## COPY FOR YOUR RECORDS

۰ Form	990		urn of Organization				0/	. 1545-0047
			501(c), 527, or 4947(a)(1) of the not enter social security numb					J21 to Public
Internal	Revenue Service	a biy	Go to www.irs.gov/Form990 for	instructions and the latest i	information.			ection
			beginning09/01/21 , a		2			
	eck if app <u>licable</u> .	a see the set of the s	ORTHEAST TEXAS COM		1	D Employer	identification :	number
	dress change		DUNDATION INC	<u>antint</u>		75 00	-	/
∐ Na	me change	Doing business as	if mail is not delivered to street address)		Room/suite	13-2U	08835	
ivi 🗌	ial return	2866 FM 1735	1 A A A A A A A A A A A A A A A A A A A				72-191	.1
	nairetum/ minated	City or town, state or province, c	ountry, and ZIP or foreign postal code					
	nended return	MT PLEASANT	TX 75455			G Gross rece	ipts\$3,	772,730
H	plication pending	F Name and address of principal of	Theer .		H(a) is this a gn	ouxo neturm for s	ubordinates	Yes X No
⊔~	ридшлі ренціну	RON CLINTON					H	Yes No
		2866 FM 1735   MT PLEASANT	, TX 75	455	H(b) Are all sub		See instructions	
	x-exempt status:	X 501(c)(3) 501(c)		947(a)(1) or 527				
		WW.NTCC.EDU	( ) (insert no.) 4	547(a)(1) Or 527	H(c) Group exe	mater aumho		
-	orm of organization		Association Other	I YA	ar of formation; 1			i domicile: <b>TX</b>
_		Immary					M Outo Vi logo	
T		constraints for the second	nission or most significant activ	vities:				
8	THE	FOUNDATION'S PUR	POSE IS TO RECEIVE	AND ADMINISTER	GIFTS A	ND GRAI	TS TO	*********
	ENHA	NCE EDUCATIONAL	EXCELLENCE AT NOR	THEAST TEXAS COM	MUNITY C	OLLEGE	•	
Governance	222222							2. 11. 12. 12. 12. 12. 12. 12. 12. 12. 1
ິຍ	2 Check th	is box 🕨 if the organizat	tion discontinued its operations	or disposed of more than :	25% of its net	assets.		
đ			overning body (Part VI, line 1a				11	
Activities	4 Number	of independent voting mem	bers of the governing body (Pa	art VI, line 1b)			11	
Į,			d in calendar year 2021 (Part			5	0	
¥		nber of volunteers (estimate				6	0	
	7a lotal unr	elated business revenue fro	om Part VIII, column (C), line 1	2		7a		0
+	D Net unre	lated business taxable incol	me from Form 990-T, Part I, lin		Prior Yes	7b	Curren	0 t Year
	8 Contribut	ions and grants (Part VIII, I	line 1h)		2,121			22,870
Revenue		service revenue (Part VIII,			1,646			19,261
BVB	10 Investme	nt income (Part VIII, colum	n (A), lines 3, 4, and 7d)		626	5,103		30,599
°≃	11 Other rev	/enue (Part VIII, column (A)	, lines 5, 6d, 8c, 9c, 10c, and	11e)				0
$\rightarrow$			11 (must equal Part VIII, colu		4,394	,098	3,7	72,730
			art IX, column (A), lines 1-3)					0
		paid to or for members (Pa						0
305			byee benefits (Part IX, column					0
penses			X, column (A), line 11e)	0				0
ŭ.	17 Other ov	draising expenses (Part IX,	.), lines 11a–11d, 11f–24e)	······································	2,662	426	3 1	13,962
2	18 Total ext	penses (Fait in, Wuithin (A penses Add lines 13-17 (m	iust equal Part IX, column (A),	line 25)	2,662			13,962
		less expenses. Subtract lir			1,731			58,768
28					Beginning of Cur	rent Year	End of	Year
M Assets or nd Balances					9,750			85,668
A Pa	21 Total liat	pilities (Part X, line 26)				5,175		64,187
초리			ct line 21 from line 20		8,865	,340	8,3	21,481
-		gnature Block						
Und	er penalties of	perjury, I declare that I have e complete. Declaration of prena	examined this return, including acc rer (other the formation in the second	companying schedules and stat	tements, and to	the best of owledge	my knowledg	e and belief, it
			COPY	a shering ten of milon prope	Not not dry Kit	T		
Sigr		ignature of officer				Date		
Here	· II.	JON MCCULLOUG	38	EXECUT	IVE VI		ESI	
		ype or print name and title						
-	Print/Typ	e preparer's name	Preparer's signature		Date	Check	if PTIN	
Paid	MOLLY	ABELE, CPA	MOLLY ABELE,	CPA		self-emp	loyed P004	47967
Prepa	Funsing	me > AXLEY &	RODE, LLP		F	im's EIN 🕨		67305
Use	Only	PO BOX						
	Firm's ac	dress ) LUFKIN	TX 75902-1388		P	hone no.	936-63	4-6621
			arer shown above? See instruc	tions			X 1	
For P	aperwork Red	luction Act Notice, see the s	eparate instructions.				For	m 990 (2021)

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_	990 (2021) NORTHEAST TE			75-2008835	Page 2
I G				ine in this Part III	
1	Briefly describe the organization's mi	1.5			
T	HE FOUNDATION'S PUT	RPOSE IS I	E AT NORTHEA		UNITY COLLEGE.
		-		which were not listed on the	Yes 🗶 No
	If "Yes," describe these new services Did the organization cease conductin		nt changes in how it con	ducts any program	
2					Yes X No
	If "Yes," describe these changes on				
4	Describe the organization's program				-
	expenses. Section 501(c)(3) and 501			e amount of grants and allo	cations to others,
	the total expenses, and revenue, if a	ny, ior each progra	In service reponed.		
la	(Code ) (Expenses \$	364,921	including grants of\$	) (R	evenue \$)
E	DUCATIONAL SCHOLAR				
		and a second second second			
	***************************************				
	500000000000000000000000000000000000000				
		Series Conferences of			
_					
		287,858	including grants of	) (R	evenue \$
S	UPPORT OF COLLEGE				
			ener construction of the		
				******	
	Statis	icondella (encor			
				******	
		and the second			
C	(Code: ) (Expenses \$	2,461,183	including grants of\$	) (R	evenue \$ 1,219,261
С	OMMUNITIES IN SCHO	OLS			
			Des Ders register Aufgahrungen		
		California and California			
			ne terreter tit in tractile to	······································	
			************	A A A A A A A A A A A A A A A A A A A	
				- Service and the service service	
ld	Other program services (Describe or	n Schedule O.)			
	(Expenses_\$	including grant	s of\$	) (Revenue \$	)
40	Total program service expenses	3,113,	962		
44					Form 990 (2021)

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	990 (2021) NORTHEAST TEXAS COMMUNITY COLLEGE 75-2008835		Pa	age 3
_Pa	art IV Checklist of Required Schedules	- 1	Vac	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		105	
	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 1	3	) 	x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	_	X
·	assessmentic, 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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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		<u>x</u> _
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X	-
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<u>11d</u>		<u>x</u> _
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		17	
40-	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	40-		
	Schedule D, Parts XI and XII	<u>12a</u>	X	-
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	425		x
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a		14a		X
b		140	-	
~	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	145		<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	-		<u></u>
	for any 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 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	6	<u>x</u> _
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u>x_</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>  x</u> _
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	-	<u>X</u> _
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<u>20a</u>		<u>x</u> _
b	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 domestic approximation or the second	1		v
_	domestic gevenment on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Fom	1 990 (2021) NORTHEAST TEXAS COMMUNITY COLLEGE 75-2008835		P	age 4
_Pa	art IV Checklist of Required Schedules (continued)		X	-
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	-	Yes	No
	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 Afine 3, 4, or 5 about compensation of the	11	11	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	$  \setminus  $	9	1
	employees? If "Yes," complete Schedule J	23	-	X
<b>24</b> a	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	<u> </u>	-
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		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			8
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	0.51		
26	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	1	x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	20		
	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			
	and a first and the Debra data is the Debra data is the second se	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,		100	
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33		<u>  X</u> _
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<u>35b</u>		<u>+</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		v
37	related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_36		<u>x</u>
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X_
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	1-31		-
	19? Note: All Form 990 filers are required to complete Schedule O.	38	x	
P	art V Statements Regarding Other IRS Filings and Tax Compliance	100		-
	Check if Schedule O contains a response or note to any line in this Part V			
			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
DAA		For	m <b>99</b> (	0 (2021)

Form	990 (2021) NORTHEAST TEXAS COMMUNITY COLLEGE 75-2008835		Pa	ige 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See Instructions.	2.1	(	
3a	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	36		
<b>4</b> a	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?	<b>5</b> a		X
b	Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	_	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	_	
7	Organizations that may receive deductible contributions under section 170(c).	1.1		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	-	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	_	
d	If "Yes," indicate the number of Forms 8282 filed during the year		-	
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70	-	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
0		8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	0		-
a	Did the economication make one touching distributions under earlier (0000)	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:	00	1	100 C
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 10b			
11	Section 501(c)(12) organizations. Enter:	1	- 1	
а	Gross income from members or shareholders 11a		- 1	
b	Gross income from other sources, (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a		12a		
b	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.		1	
b	Enter the amount of reserves the organization is required to maintain by the states in which		5.4	
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	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		X
	If "Yes," see instructions and file Form 4720, Schedule N.		22	-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	_	
_	If "Yes," complete Form 6069.		1	

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Form	990 (2021) NORTHEAST TEXAS COMMUNITY COLLEGE 75-2008835		Pa	<u>lae 6</u>
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and fo	ora"	Vo"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C	. See	instr	uctions.
_	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	Public Inchartion ( inc	8	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 11	1		
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar		6 1	
	committee, explain on Schedule O			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3	_	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the foliow	ing:		
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
				No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Ĩ	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		Sec. 13
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990,			
12a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		x
þ	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		-	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		- 6	1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			) — —
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
-	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ORTHEAST TEXAS COMMUNITY COLLEGE 2886 FM 1735			
	F PLEASANT TX 75455 903	-43	4-8	100
DAA				(2021)

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Form 990 (2021) NORTHEAST TEXAS COMMUNITY COLLEGE 75-2008835 Page 7
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.
<ul> <li>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.</li> </ul>
<ul> <li>List all of the organization's current key employees, if any. See instructions for definition of "key employee."</li> </ul>
<ul> <li>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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.</li> </ul>
, List all of the emphisization's former officer, low employees, and highest compensated employees who mentiond man then

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

(A) Name and title	(B) Average hours per week	600	, unie	Pos check iss pe nd a t	more rson	than or is both a pr/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Kay employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC}	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) CHUCK JOHNS	0.00	$\square$								
BOARD CHAIRMAN	0.00	x								
(2) ROBIN SHARP	0.00	1	-	$\vdash$	-	┝╍┼	-17	0	0	0
(I) ROBIN SIMM	0.00								6	
BOARD VICE CHAIRMAN	0.00	x	5					0	0	0
(3) SONDRA FOWLER	0.00		1	$\vdash$	-	+			0	
BOARD SECRETARY	0.00								0	
(4) SID CREER	0.00	X	<u>, -</u>	$\vdash$	-	+	_	0	0	0
(4) SID CREEK	0.00									
MEMBER	0.00	x	8					0	0	0
(5) CHAD ELLEDGE	0.00		-	$\vdash$	-		_	<u>v</u>		0
	0.00									
MEMBER	0.00	x	þ				_	0	0	0
(6) DAN MCCAULEY										
Construction and the second second	0.00									
MEMBER	0.00	X						0	0	0
(7) STEPHANIE THURM										
	0.00		8				1			
MEMBER	0.00	X					_	0	0	0
(8) RON CLINTON										
	0.00									
PRESIDENT	0.00			X	-		_	0	0	0
(9) JON MCCULLOUGH										
EVECUMINE VICE DECT	0.00			x					0	
EXECUTIVE VICE PRESI (10) KEVIN ROSE	0.00		-		-	++	-	0	0	0
	0.00									
SENIOR VICE PRESIDEN	0.00			x				0	0	0
(11) JEFF CHAMBERS	0.00						_		0	· · · · · · · · · · · · · · · · · · ·
	0.00									
VICE PRESIDENT	0.00			x				0	0	0

	990 (2021) NORTHEAS												d)		Page 8
<u></u>	(A) Name and tite	(B) Average hours	(do	not c	(C Posi heck r ss per	;) tion more son i	than o s both	one	R	(D) eportable npensation	(E) Reportable compensati	a on	Estima	(F) ated arric	
	Publ	per week (list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated	Former	organ 10	from the ization (W-2/ 99-MISC/ 99-MEC)	from relation organizations 1099-MISC 1099-NEC	(W-2)	ti organ	pensation rom the ization a organiza	нлd
								-							
													_		
									-						
														24	
										_				_	
		19-10													
										<i>u</i>					
1b c d 2	Subtotal Total from continuation she Total (add lines 1b and 1c) Total number of individuals (	eets to Part VI	, Se	ctio	n A				Dove) who	received more	than \$100.000 (	nf			
3 4 5	reportable compensation from Did the organization list any employee on line 1a? If "Yes For any individual listed on li organization and related orga- individual Did any person listed on line	n the organizati former officer, of s," complete Sch ne 1a, is the su anizations great e 1a receive or a	directive during of the during	tor, tor, frep	truste for si ortat \$150	ee, l uch ole c ,000	key ( indiv comp )? If	emp /idua ens "Yea	loyee, or h al ation and s," complet n any unre	nighest comper other compens te Schedule J i lated organizat	nsated ation from the for such			4	es No X X
Sect	for services rendered to the ion B. Independent Contrac Complete this table for your	tors									nore than \$100 (	000 of		5	X
	compensation from the organ									r ending with a			ax year.	Comp	) ensation
									- <del></del>						
2	Total number of independent received more than \$100,00	t contractors (ind	cludi	ng b	ut no	ot lir	nited	l to	those liste	d above) who		0	-		

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For	n 99	0 (2021) NOR			S CC	MUNIT	Y CO	OLLEGE 75	-2008835		Page S
Pa	rt V	All Statem	ent o	f Revenue	ntaine a	10500056		te to any line in	this Part \/III		
						response		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service   Contributions, Gifts, Grants Revenue   and Other Similar Amounts		Federated can Membership du Fundraising ev Related organi Government grans All other comfluctors and similar amounts Noncash contribution lines 1a-11 Total. Add line PROGRAM SI	ues vents izations (contributio s, grits, gra not include s included s included s 1a-11 ERVICE	ns) ants, ad above in f C REVENUE		Busne		2,522,870 1,219,261	1,219,261		
Lam See	d										
Sh:	е								0		-
ш.	f	All other progra									
		Total. Add line					. 🕨	1,219,261			
	4	Investment inco other similar and Income from in	mounts) ivestme	) int of tax-exen	npt bond	proceeds	. 🕨 [	30,599			30,599
	5	Royalties		(D. C1							1
	6a	Gross rents	6a	(i) Real		(ii) Persona	u				
		Less, rental excense						15152.5			
		Rental inc. or (loss)	6c			_				1 N 17 1	
Other Revenue	7a b	Net rental incom Gross amount from sales of assets other than inventory Less: cost or other basis and sales exps Gain or (loss)	7a	loss) (i) Securite		(ii) Other	•				
10	d	Net gain or (los	ss)								
Oth	8a b	Gross income fro (not including \$ of contributions re 1c). See Part IV, I Less: direct exp	m fundra eported c line 18 penses	aising events	8a 8b						
	C	Net income or	(loss) fi	rom fundraisin	g events	• • · · · · · · · · · · · · · · · · · ·	. 🕨				
		Gross income activities. See I	Part IV,	line 19	9a						
		Less: direct ex			9b		-				
	10a	Net income or Gross sales of returns and alk	invento owance	ory, less s	10a						
		Less: cost of go Net income or			10b	_				-	
Miscellaneous		1. Internet				Busine	ss Code				
Ň	d	All other revenue				-					
	e	Total. Add line									
_	12	Total revenue.	. See in	structions	La la la la	manora		3,772,730	1,219,261	0	30,599

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ecti	ion 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a res			t complete column (A).	F
0 0	tinclude amounts reported on lines 6b, 1	'h (A)	Let have	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	(B) Program service	Management and general expenses	Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, time 21	ILISPA	FUIDI	100	DY.
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 Benefits paid to or for members				
5	Compensation of current officers, directors,				
5	trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				**
_	persons described in section 4958(c)(3)(B)				
7 B	Other salaries and wages Pension plan accruals and contributions (include				
9	section 401(k) and 403(b) employer contributions) Other employee benefits				
0 1	Payroll leaxes Fees for services (nonemployees):				
	Management				
b c	Legal Accounting				-
d	Lobbying			1 100 10 10	
e f	Professional fundraising services. See Part IV, line investment management fees				
Ø	Other (ill line 11g amount exceeds 10% of line 25, column: (A) amount, list line 11g expenses on Schiedulle ().)				
	Advertising and promotion	217.015			1-1-1-C
} 	Office expenses Information technology				
5	Royalties				
5	Occupancy Travel				
3	Payments of travel or entertainment expense for any federal, state, or local public officials	S			
€ }	Conferences, conventions, and meetings Interest				
2	Payments to affiliates Depreciation, depletion, and amortization	7,537	7,537		
3	Insurance	1,337	1,331		
ŀ	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
a	(A) amount, list line 24e expenses on Schedule O.) COMMUNITIES IN SCHOOLS	2,453,646	2,453,646		
	SCHOLARSHIPS SUPPORT OF COLLEGE	<u>364,921</u> 287,858	<u>364,921</u> 287,858		
d		207,000	207,000		
5	All other expenses	3,113,962	3,113,962	0	
	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)				

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Form 990 (2021)	NORTHEAST	TEXAS	COMMUNITY	COLLEGE	75-2008835
Part X Balance Sheet					

Page 11

				(A)	T	(B)
				Beginning of year		End of year
1	Cash-non-interest-bearing	00t1/	2,235,345	1-1	4,476,561	
2					2	1 1 1
3	The second of the second secon		······································		3	
4	Accounts receivable, net			12,306	4	2,279
5						
	trustee, key employee, creator or founder, substant	ial contributor,	or 35%			
	controlled entity or family member of any of these p	ersons			5	
6	Loans and other receivables from other disqualified persons (as defined					
	under section 4958(f)(1)), and persons described in	section 4958	(c)(3)(B)	112-04	6	
7	Notes and loans receivable, net				7	
8			[		8	
9	Prepaid expenses and deferred charges				9	
10a	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	874,424	10 Contract 10 Contract		
b	Less: accumulated depreciation	10b	52,972	828,989	10c	821,452
11	Investments-publicly traded securities				11	
12	Investments-other securities. See Part IV, line 11		[		12	
13				6,634,658	13	5,646,177
14					14	
15	Other assets Other assets			39,217	15	39,199
16				9,750,515	16	10,985,668
17	Accounts payable and accrued expenses				17	
18	Grants payable				18	
19	Deferred revenue			722,547	19	982,559
20	Tax-exempt bond ilabilities				20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
22	1 - 1 - 1 - 1 1					
	trustee, key employee, creator or founder, substant	or 35%				
22	controlled entity or family member of any of these p			22		
23	Secured mortgages and notes payable to unrelated			23		
24	Unsecured notes and loans payable to unrelated th	ird parties			24	
25	Other liabilities (including federal income tax, payat	les to related	third			
	parties, and other liabilities not included on lines 17	-24). Complet	e Part X			
	of Schedule D	es	162,628	25	1,681,628	
26	Total liabilities. Add lines 17 through 25	X+121		885,175	26	2,664,187
2	Organizations that follow FASB ASC 958, check	here X				
	and complete lines 27, 28, 32, and 33.					
27 28	27 Net assets without donor restrictions			427,965	27	427,965
28				8,437,375	28	7,893,516
i	Organizations that do not follow FASB ASC 958	, check here				
	and complete lines 29 through 33.					
29					29	
30					30	
30 30 31					31	
32				8,865,340	32	8,321,481
33	Total liabilities and net assets/fund balances			9,750,515	33	10,985,668

ч Богл	n 990 (2021) NORTHEAST TEXAS COMMUNITY COLLEGE 75-2008835			Page	12
	art XI Reconciliation of Net Assets			, ugo	
	Check if Schedule O contains a response or note to any line in this Part XI				l
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,77	2,73	30
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,11	3,96	52
3	Revenue less expenses, Subtract-fine 2 from line 1	3	65	8,76	58
4	Net assets or fund balances at beginning of year (must equal Part X, fine 32, column (A))	14	8,86		
5	Net unrealized gains (losses) on investments	5	-1,20	2,62	27
6	Donated services and use of facilities	6			_
7	Investment expenses	7			_
8	Prior period adjustments	8	_		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		_	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1 1			
_	32, column (B))	10	8,32	1,48	31
Pa	art XII Financial Statements and Reporting			г	
	Check if Schedule O contains a response or note to any line in this Part XII				_
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 O.		- [	Yes I	<u>vo</u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?     If "Yes," check a box below to indicate whether the financial statements for the year were compiled or     reviewed on a separate basis, consolidated basis, or both:     Separate basis Consolidated basis Both consolidated and separate basis		2a		X
	<ul> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of</li> </ul>		<u>2b</u>	X	
	the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		20	x	
	Single Audit Act and OMB Circular A-133?		3a	x	
b	o If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X	