification number** TEXAS STATE UNIVERSITY DEVELOPMENT FOUNDATION 74-1982979 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

TEXAS STATE UNIVERSITY DEVELOPMENT FOUNDATION

Employer identification number 74-1982979

Pa	Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ds or Accounts. Complete if the
		(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 w	riting that the assets held in donor ac	lvised funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can	be used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpo	se conferring
	impermissible private benefit?		Yes No
Pa			0, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	`	
	Preservation of land for public use (for example, recreat	ion or education) Preservation	n of a historically important land area
	Protection of natural habitat	Preservation	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the complete lines 2a throu	ed conservation contribution in the fo	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b			
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acquir	• '	
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by	the organization during the tax
	year		
4	Number of states where property subject to conservation ease		_
5	Does the organization have a written policy regarding the peri		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing c	onservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conse	rvation easements during the year
		3	3 ,
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financial stat	ements that describes the
_	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
па	If the organization elected, as permitted under FASB ASC 958	•	
	of art, historical treasures, or other similar assets held for publication and its Dark VIII the treat of the free teacher its free		•
	service, provide in Part XIII the text of the footnote to its finance		
р	If the organization elected, as permitted under FASB ASC 958	· ·	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in f	urtherance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			' '
2	If the organization received or held works of art, historical trea		ıcıal gaın, provide
	the following amounts required to be reported under FASB AS	-	•
a	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		\$

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

Schedule D (Form 990) 2023

Par	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or Ot	her S	imilar As	sets (continued)		
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that mak	e signi	ficant use of			
	collection items (check all that apply).								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	c Preservation for future generations								
4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.								
5	During the year, did the organization solicit or	r receive donations o	of art, historical treas	sures, or other sim	nilar as	sets			
	to be sold to raise funds rather than to be ma	intained as part of th	ne organization's col	llection?			Yes No		
Par	t IV Escrow and Custodial Arrang	gements Complet	te if the organization	answered "Yes"	on For	m 990, Part	IV, line 9, or		
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an, or other intermed	diary for contribution	s or other assets	not inc	luded			
	on Form 990, Part X?						Yes No		
b	If "Yes," explain the arrangement in Part XIII a								
							Amount		
С	Beginning balance					1c			
d	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo						Yes No		
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in Part X	III				
Pai	t V Endowment Funds Complete if	the organization ans	swered "Yes" on For	m 990, Part IV, lir	e 10.				
		(a) Current year	(b) Prior year	(c) Two years bad	k (d)	Three years I	back (e) Four years back		
1a	Beginning of year balance	112,334,517.	103,437,179.	118,575,22	3.	94,981,4	94,070,350.		
	Contributions	5,863,919.	2,892,783.	5,243,76	0.	2,095,9	5,078,114.		
	Net investment earnings, gains, and losses	15,549,657.	12,187,630.	-14,838,13	1.	. 26,809,732. 1,870,			
	Grants or scholarships	4,462,497.	4,635,152.	3,816,70	4.	3,820,8	327. 4,628,480.		
	Other expenditures for facilities								
	and programs	1,717,960.	1,547,923.	1,726,96	9.	1,491,0	1,409,458.		
f	Administrative expenses								
g	End of year balance	127,567,636.	112,334,517.	103,437,17	9.	118,575,2	94,981,412.		
2	Provide the estimated percentage of the current	•		•					
а	Board designated or quasi-endowment	,	%	,					
	Permanent endowment 64.1800	%	—						
	25 222	<u></u> -							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
За	Are there endowment funds not in the posses	•	ition that are held an	nd administered fo	r the				
	organization by:						Yes No		
	(i) Unrelated organizations?						3a(i) X		
	(m) = 1 · · · · · · · ·						- W V		
b	If "Yes" on line 3a(ii), are the related organizar						·····		
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Par	t X, line	e 10.			
	Description of property	(a) Cost or o	` '		•	umulated ciation	(d) Book value		
1a	Land	- '							
	Buildings								
	Leasehold improvements								
	Equipment	I		6,622.		6,622.	0.		
	Other	I		5,200.	1	5,200.	0.		
	. Add lines 1a through 1e. (Column (d) must ea						0.		

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 FOUNDATION		74	-1982979 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) VANGUARD TOTAL STOCK MKT			
(B) INDEX FUND INST SHARE	43,898,036.	END-OF-YEAR MARKET	VALUE
(C) VANGUARD			
(D) INTERMEDIATE-TERM BOND			
(E) INDEX FUND INSTITUTIONAL			
(F) SHARES	10,693,314.	END-OF-YEAR MARKET	VALUE
	10,000,014.		V1111011
(G)			
(H)	54,591,350.		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	34,391,330.		
	an Farma 000 Dart IV line of	Ida Cas Farra 000 Bart V line 10	
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	I1d. See Form 990, Part X, line 15.	
-	Description		(b) Book value
(1)			. ,
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	<i>l. (B))</i>		
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) ANNUITIES PAYABLE			275,336.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(3)			İ

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) ... 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

275,336.

Sche	edule D (Form 990) 2023 FOUNDATION				1982979	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wi	th Revenue per Re	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ı.				
1	Total revenue, gains, and other support per audited financial statements			_1_	21,369,	002.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	. 2a	10,628,168.			
b	Donated services and use of facilities					
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e	10,628,	,168.
3	Subtract line 2e from line 1			3	10,740,	834.
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	228,959.			
b	Other (Describe in Part XIII.)	. 4b				
С	Add lines 4a and 4b			4c	228,	,959.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	10,969,	793.
Pai	rt XII Reconciliation of Expenses per Audited Financial Statem	ents W	ith Expenses per F	Retur	n	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l .				
1	Total expenses and losses per audited financial statements			1	6,261,	073.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments					
С	Other losses					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	6,261,	073.
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				
С	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,261,	,073.
Pai	rt XIII Supplemental Information					
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	IV, lines	1b and 2b; Part V, line 4	; Part	X, line 2; Part X	I,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	litional in	formation.			
PAF	RT X, LINE 2:					
THE	E FOUNDATION HAS ADOPTED FINANCIAL ACCOUNT	ING S	TANDARDS BOA	RD	(FASB)	
<u>ACC</u>	COUNTING STANDARDS CODIFICATION (ASC) 740,	ACCC	UNTING FOR U	NCE:	RTAINTY	<u>IN</u>
INC	COME TAXES. THE BENEFIT OF A TAX POSITION	IS RE	COGNIZED IN	THE	FINANCI	AL
ST	ATEMENTS IN THE PERIOD ENDING DURING WHICH	<u>, BAS</u>	ED ON ALL AV	AIL.	ABLE	
EV]	IDENCE, MANAGEMENT BELIEVES IT IS MORE LIK	ELY I	HAN NOT THE	POS	ITIONS_	
		 -				
WII	LL BE SUSTAINED UPON EXAMINATION, INCLUDING	3 THE	RESOLUTION	OF .	APPEALS	OR
	TOWN DOORGOOD TO NOW MAY DOCUMENTS	TT 7 TT	MDDD 0777			
ТΤ.	rigation processes, if any. Tax positions	T.HY.I.	MEET THE			

REALIZED UPON SETTLEMENT WITH THE APPLICABLE TAXING AUTHORITY. AS OF JUNE

MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD ARE MEASURED AS THE LARGEST

30, 2024 AND 2023, THE FOUNDATION HAS NOT RECOGNIZED LIABILITIES FOR

AMOUNT OF TAX BENEFIT THAT IS MORE THAN 50 PERCENT LIKELY OF BEING

Part XIII Supplemental Information (continued)
JNCERTAIN TAX POSITIONS OR ASSOCIATED INTEREST OR PENALTIES.
THE TAX RETURNS FOR THE YEARS ENDING JUNE 30, 2021, AND AFTER ARE OPEN TO
EXAMINATION BY FEDERAL, LOCAL, AND STATE AUTHORITIES.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.
TEXAS STATE UNIVERSITY DEVELOPMENT

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FOUNDATIO	N						74-1982979
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to award the grants or assi	stance?						No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II can		· ·	ed.	(f) Madaaal af		
(a) Name and address of organization or government	(b) EIN	(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
TEXAS STATE UNIVERSITY							
601 UNIVERSITY DRIVE							
SAN MARCOS, TX 78666	74-6002248	501(C)(3)	2,558,745.	0.			SCHOLARSHIPS FOR STUDENTS
·							
TEXAS STATE UNIVERSITY							
601 UNIVERSITY DRIVE							
SAN MARCOS, TX 78666	74-6002248	501(C)(3)	1,903,752.	0.			UNIVERSITY ADVANCEMENT
2 Enter total number of section 501(c)(3) a	nd government or	uanizations listed in th	ne line 1 table			1	<u> </u>
3 Enter total number of other organization	-	-					

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

Schedule I (Form 990) 2023

(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
rt IV Supplemental Information. Provide the information	on required in Part I, lin	e 2; Part III, columi	n (b); and any other ac	Iditional information.	
RT I, LINE 2:	·				
E ORGANIZATION PROVIDES GRANTS	S AND SCHOLA	RSHIP FUN	DS TO THE U	NIVERSITY	
D THE UNIVERSITY MAINTAINS REG					
NDS.					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

TEXAS STATE UNIVERSITY DEVELOPMENT

Open to Public Inspection

Employer identification number

		FOUNDATION					74-1	982	979	
Par	rt I Ty	pes of Property								
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	no	(d) Method of de ncash contribu			3
1	Art - Works	s of art								
2		rical treasures								
3	Art - Fracti	onal interests								
4	Books and	publications								
5	Clothing a	nd household goods								
6		other vehicles								
7		planes								
8		l property								
9	Securities	- Publicly traded	X	7	304,826.	FMV				
10	Securities	- Closely held stock								
11	Securities	- Partnership, LLC, or								
	trust intere	ests								
12	Securities	- Miscellaneous								
13	Qualified of	onservation contribution -								
	Historic st									
14		onservation contribution - Other								
15		e - Residential								
16		e - Commercial								
17		e - Other								
18		s								
19		ntory								
20		medical supplies								
21										
22		artifacts								
23		specimens								
24	Archeolog	ical artifacts								
25	Other	()								
26	Other	()								
27	Other	()								
28	Other)								
29		Forms 8283 received by the organi								
	for which t	he organization completed Form 82	83, Part V, D	Oonee Acknowledg	ement 29			1		
									Yes	No
30a	· ·	year, did the organization receive b	•		,	•	at it			
		for at least 3 years from the date of		ntribution, and whi	ich isn't required to be used	for				37
		rposes for the entire holding period	?					30a		<u> </u>
	,	escribe the arrangement in Part II.								37
31		organization have a gift acceptance	•	•	•	ions?		31		<u> </u>
32a	Does the c	organization hire or use third parties ons?			cit, process, or sell noncash			32a		Х
b	If "Yes," de	escribe in Part II.								
33	If the organ	nization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is chec	cked,				
	describe in	n Part II.								
For F	Paperwork	Reduction Act Notice, see the Inst	tructions for	Form 990.			Schedule M	(Forn	n 990)	2023

332141 09-11-23

TEXAS STATE UNIVERSITY DEVELOPMENT

Schedule M	(Form 990) 2023	FOUNDATION		74-1982979	Page 2
Part II	(Form 990) 2023 Supplemental	I Information. Provide the informat	ion required by Part I. lines 30b. 3	2b. and 33. and whether the organiza	ation
	is reporting in Part	t I, column (b), the number of contributi	ons, the number of items received	I. or a combination of both. Also com	plete
	this part for any ac	dditional information.	,		•
	. ,				
					

Schedule M (Form 990) 2023

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SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

TEXAS STATE UNIVERSITY DEVELOPMENT FOUNDATION

Employer identification number 74-1982979

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
UNIVERSITY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE AUDIT & FINANCE COMMITTEE REVIEWS AND SENDS TO THE EXECUTIVE COMMITTEE
PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
A CONFLICT OF INTEREST FORM IS SIGNED AT THE FALL FULL BOARD MEETING BY
EACH MEMBER ANNUALLY.
FORM 990, PART VI, SECTION B, LINE 15:
THE FOUNDATION DOES NOT HAVE EMPLOYEES. THE FOUNDATION REIMBURSES THE
UNIVERSITY FOR SALARY AND BENEFITS OF UNIVERSITY EMPLOYEES ASSIGNED TO THE
FOUNDATION.
FORM 990, PART VI, SECTION C, LINE 19:
THE DEVELOPMENT FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC VIA ITS
PUBLIC WEBSITE AND UPON REQUEST.
FORM 990, PART VI, SECTION B, LINE 11B
THE OVERSIGHT OF THE AUDIT AND SELECTION PROCESS FOR THE AUDIT
COMMITTEE DID NOT CHANGE FROM THE PRIOR YEAR.

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

Schedule O (Form 990) 2023