Form **990-PF**

Return of Private Foundation

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

F	or ca	lendar year 2021 or tax year beginning				and endi	ng				
Na	ame of	foundation					Δ	Employer identifi	cation number		
	ALE	XANDRA L ROWAN FOUNDATION						46-	4913065		
Νι	ımber	and street (or P.O. box number if mail is not delivered to	o street ad	ldress)		Room/suite	Э В	Telephone numbe	er (see instructions)		
	5B 1	W SHADY LN						(28)	1)541-1243		
Ci	ty or to	own, state or province, country, and ZIP or foreign posta	al code			•		·			
							C	If exemption applica pending, check here	tion is		
	HOU	STON, TX 77063-1303						pending, oneok nere			
		ck all that apply: Initial return		Initial return	of a former p	ublic char	ity	1. Foreign organizat	ions, check here		
		Final return		Amended ref	turn			2. Foreign organizations meeting the			
		Address change		Name change	е			85% test, check h computation			
Н	Che	ck type of organization: X Section 501(c)(3) ex	cempt private f	oundation			If private foundation	status was terminated ——		
L	s	ection 4947(a)(1) nonexempt charitable trust	Of	ther taxable pr	ivate foundat	tion		under section 507(b)			
I	Fair	market value of all assets at J Acco	unting r	method: 🗓 Ca	ash Acc	rual	F	If the foundation is	in a 60-month termination		
	end	of year (from Part II, col. (c), line	ther (sp	ecify)				under section 507(b)	(1)(B), check here		
		,	column (d), must be on ca	ash basis.)						
ŀ	art	Analysis of Revenue and Expenses (The	(a) F	Revenue and	(b) Net inve	etment	(c)	Adjusted net	(d) Disbursements for charitable		
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	ex	penses per	incom		(C)	income	purposes		
_		column (a) (see instructions).)	books					(cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)		105,936.							
	2	Check Fig. 1. Check If the foundation is not required to attach Sch. B									
	3	Interest on savings and temporary cash investments.									
	4	Dividends and interest from securities									
	5a	Gross rents									
	b	Net rental income or (loss)									
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all									
/en		assets on line 6a									
Ş	7	Capital gain net income (from Part IV, line 2)									
_	8	Net short-term capital gain									
	9 10 a	Income modifications									
		and allowances									
		Less: Cost of goods sold									
		Gross profit or (loss) (attach schedule)									
	11 12	Other income (attach schedule)		105,936.							
_	13	Compensation of officers, directors, trustees, etc.		NONE							
es		Other employee salaries and wages		1,01,2							
ns	15	Pension plans, employee benefits									
g	16 a	Legal fees (attach schedule)									
ŵ	b	Accounting fees (attach schedule)STMT 1		2,000.		NONE		NONE	2,000		
Ş	c	Other professional fees (attach schedule)		•					•		
rati	14 15 16a b c 17 18 19 20 21	Interest									
ist	18	Taxes (attach schedule) (see instructions)									
듣	19	Depreciation (attach schedule) and depletion.		216.							
뒿	20	Occupancy									
A D	21	Travel, conferences, and meetings									
an	22	Printing and publications									
g	23 24 25	Other expenses (attach schedule) STMT 2		1,912.					1,912		
ati	24	Total operating and administrative expenses.									
ě		Add lines 13 through 23		4,128.		NONE		NONE	3,912		
ŏ	25	Contributions, gifts, grants paid		100,000.					100,000.		
	26	Total expenses and disbursements. Add lines 24 and 25		104,128.		NONE		NONE	103,912.		
	27	Subtract line 26 from line 12:									
	а	Excess of revenue over expenses and disbursements		1,808.							
		Net investment income (if negative, enter -0-)									
	С	Adjusted net income (if negative, enter -0-)						-0-			

_			DRA L ROWAN FOUNDATION		40-4913003	raye £
Р	art li	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year (a) Book Value	(b) Book Value	of year (c) Fair Market Value
	1	Cash - non-interest-bear	, ,	8,110.		10,134.
	2	Savings and temporary	cash investments			
	3	Accounts receivable ▶				
		Less: allowance for dou	ubtful accounts ▶			
	4	Pledges receivable ▶_				
		Less: allowance for dou	ubtful accounts ▶			
	5					
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	ttach schedule) (see instructions)			
	7		receivable (attach schedule)			
			116.1			
ssets	8					
	9		deferred charges			
ğ	10a					
	b					
		Investments - corporate	e bonds (attach schedule)			
	11	Investments - land, building and equipment: basis	s, >			
		Less: accumulated deprecia				
	12	(attach schedule) Investments - mortgage	loans			
	13	l				
	14	Land buildings and	1 100			STMT 3
		Less: accumulated deprecia	1,427.	216.		
	15	Other assets (describe	>			
	16		completed by all filers - see the			
		instructions. Also, see p	page 1, item I)	8,326.	10,134.	10,134.
	17	Accounts payable and a	accrued expenses			
	18	Grants payable				
es	19					
Liabilities	20					
abi	21	Mortgages and other no	otes payable (attach schedule)			
Ĩ	22	Other liabilities (describ	e ▶)			
_	23	Total liabilities (add line	es 17 through 22)	NONE	NONE	1
nces			w FASB ASC 958, check here			
n		and complete lines 24,	, 25, 29, and 30.			
a	24	Net assets without done	or restrictions			
B	25		estrictions			
ĭ			follow FASB ASC 958, check here			
Ē		and complete lines 26 thr	_			
ō	26		cipal, or current funds			
ets	27		or land, bldg., and equipment fund	0 206	10 124	
SS	28	O ,	ulated income, endowment, or other funds	8,326.	10,134.	
Net Assets or Fund Balar	29		d balances (see instructions)	8,326.	10,134.	
Ž	30		net assets/fund balances (see	0 226	10,134.	
В	art II		inges in Net Assets or Fund Balan	8,326.	10,134.	
_			balances at beginning of year - Part II		nust agree with	
•			ed on prior year's return)		-	8,326.
2			, line 27a			1,808.
			1 11 11 2 11 1		_	1,000.
						10,134.
		creases not included in			5	10,101.
			palances at end of year (line 4 minus l	ine 5) - Part II. column (b		10,134.
_			,	, ,		Form 990-PF (2021)

Par	t IV Capital Gains	and Losses for Tax on Inv	restment Income						
	(a) List and de	(b) How acquired	(c) Date acquired	(d) Date sold					
	2-story b	orick warehouse; or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	(mo., dav. vr.)	(mo., day, yr.)			
1 a									
b									
С									
d									
<u>e</u>									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))				
a									
b									
<u>C</u>									
d									
е	0 11 16 1								
	· · · · · · · · · · · · · · · · · · ·	showing gain in column (h) and owned (j) Adjusted basis	(k) Excess of col. (i)		Gains (Col. (h) ga (k), but not less the	nan -0-) or			
	i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from col	. (h))			
а									
b									
c									
d									
е									
2	Capital gain net income	or (net canital loss)	gain, also enter in Part I, line 7						
	· -		loss), enter -0- in Part I, line 7	2					
3		gain or (loss) as defined in sections							
		. ,	structions. If (loss), enter -0- in						
Dor		end on Investment Income (9	Section 4940(a), 4940(b), or 49	48 500	inetructions)				
Par				_	Ilisti uctions)				
1a			heck here ► and enter "N/A" on lir	1 1	1	NONE			
			ch copy of letter if necessary - see instruction in 27b. Exempt foreign organization		1	NONE			
D		ne 12, col. (b)		115,					
2			d taxable foundations only; others, en	tor 0)	2				
3	,		•		3	NONE			
4			d taxable foundations only; others, en	ter -0-)	4	NONE			
5	, , ,	` ' ' '	zero or less, enter -0	′ –	5	NONE			
6	Credits/Payments:								
а	2021 estimated tax payme								
b	Exempt foreign organization	NONE							
С	Tax paid with application f	NONE							
d	Backup withholding errone								
7	Total credits and payment		7	NONE					
8	Enter any penalty for unde	[8						
9	Tax due. If the total of line	▶	9	NONE					
10	Overpayment. If line 7 is r	nore than the total of lines 5 and 8, ent	ter the amount overpaid	▶	10				
11	Enter the amount of line 1	to be: Credited to 2022 estimated to	ax ► Refu	nded >	11				

Par	t VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$(2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Χ	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Χ	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	TX,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Χ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
. •	names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Χ
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address ► WWW.ALEXROWANFOUNDATION.ORG			
14	The books are in care of ▶ DAVID ROWAN Telephone no. ▶ 281-543	L-124	43	
	Located at ▶ 5B SHADY LN HOUSTON, TX ZIP+4 ▶ 77063-1			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority	<i>'</i>	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			

Form **990-PF** (2021)

Form	990-PF(2021) ALEXANDRA L ROWAN FOUNDATION 46-4913065		F	⊃age 5
Par	t VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		Х
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		Х
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		Х
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or			
	use of a disqualified person)?	1a(5)		Х
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		Х
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2021?	1d		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for			
	tax year(s) beginning before 2021?	2a		X
	If "Yes," list the years ,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2021.)	3b		_
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b		X

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Pa	rt VI-B Statements	Regarding Activities f	or Which Form	4720 May Be Requ	uired (continued)			
5a	During the year, did the fo	undation pay or incur any amo	ount to:				Yes	No
	(1) Carry on propaganda,	or otherwise attempt to influe	ence legislation (section	on 4945(e))?		5a(1)		Х
	(2) Influence the outcor	ne of any specific public	election (see see	ction 4955); or to	carry on, directly or			
	indirectly, any voter re	gistration drive?				5a(2)		Χ
		ndividual for travel, study, or ot				5a(3)		Х
	(4) Provide a grant to a	an organization other than	a charitable, etc.,	organization describe	ed in section 4945(d)			
	(4)(A)? See instructions	· · · · · · · · · · · · · · · · · · ·				5a(4)		Χ
		oose other than religious, o						
	the prevention of crue	Ity to children or animals?				5a(5)		Χ
b		to 5a(1)-(5), did any of the						
	in Regulations section 53.4	1945 or in a current notice reg	arding disaster assis	tance? See instructions		5b		
С	Organizations relying on a	current notice regarding disas	ster assistance, check	here				
d	If the answer is "Yes"	to question 5a(4), does	the foundation cl	aim exemption from	the tax because it			
	maintained expenditure re-	sponsibility for the grant?				5d		
		ent required by Regulations se						
6a	Did the foundation, duri	ng the year, receive any f	unds, directly or i	ndirectly, to pay pre	emiums on a personal			
	benefit contract?					6a		Х
b		the year, pay premiums, dire				6b		Х
	If "Yes" to 6b, file Form 883							
7a	At any time during the tax	year, was the foundation a pa	arty to a prohibited ta	x shelter transaction?		7a		Χ
b		n receive any proceeds or hav				7b		
8	Is the foundation subject	t to the section 4960 tax	on payment(s) of	more than \$1,000,0	00 in remuneration or			
	excess parachute payment	(s) during the year?				8		Χ
Pa	rt VII Information A	bout Officers, Directors	s, Trustees, Fou	ndation Managers	, Highly Paid Empl	oyees,		
1	and Contracto	ors rs, trustees, and foundati	on managers and	their compensation	. See instructions.			
			(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e accou	ınt.
	(a) Name and	address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	` óther all		
SEE	STATEMENT 4							
				NONE	NONE			NON
	0	Lite beautiful and the second	/ the disc the		4			
2	"NONE."	highest-paid employees	(other than thos	se included on lin	e 1 - see instruction	ons). It no	one,	ente
	-		(b) Title, and average		(d) Contributions to employee benefit	(a) Eypons		ınt
(a) Name and address of each em	ployee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plan's and deferred	(e) Expens other all	owance	ini, S
	TD				compensation			
NON	<u> [</u>							
	I number of other ameden						NT.C	NID
าบเส	I number of other employ	ces paid over \$30,000 .					INO	NE

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	=."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
otal number of others receiving over \$50,000 for professional services	NONE
Part VIII-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 ALEXANDRA L. ROWAN WRITING COMPETITION - THREE CATEGORIES	
ARE AVAILABLE WITH ONE WINNER EACH TO ACKNOWLEDGE	
UNDERGRADUATE ENGLISH STUDENTS	NON
2 FUNDING FOR INTERNSHIPS FOR UNIVERSITY OF HOUSTON CREATIVE	
WRITING UNDERGRADUATE STUDENTS - FUNDED THROUGH UNIVERSITY	
OF HOUSTON	NON
3 SUPPORT FOR THE BOLDFACE CONFERENCE FOR EMERGING WRITERS,	
WHICH ENTAILS SCHOLARSHIPS AND INVITING WRITERS/EDITORS FOR	
WORKSHOPS AND PANELS- FUNDED THROUGH UNIVERSITY OF HOUSTON	NONI
4	
Part VIII-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total. Add lines 1 through 3	

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1a 1b 14,000. 1c NONE 1d 14,000. Reduction claimed for blockage or other factors reported on lines 1a and 2 NONE 2 3 14,000. Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see 4 210. 5 13,790. 5 690. Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ▶ and do not complete this part.) 690. Tax on investment income for 2021 from Part V, line 5. 2a Income tax for 2021. (This does not include the tax from Part V.) . . 2b 2c NONE 3 690. 3 4 4 5 690. 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, 7 690. Part XI Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 103,912. 1b NONE Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 NONE Amounts set aside for specific charitable projects that satisfy the: 3 NONE 3a 3b NONE 103,912. 4

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Undistributed Income (see instructions) Part XII (d) (a) (b) (c) Corpus Years prior to 2020 2020 2021 1 Distributable amount for 2021 from Part X, line 7 690. Undistributed income, if any, as of the end of 2021: a Enter amount for 2020 only. NONE **b** Total for prior years: 20 19 ,20 18 .20 17 NONE 3 Excess distributions carryover, if any, to 2021: 108,794. **a** From 2016 129,677. **b** From 2017 98,494. **c** From 2018 105,679 **d** From 2019 e From 2020 104,933. f Total of lines 3a through e 547,577 4 Qualifying distributions for 2021 from Part XI, 103,912. line 4: ▶ \$ NONE a Applied to 2020, but not more than line 2a . . . **b** Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) 690. d Applied to 2021 distributable amount.... 103,222 e Remaining amount distributed out of corpus. . . Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: 650,799 a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract NONE line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions NONE Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see NONE instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be NONE distributed in 2022........ 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2016 not applied on line 5 or line 7 (see instructions) . . . 108,794. Excess distributions carryover to 2022. 542,005 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 129,677. a Excess from 2017 . . . 98,494. **b** Excess from 2018 . . . 105,679. c Excess from 2019 . . . 104,933. d Excess from 2020 . . . e Excess from 2021 . . . 103,222.

		NDRA L ROWAN FO			6-4913065	5		Page 10
Pa	rt XIII Private Ope	erating Foundations	(see instructions a	nd Part VI-A, questi	on 9)	1	NOT P	APPLICABLE
1 a	If the foundation has r	•			٠ ا			
	foundation, and the ruling		-			1	,	1
	Check box to indicate w		s a private operating		n section _	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	T			(e) Total
	justed net income from Part I or the minimum investment	(a) 2021	(b) 2020	(c) 2019	(d) 2	018		
	return from Part IX for each							
h	year listed							
	Qualifying distributions from Part							
d	XI, line 4, for each year listed . Amounts included in line 2c not used directly for active conduct							
	of exempt activities							
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line							
3	2d from line 2c Complete 3a, b, or c for the alternative test relied upon:							
а	"Assets" alternative test - enter:							
	(1) Value of all assets(2) Value of assets qualifying under section							
	4942(j)(3)(B)(i)							
b	"Endowment" alternative test- enter 2/3 of minimum invest-							
	ment return shown in Part IX,							
	line 6, for each year listed							
С	"Support" alternative test - enter:							
	(1) Total support other than gross investment income							
	(interest, dividends, rents,							
	payments on securities loans (section 512(a)(5)),							
	or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as							
	provided in section 4942 (j)(3)(B)(iii)							
	(3) Largest amount of sup- port from an exempt							
	organization (4) Gross investment income							
Pa	rt XIV Supplemen	tary Information (C		only if the found	ation had	\$5,000 or i	more	in assets at
		uring the year - see	<u> </u>					
	Information Regarding							
а	List any managers of the before the close of any						ı by tr	ne toundation
	DAVID ROWA							
b	List any managers of					an equally I	arge p	portion of the
	ownership of a partner	snip or other entity) of	which the foundation	nas a 10% or greate	r interest.			
	N/A							
2	Information Regarding			• • •				
	Check here ► X if the unsolicited requests for	ne foundation only nor funds. If the founda	nakes contributions ition makes gifts, gra	to preselected charants, etc., to individua	ritable orga als or organ	nizations and	d doe er oth	s not accep er conditions.
	complete items 2a, b, c	c, and d. See instruction	ns.		_			
а	The name, address, ar	nd telephone number o	or email address of t	ne person to whom ap	plications sh	ould be addre	ssed:	
b	The form in which appl	ications should be sub	mitted and informati	on and materials they	should inclu	ıde:		

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

JSA 1E1490 1.000

c Any submission deadlines:

Part XIV Supplementary Information (continued) **Grants and Contributions Paid During the Year or Approved for Future Payment** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of Recipient Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year 100,000. SEE STATEMENT 5 100,000. **b** Approved for future payment

▶ 3b

<u>Total</u>

Р	art XV-/	Analysis of Income-Produ	icing Activ	vities			
		amounts unless otherwise indicated.	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1	Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	a						
	b						
	d						
	е						
	f						
	g Fees	and contracts from government agencies					
2	Members	ship dues and assessments					
3	Interest o	n savings and temporary cash investments -					
4	Dividend	Is and interest from securities					
5		al income or (loss) from real estate:					
		-financed property					
		lebt-financed property					
6	Net renta	I income or (loss) from personal property					
		vestment income					
	-	oss) from sales of assets other than inventory					
		me or (loss) from special events					
		rofit or (loss) from sales of inventory					
11		venue: a					
		_					
40	e	. Add columns (b), (d), and (e)					
		dd line 12, columns (b), (d), and (e)					
		neet in line 13 instructions to verify calc					
_	art XV-E			complishment of Ex	empt Purp	oses	
L	ine No. ▼	Explain below how each activity for of the foundation's exempt purpose					tly to the accomplishmer
_				NOT APPLICABLE	1		
_				NOI AFFLICABLE	1		
_							
_							
_							
_							

	, 111111111	7101 11011	1111 1 0 0 110	111 1 011			10 131300	-		9
Part XVI	Information F	Regarding	Transfers	to and	Transactions	and	Relationships	With	Noncharitable	Exempt
	Organizations									

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?												No
а	_	fers from the reporting	a foundation to	a noncharitable e	evemnt organ	nization o	ıf·					
u		ish	_							1a(1)		Х
	` '	her assets								1a(2)		X
b	` '	transactions:								(-)		
		ales of assets to a nor	ncharitable exe	mpt organization.						1b(1)		Χ
		rchases of assets fro										X
		ental of facilities, equi										Х
	(4) Re	eimbursement arrange	ements							1b(4)		Χ
	(5) Lo	ans or loan guarantee	s							1b(5)		Χ
	(6) Pe	erformance of service	s or membersh	nip or fundraising s	solicitations .					1b(6)		X
С	Sharir	ng of facilities, equipm	ent, mailing list	ts, other assets, o	r paid employ	ees				1c		X
d		answer to any of the										
		of the goods, other a										
		in any transaction or										
(a) L	ine no.	(b) Amount involved	(c) Name of r	noncharitable exempt o	organization	(d) De	escription of transf	ers, transac	tions, and shar	ring arra	ingeme	nts
	descri	foundation directly of ibed in section 501(c) s," complete the follow	(other than se				•	•		Y	es X	No
		(a) Name of organization		(b) Type o	of organization			c) Descript	ion of relations	hip		
	1											
		er penalties of perjury, I decla ect, and complete. Declaration of						o the best o	my knowledg	je and c	ellet, it	is true,
Sigı	n			1	ì	HOLIN	IDED		May the IRS			
ler	—` בּי	DAVID ROWAN gnature of officer or trustee		 Date	/	FOUN Title	IDER		with the pre		Yes	
	Joly	griature or officer or trustee		Date	1	Huc			See instruction	s. <u>X</u>] res [No
		Print/Type preparer's nar	me	Presarer's sonati	ure	1	Date	Che	ack if F	PTIN		
Paid	t	GENNY D JIH			NV	The same of the sa	≥ 06/15/2		, " "	20182	2805	1
^o re	parer		O IISA T.T D	- //	0	No. of Concession, Name of Street, or other Designation, Name of Street, or other Designation, Name of Street,	<u> </u>	Firm's EIN				
Firm's name ► BDO USA, LLP Firm's eln ► 13-538 Jse Only Firm's address ► 2929 ALLEN PARKWAY 20TH FLOOR								, J U I C	,,,,			
•	,		USTON, TX)19-71	0.0	Phone no.	713-96	50-17	706	
		, 110			. , ,		-			991		(2024)

Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Employer identification number Name of the organization ALEXANDRA L ROWAN FOUNDATION 46-4913065 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule 🗓 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) 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 contributor, during 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; or (ii) Form 990-EZ, 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. 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it

must answer "No" on Part IV, line 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

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

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page **2**

Name of organization
ALEXANDRA L ROWAN FOUNDATION

Employer identification number 46-4913065

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.									
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
1	DAVID ROWAN 5B W SHADY LN HOUSTON, TX 77063	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution							
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)							

CHARITABLE PURPOSES		2,000.	
ADJUSTED NET INCOME			
NET INVESTMENT INCOME			
REVENUE AND EXPENSES PER BOOKS		2,000.	
			TOTALS
DESCRIPTION		ACCOUNTING FEES	

								i		ii
REVENUE	AND	PENSES	PER BOOKS	184.	1,494.	175.	.00		1,912.	
		XI	I I						TOTALS	
			DESCRIPTION	MISCELLANEOUS EXPENSES	ADVERTISING EXPENSE	CREDIT CARD FEE	WEBSITE MAINTENANCE FEE			

CHARITABLE PURPOSES 	184. 1,494. 175.	1,912.	
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46-4913065

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

FIXED ASSET DETAIL

ACCUMULATED DEPRECIATION DETAIL

ENDING	BALANCE	1,427.	1,427.	
	DISPOSALS			
	ADDITIONS	216.		
BEGINNING	BALANCE	1,211.	1,211.	
ENDING	BALANCE	1,427.	1,427.	
	DISPOSALS			
	ADDITIONS			
BEGINNING	BALANCE	1,427.	1,427.	
METHOD/	CLASS	SL		
	ASSET DESCRIPTION	LAPTOP	TOTALS	

STATEMENT 3 0798IY M20A

FORM	990PF,	PART	VII -	LIST	OF	OFFICERS,	DIRECTORS,	AND	TRUSTEES

OFFICER NAME:

DAVID ROWAN

ADDRESS:

5B SHADY LN

HOUSTON, TX 77063

TITLE:

FOUNDER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

TOTAL COMPENSATION: NONE

==========

TOTAL CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS: NONE

==========

EXPENSE ACCOUNT AND OTHER ALLOWANCES: NONE

==========

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID ______

RECIPIENT NAME:

UNIVERSITY OF HOUSTON

ADDRESS:

4800 CALHOUN RD

HOUSTON, TX 77004

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

SUPPORT CREATIVE WRITING PROGRAM

AMOUNT OF GRANT PAID..... 50,000.

RECIPIENT NAME:

THE NATIONAL BLOOD CLOT ALLIANCE

ADDRESS:

PO BOX 825687

PHILADELPHIA, PA 19182-5687

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL PURPOSE

AMOUNT OF GRANT PAID..... 50,000.

TOTAL GRANTS PAID:

100,000. _____