### **PUBLIC INSPECTION COPY**

Form **990** 

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Α	For the	2020 calen	dar year, or tax year beg	inning 7/01	L , 20	020, and	d ending	6/	30	,	<b>20</b> 2021	
В	Check if a	pplicable:	С						D Employ	er identi	fication number	
	Addre	ess change	Houston Parks B	oard					74-	1860	046	
	Name	e change	300 N. Post Oak						E Telepho			
	Initia	I return	Houston, TX 770	24					713	-942	-8500	
	$\mathbf{H}$	return/terminated							713	712	0300	
		nded return							<b>G</b> Gross r	acainte (	\$ 21,297	517
		ication pending	F Name and address of princi	nal officer:			H	a) Is this	a group retur			7.7
	ДАРРІІ	ication penuing		Ellz	abeth white		,	•				
_	Tay ay	ampt atatus	Same As C Above		ort no )   4047(o)(1	1) or	527	If "No,	subordinates attach a list	. See ins	tructions L	
<u>J</u>		empt status:	X 501(c)(3) 501(c) (	· · · · · · · · · · · · · · · · · · ·	ert no.) 4947(a)(1	1) 01						
			w.houstonparksb		<b>k</b>	1		•	exemption n			,
K		f organization:	X Corporation Trust	Association	Other ►	L Year	of formation	197	6 IVI S	State of le	egal domicile: T	
Pa	rt I	Summar				IDD						
			ibe the organization's mis									
မွ	2		es for parks for									
Щ			ction, and mainte						vacing	exis	sting par	KS,
le.	<b>2</b> C	heck this bo	ng for more sust		d its operations or o				E0/ of itc	not ac		
Governance	3 N		oting members of the gov							1 <b>3</b>	5615.	34
	_		dependent voting membe							4		34
<u>:e</u>			r of individuals employed							5		35
Activities &	6 T	otal number	r of volunteers (estimate	if necessary)	·					6		250
Ac			ed business revenue from	·	• • •					7a		0.
	<b>b</b> N	et unrelated	d business taxable incom-	e from Form 99	0-T, Part I, line 11.					7b		0.
								P	rior Year		Current Y	ear
ø)			s and grants (Part VIII, lin	•			L		3,947,6		5,996	,186.
Revenue		-	vice revenue (Part VIII, lir					8	3,432,1	19.	11,961	,243.
eve			ncome (Part VIII, column						968,0			,910.
Œ			ie (Part VIII, column (A),				L		-60,1			,103.
			e – add lines 8 through 1						3,287,6		18,624	
			imilar amounts paid (Par		•			14	1,104,9	900.	12,261	<u>,914.</u>
		•	to or for members (Part		•		L L					
S	<b>15</b> S	alaries, othe	er compensation, employ	ee benefits (Pa	rt IX, column (A), li	nes 5-1	10)	3	3,865,0	)73.	3,647	,774.
JSe	<b>16a</b> P	rofessional	fundraising fees (Part IX	, column (A), lir	ne 11e)				163,1	50.	178	,600.
Expenses	b To	otal fundrais	sing expenses (Part IX, c	column (D), line	25) ►	418.	606.					
ш	<b>17</b> 0	ther expens	ses (Part IX, column (A),	lines 11a-11d.	11f-24e)			(	9,491,4	I N 4	9,136	236
			es. Add lines 13-17 (mus		•		L L		7,624,5		25,224	
			s expenses. Subtract line				L		1,336,8		-6,600	
- S			y experieses subtract mile						ng of Currer		End of Y	
ance	<b>20</b> T	otal assets	(Part X, line 16)						1,626,4		68,683	
Net Assets Fund Balanc	21 T		es (Part X, line 26)						5,020,8		2,602	
Tet.	<b>22</b> N	ot accots or	r fund balances. Subtract	lino 21 from lir	20		•		-		•	•
	rt II	Signatur		IIIIe ZI IIOIII III	16 20			00	3,624,6	007.	66,081	,449.
com	er penaities plete. Decl	s of perjury, I de aration of prepa	eclare that I have examined this rearer (other than officer) is based of	eturn, including according according all information of v	mpanying schedules and s which preparer has any kn	statement lowledge.	ts, and to the	best of n	ny knowleage	and bell	et, it is true, correc	t, and
		► Flo	ctromically Fil	0 d								
c:	· ·	Signatu	ctronically Fulure of officer	<u>eu</u>				Da	ate			
Siç He	jii re	E14	zahoth Whito					Drog	ident a	כבי	1	
110			zabeth White					ries.	ruent (	X CEC	)	
		,,	preparer's name	Preparer's signa	ture	Da	ate		Chaal	:4	PTIN	
_			•					100	Check	<b>⊐</b> "		:
Pa			ra Murphy		a Murphy	U	2/21	/22	self-employ	ea	P01386215	,
Pre	eparer	Firm's name	<u> </u>		000				1		0060050	
US	e Only	Firm's addre	<u> </u>		200				Firm's EIN		-0269860	
			·	77027					Phone no.	(713		
May	y the IRS	S discuss th	nis return with the prepare	er shown above	? See instructions .						X Yes	No

Pan	III	Statement of Program Service Accomplishments	37
	D.:: - 41.	Check if Schedule O contains a response or note to any line in this Part III	X
1	-	y describe the organization's mission:	
		purpose of the Houston Parks Board, in partnership with the City of Houston and	
		er_local_governments, is to create, improve, protect and advocate for equitably	
	<u>dis</u>	tributed parkland in the greater Houston area.	
2	Did the	e organization undertake any significant program services during the year which were not listed on the prior	
_			No
		s," describe these new services on Schedule O.	10
			No
		s," describe these changes on Schedule O.	
		ibe the organization's program service accomplishments for each of its three largest program services, as measured by expense	25.
	Section	on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expense	s,
	and re	evenue, if any, for each program service reported.	
	<i>(</i> 0	\(\frac{\pi}{2}\)	
4 a	(Code		)
		2013, the Houston Parks Board, in partnership with Houston Parks Board LGC, Inc.	
		e LGC), the City of Houston, Harris County Flood Control District and other	
		ities started a multi-year project identified as the Bayou Greenways 2020	
		G2020") program which is focused on the expansion of the City's park system alon	
		ston's nine major bayous. Its purpose is to acquire land along the bayous within	
		Houston City limits, design and construct linear parks and multi-use trails alo	119
		<u>bayous. At its estimated 2022 completion, this project will provide over 3,000</u> es of greenspace, 150 miles of new trails, improved flood prevention and equitab	10
		ess to parks thus improving the quality of life for all Houstonians.	<u> </u>
	acce	ess to parks thus improving the quarity of life for all houstonians.	
4h	(Code	e: ) (Expenses \$ 9,261,943. including grants of \$ 1,140,860.) (Revenue \$ 11,280,000)	) )
	•	2014, The Houston Parks Board entered into a long-term agreement with the City o	
		ston to provide on-going maintenance for the Bayou Greenways system, an integrat	
		tem of connected linear parks along nine major bayous within the Houston city	
		its. Unspent funds from the annual maintenance fee are used for trail and bridge	
		ital replacement projects along the bayous. The Houston Parks Board incorporates	
		servation in the maintenance of the bayous with the goal of preserving, creating	
	and	enhancing the region's habitats through initiatives including tree plantings,	
	pra:	irie rebuilds and wetland creations.	
4 c	(Code	<u> </u>	
		Houston Parks Board, in partnership with the Houston Parks Board LGC, works wit	
		City of Houston and other local entities to plan, advocate, acquire and improve	
		k land and space, thus providing an equitable distribution of park land and	
		reation facilities for Houston's growing communities. Major initiatives include	
	веус	ond the Bayous, neighborhood park projects, and 50/50 Park Partners.	
4 d	Other	program services (Describe on Schedule O.)  See Schedule O	
	(Ехре		
4 e		program service expenses ► 24.220.779	

# Form 990 (2020) Houston Parks Board 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4	Х	
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 Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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	Х	
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, 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	11 a	Х	
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.	11 b		Х
c	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	11 c		Х
C	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.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Χ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11 f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
k	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 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
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 foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15		Х
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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		X
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	Х	
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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
	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 government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Χ	

# Form 990 (2020) Houston Parks Board 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? <i>If 'Yes,' complete Schedule J</i> .	23	Х	
24	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		Х
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	c 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		
25	a 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		Х
	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		Х
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? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
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		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
i	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		X
•	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
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? <i>If 'Yes,' complete Schedule M</i>	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? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
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	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	b 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		Х
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	140
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Χ	
R۸٨		Earm	aan (	2020

Form 990 (2020) Houston Parks Board

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 a	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 35			
k	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
	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)?	4 a		Х
t	olf '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).			
5 -	New Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	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?	6 a		Х
	of Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	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 a	Χ	
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Χ	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	, ,		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
ç	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	- 11		
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	n Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	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?	12 a		
	p If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
a	Is the organization licensed to issue qualified health plans in more than one state?	13 a		
ı	·			
	Denter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	of If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		21
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
13	excess parachute payment(s) during the year?	15		X
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.			

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. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 34 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. **b** Enter the number of voting members included on line 1a, above, who are independent..... 34 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 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 Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 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? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... X 15 a **b** Other officers or key employees of the organization...See .Schedule..Q..... 15 b X If 'Yes' to line 15a or 15b, describe the process in 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?..... 16 a X **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 16b organization's exempt status with respect to such arrangements?.. Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None 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 Upon request Own website 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 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Denise Garcia 300 N. Post Oak Lane Houston TX 77024 713-942-8500

## 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

- 1 a 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 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 and/or Box 7 of Form 1099-MISC) 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 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.

			(C)							
(A) Name and title	(B) Average hours	thar	n one Ì s both	box, an o	unles fficer truste	,	on	(D)  Reportable compensation from	(E) Reportable compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Elizabeth White	_ 35 _			3.7				000 104	0	20 201
President & CEO (2) Charles Place (thru Jun 2020)	5 35			Χ				282,194.	0.	39,381.
Capital Pgm Mg Dir	5				Х			197,472.	0.	3,684.
(3) Matthew Rondot	40							,		,
Conserv/Maint Dir	0				Χ			154,950.	0.	16,799.
(4) Jeri Nordbrock (thru Nov 2020)	_ 35 _									
CFO	5			Χ				140,431.	0.	23,377.
(5) Richard McNamara (fr Sep 2020) Intrim Cap Pgm Mg	_ <u>35</u> _ 5					Х		127,675.	0.	29,642.
(6) Denise Garcia	35					Λ		127,073.	0.	27,042.
Acctg & Fin Dir	5			Χ				120,009.	0.	15,296.
(7) Daniel Zirilli	35							·		,
Construction Mgr	5					Χ		112,951.	0.	11,818.
(8) Adrin P. Biagas	35									
Land Acq Dir	5					Х		116,899.	0.	1,169.
_(9) Lisa Graiff	_ 35 _									
BTB Program	5					Χ		103,600.	0.	11,049.
(10) Amanda Nunley	_ 35 _									
GIS Supervisor	5					Χ		103,900.	0.	10,413.
(11) Matt Nielson (from Oct 2020)	<u> 35</u> _							00.001		0 700
C00	5			Χ				28,601.	0.	3,709.
(12) Barron F. Wallace	3									_
Chair	1	Χ		Χ				0.	0.	0.
(13) Jill Jewett	3	٠,,		.,				0	0	0
Vice Chair	1	Χ		Χ				0.	0.	0.
(14) Tom Bacon	<u>3_</u>	Х		Х				0.	0.	^
Chair Emeritus	Т Т	Λ		Λ				υ.	0.	0.

Pai	Part VII   Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
		(B)			(0	•							
	<b>(A)</b> Name and title	Average hours per	box	, unle	ss pe	erson	than is both or/trus	n an	<b>(D)</b> Reportable	<b>(E)</b> Reportable	Fetin	(F)	ount
		week (list any		<del></del>					compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	comp	of other ensation	from
		hours for	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	orme	(W-2/1099-WII3C)	(W-2/1099-WIGC)	aı	organizat	d
		related organiza - tions	ctor t	ional	ľ	nplo	t con	il.			Org	ganization	.15
		below	ruste	snp		/ee	npen						
		line)	ŏ	tee			sate						
							<u> </u>						
(15)	Thomas W. Flaherty	3			v					0			0
(16)	Treasurer Precious W. Owodunni	3	Х		X				0.	0.			0.
(10)	Secretary	3   	Х		Χ				0.	0.			0.
(17)	Roxanne Almaraz	1	Λ		Λ				0.	0.			
<u> </u>	Director	0.1	Х						0.	0.			0.
(18)	Dina Alsowayel	1											
	Director	0.1	Х						0.	0.			0.
(19)	Don Stephen Aron	1											
	Director	0.1	X						0.	0.			0.
(20)	Marie A. Baldwin	1											
	Director	0.1	X						0.	0.			0.
(21)	Margaret Warren Brown	1	١										
(22)	Director	0.1	Х						0.	0.			0.
(22)	Deborah Cannon Director	$-\frac{1}{0.1}$	Х						0.	0.			Λ
(23)	Beto P. Cardenas	1	Λ						0.	0.			0.
()_	Director	0.1	Х						0.	0.			0.
(24)	Joseph C. Dilg	1							<u> </u>	<u> </u>			
	Director	0.1	Х						0.	0.			0.
(25)	Caton Fenz	1											
	Director	0.1	Х						0.	0.			0.
	Subtotal							<b>•</b>	1,488,682.	0.		166,3	
	Total from continuation sheets to Part VII, Section								0.	0.			0.
	Total (add lines 1b and 1c)							404	1,488,682.	0.		166,3	337.
2	from the organization 11	to those i	isteu	abov	ve) v	WIIO	recen	veu	more man \$100,00	or reportable com	pensaud	лт	
	TOTALIC OF GATHEAUTON 11											Yes	No
3	Did the organization list any <b>former</b> officer, direc	tor tructo	o ka	ov or	mnla	21/00	or	hiak	act componented	Lamplayoo		103	
3	on line 1a? If 'Yes,' complete Schedule J for suc	h individu	ial						·····	· · · · · · · · · · · · · · · · · · ·	. 3		Χ
4	For any individual listed on line 1a, is the sum of	reportab	le co	mpe	ensa	tion	and	oth	er compensation	from			
	the organization and related organizations greate such individual	er than \$1	50,0	00?	If 'Y	′es,'	' com	iple	te Schedule J for		4	Х	
_										inalizialza	. =		
5	Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e comper s,' comple	isatic ite So	on tro ched	om i Iule	any <i>J fo</i> .	unre <i>r suc</i>	iate :h p	ed organization or verson	ındıviduai	. 5		Х
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest compen compensation from the organization. Report compen	sated indessation for	epen the c	dent alen	cor dar y	ntrad year	ctors endii	tha ng v	it received more the transition of the state of the transition of the state of the transition of the t	han \$100,000 of ganization's tax yea	r.		
	(A) Name and business addi	ress							(B) Description (	) of services	Comp	( <b>C)</b> ensatio	n n
COH			aton	т.	v 7	700	<i>c</i>		'			476,5	
	Parks & Recreation Dept 2999 S Wayside mpions Hydro-Lawn LLC 13226 Kaltenbrun								Parkland main Parkland main			208,2	
	es Construction, Inc 2900 Weslayan St,							2.7	Construction			093,4	
	Lowstone Landscape PO Box 205742 Dallas				,			· ·	Design servic			917,(	
	ck Condon Associates 10401 Stella Link			TX	77	025			Design servic			751,8	
	Total number of independent contractors (including b							ve)					

\$100,000 of compensation from the organization ► 26

#### Form 990

### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2020

Department of the Treasury Internal Revenue Service

Name of the Organization

Houston Parks Board

74-1860046

Houston Parks Board
Part VII Continuation: Officers, Directors, Trustees, Key Employees, and

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	` '					ly)	* *		Estimated	
	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
David D. Fitch Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
<u>Cullen Geiselman</u> Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Chris George Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Jim Green Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Mindy Hildebrand	1_									
Director Sis Johnson	0.1	Х						0.	0.	0.
Director David Kinder	0.1	Х						0.	0.	0.
Director Ann Lents	0.1	Х						0.	0.	0.
Director	0.1	Х						0.	0.	0.
Jacqueline S. Martin Director	0.1	Х						0.	0.	0.
Ruthie Miller Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Jamie Patterson Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Christopher D. Porter Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Andrew P. Price Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Leslie Elkins Sasser	1									
Director Michael Skelly	0.1	Х						0.	0.	0.
Director Laura Spanjian	0.1	Х						0.	0.	0.
Director Herman L. Stude	0.1	Х						0.	0.	0.
Director Phoebe Tudor	0.1	Х						0.	0.	0.
Director	0.1	Х						0.	0.	0.
Don Woo Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
Nina O'Leary Zikha Director	$-\frac{1}{0.1}$	Х						0.	0.	0.
DITECTOI	<u> </u>						_			

Form **990** Cont 2020

		Check if Schedule O contains a response or note to an	ny line in this Part V	/III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1 a	Federated campaigns 1a				
art ar	-	Membership dues	-			
ਲੂੰ ਠੁ						
S, An		Fundraising events				
a ∰	d	Related organizations				
S, E	е	Government grants (contributions) 1 e 498,809.				
ıtion er Si	f	All other contributions, gifts, grants, and similar amounts not included above 1f 5,010,411.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f				
ᅙᆴ	h	Total. Add lines 1a-1f	5,996,186.			
		Business Code	0/330/1001			
<u> </u>	2 a	Bayou_Greenway_maint 713990	11,280,000.	11,280,000.		
è	b					
ë.			681,243.	681,243.		
₹.	C					
Se	d					
돑	е					
Program Service Revenue	f	All other program service revenue				
Ĕ	g	Total. Add lines 2a-2f	11,961,243.			
	3	Investment income (including dividends, interest, and				
		other similar amounts)	652,222.			652,222.
	4	Income from investment of tax-exempt bond proceeds				•
	5	Royalties	2,148.			2,148.
		(i) Real (ii) Personal	2/110.			2/110.
	6a	Gross rents 6a	_			
		Less: rental expenses 6b	-			
			-			
		Rental income or (loss) 6c				
	a	Net rental income or (loss)	1			
	7 a	Gross amount from (i) Securities (ii) Other				
		sales of assets other than inventory 7a 2,677,618.				
	b	Less: cost or other basis	=			
		and sales expenses <b>7b</b> 2,598,930.				
	С	Gain or (loss)				
	d	Net gain or (loss)	78,688.			78,688.
nue	8 a	Gross income from fundraising events (not including \$ 486,966.				
Other Reven		of contributions reported on line 1c).				
æ		See Part IV, line 18				
ē	b	Less: direct expenses <b>8b</b> 74,351.				
둦		Net income or (loss) from fundraising events	-66,251.			-66,251.
ب			00,231.			00,231.
	9 a	Gross income from gaming activities. See Part IV, line 19				
	h	Less: direct expenses 9b				
		Net income or (loss) from gaming activities				
	C	Thet income of (loss) from gaming activities				
	10 a	Gross sales of inventory, less				
	_	returns and allowances	-			
		Less: cost of goods sold				
	С	Net income or (loss) from sales of inventory				
S.		Business Code				
ᇫ	11 a					
בַּ בֻ	b					
豐繁	С					
Miscellaneous Revenue	11a b c d	All other revenue				
Ξ		Total. Add lines 11a-11d	+			
			10 624 226	11 061 242	^	666 007
		TOWN TO VOTINGE OCCURS HOURS	18,624,236.	11,961,243.	0.	666,807.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do i	Check if Schedule O contains a r	(A) Total expenses	(B)	(C) Management and	( <b>D</b> ) Fundraising
6b,	7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	12,259,414.	12,259,414.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2,500.	2,500.		
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	771,221.	606,635.	124,335.	40,251.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	2,329,029.	1,973,328.	214,005.	141,696.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	65,961.	56,482.	5,424.	4,055.
9	Other employee benefits	274,069.	231,674.	25,514.	16,881.
10	Payroll taxes	207,494.	172,986.	22,272.	12,236.
11	Fees for services (nonemployees):	20., 131	1,2,3001		11,1001
á	Management				
ŀ	Legal	11,268.	10,870.	257.	141.
(	Accounting	106,254.	.,	106,254.	
C	<b>I</b> Lobbying	25,000.	25,000.	Í	
•	Professional fundraising services. See Part IV, line 17	178,600.			178,600.
f	Investment management fees	53,233.		53,233.	
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	1,002,435.	983,358.	15,462.	3,615.
12	Advertising and promotion	217,210.	208,577.	5,572.	3,061.
13	Office expenses	21,763.	17,260.	2,904.	1,599.
14	Information technology	124,565.	119,543.	3,241.	1,781.
15	Royalties				
16	Occupancy	120,566.	118,293.	1,467.	806.
17	Travel	19,733.	19,606.	82.	45.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	22,863.	22,663.	129.	71.
20	Interest	,	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	65,419.	65,419.		
	Insurance	89,567.	87,619.	932.	1,016.
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 O.)				
ā	Park & bayou maintenance	6,352,247.	6,352,247.		
ŀ	Program supplies and equip	523,350.	517,697.	3,649.	2,004.
	Construction and design	306,507.	306,507.		
	Graphics and Printing	71,287.	60,132.	407.	10,748.
	All other expenses	2,969.	2,969.		
25	Total functional expenses. Add lines 1 through 24e	25,224,524.	24,220,779.	585,139.	418,606.
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).				

_		Check if Schedule O contains a response or note to	o any lii	ne in this Part X	<u></u>	<u></u>	
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing			23,275,773.	1	29,448,592.
	2	Savings and temporary cash investments		<u> </u>	22,587,053.	2	8,609,490.
	3	Pledges and grants receivable, net			4,644,387.	3	4,143,897.
	4	Accounts receivable, net			909,644.	4	762,374.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	ner office I contrib	er, director, outor, or 35%		5	
	6	Loans and other receivables from other disqualified p		H-		J	
	ь	section 4958(f)(1)), and persons described in section	4958(c)	(3)(B)		6	
	7	Notes and loans receivable, net				7	
ets	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			56,348.	9	135,441.
A	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	10,022,965.			
	b	Less: accumulated depreciation	10 b	298,197.	8,802,678.	10 c	9,724,768.
	11	Investments – publicly traded securities			13,849,983.	11	15,349,602.
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			500,603.	15	509,574.
	16	Total assets. Add lines 1 through 15 (must equal line	33)		74,626,469.	16	68,683,738.
	17	Accounts payable and accrued expenses	721,217.	17	584,218.		
	18	Grants payable			•	18	
	19	Deferred revenue		3,339,495.	19	323,127.	
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete Part		<u> </u>	96,357.	21	96,357.
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	ficer, di utor, or	rector, trustee, 35%		22	
コ	23	Secured mortgages and notes payable to unrelated the		<u> </u>		23	
	24	Unsecured notes and loans payable to unrelated third		<u></u>		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com			1,844,733.	25	1,598,587.
	26	<b>Total liabilities.</b> Add lines 17 through 25			6,001,802.	26	2,602,289.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		X	-,		
au	27	Net assets without donor restrictions		F	12,579,827.	27	27,856,444.
Bal	28	Net assets with donor restrictions		<u>-</u>	56,044,840.	28	38,225,005.
Þ	20	Organizations that do not follow FASB ASC 958, che			30,044,040.	20	30,223,003.
Net Assets or Fund Balance		and complete lines 29 through 33.					
Ö	29	Capital stock or trust principal, or current funds		<u></u>		29	
set	30	Paid-in or capital surplus, or land, building, or equipn			30		
As	31	Retained earnings, endowment, accumulated income			31		
et	32	Total net assets or fund balances		_	68,624,667.	32	66,081,449.
	33	Total liabilities and net assets/fund balances			74,626,469.	33	68,683,738.
BA	Α		IEEA011	1L 10/07/20			Form <b>990</b> (2020)

BAA Form **990** (2020)

Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18	, 62	4,2	36.
2	Total expenses (must equal Part IX, column (A), line 25)	2	25	, 22	4,5	24.
3	Revenue less expenses. Subtract line 2 from line 1	3	-6	, 60	0,2	288.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				67.
5	Net unrealized gains (losses) on investments.	5				20.
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). See Schedule O	9	3	,18	8,6	550.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	66	ักล	1 4	49.
Pai	rt XII Financial Statements and Reporting		- 00	, 00	1,1	17.
	Check if Schedule O contains a response or note to any line in this Part XII				- 1	<u>·                                      </u>
1	Accounting method used to prepare the Form 990:   Cash X Accrual Other				Yes	No
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		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	ed on a	· _			
ı	b Were the organization's financial statements audited by an independent accountant?			2 b	Χ	
	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:  Separate basis  Both consolidated and separate basis	ite				
(	c 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?			2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		[	3 a		Х
I	b 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			3 b		
BAA	TEEA0112L 10/19/20		F	orm	990 (	(2020)

#### **SCHEDULE A** (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2020

Open to Public Inspection

iame o	trie	eorganization					Employer ident	incation nu	mber
Hous	sto	on Parks Board					74-18600	046	
Part	I	Reason for Public Cha	rity Status. (All o	rganizations must	comple	ete this			).
		nization is not a private found	dation because it is: (I	For lines 1 through 12,	check o	nly one	box.)		
1		A church, convention of church	es, or association of ch	nurches described in sect	ion 170(	b)(1)(A)(	i).		
2		A school described in section 1							
3	П	A hospital or a cooperative h	ospital service organi	ization described in <b>sec</b>	tion 170	)(b)(1)(A	۸)(iii).		
4	Ħ	A medical research organiza	,					. Enter th	ne hospital's
	ш	name, city, and state:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
5		An organization operated for section 170(b)(1)(A)(iv). (Co		ge or university owned	or oper	ated by	a governmental unit	describe	ed in
6		A federal, state, or local gove	•	ntal unit described in <b>s</b>	ection 1	<b>70(b)(</b> 1)	(A)(v).		
7	X	An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	art of its support from a	governm	ental uni	it or from the general	public des	scribed
8		A community trust described		A)(vi). (Complete Part I	l.)				
9	$\overline{\square}$	An agricultural research organi	zation described in sec	tion 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant co	ollege	
•	Ш	or university or a non-land-gran							
		university:							
10		An organization that normally from activities related to its investment income and unre June 30, 1975. See section 5	exempt functions, sub lated business taxable	ject to certain exception in the community in the communi	ns; and	(2) no r	nore than 33-1/3% c	of its supp	port from gross
11		An organization organized ar	nd operated exclusive	ly to test for public safe	ety. See	section	1 509(a)(4).		
12		An organization organized ar	nd operated exclusive	ly for the benefit of, to	perform	the fun	ctions of, or to carry	out the	purposes of one
		or more publicly supported o lines 12a through 12d that de	rganizations describe	d in <b>section 509(a)(1)</b> o	r sectio	n 509(a	<b>)(2).</b> See <b>section 50</b> 9	<b>9(a)(3).</b> C	heck the box in
а	П	Type I. A supporting organization							innorted
	Ш	organization(s) the power to re complete Part IV, Sections A	gularly appoint or elect	a majority of the director	rs or trus	tees of t	the supporting organiz	ation. <b>Yo</b>	u must
b		Type II. A supporting organiz management of the supporting must complete Part IV. Secti	organization vested in	ontrolled in connection the same persons that co	with its ontrol or	support manage	ed organization(s), the supported organization	oy having zation(s).	g control or <b>You</b>
С		Type III functionally integrated organization(s) (see instruction		ion operated in connection	n with, ar	nd function	onally integrated with,	its suppor	ted
d		Type III non-functionally integrated. The of	rated. A supporting org	anization operated in cor	nection	with its s	supported organization	n(s) that is	s not
е		instructions). <b>You must com</b> Check this box if the organiz	plete Part IV, Section ation received a writte	s A and D, and Part V. en determination from t	the IRS				•
f	En	integrated, or Type III non-futer the number of supported	nctionally integrated :	supporting organizatior	١.				
		ovide the following information	•						
(i	) Na	me of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	overning	(v) Amount of monetary support (see instructions	`	i) Amount of other port (see instructions)
					Yes	No			
					163	110			
A)									
В)									
C)									
D)									
-,									
E)									

#### 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 begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	13166783.	16549907.	18882770.	13947622.	5,996,186.	68,543,268.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 5	<b>Total.</b> Add lines 1 through 3 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)	13166783.	16549907.	18882770.	13947622.	5,996,186.	68,543,268. 24,427,059.
6	<b>Public support.</b> Subtract line 5 from line 4						44,116,209.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	<b>(f)</b> Total
7	Amounts from line 4	13166783.	16549907.	18882770.	13947622.	5,996,186.	68,543,268.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	573,088.	776,986.	1,088,797.	1,005,211.	654,370.	4,098,452.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	·	·			,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
	Total support. Add lines 7 through 10						72,641,720.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	43,393,338.
13	<b>First 5 years.</b> If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	olic Support P	ercentage				
14	Public support percentage for 20						60.73 %
15	Public support percentage from 2						50.92 %
	<b>33-1/3% support test—2020.</b> If the and <b>stop here.</b> The organization	qualifies as a pub	olicly supported o	rganization			► <u>X</u>
b	<b>33-1/3% support test—2019.</b> If th and <b>stop here.</b> The organization	e organization did qualifies as a pub	I not check a box olicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-ar	nd-circumstances	test, check this b	box and stop here	Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and Private foundation. If the organiz	meets the facts-a d-circumstances' t	nd-circumstances test. The organiza	s test, check this lation qualifies as	box and <b>stop here</b> a publicly support	e. Explain in Part ed organization	VI how the ▶

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.)

Sec	tion A. Public Support		piedes sempiete .	<u> </u>			
	lar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2010	(5) 2517	(0) 2010	(a) 2313	(6) 2020	(i) Total
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 organization'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						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	<b>(f)</b> Total
	Amounts from line 6						
	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 in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
	<b>First 5 years.</b> If the Form 990 is organization, check this box and	stop here					▶
	tion C. Computation of Pul					, ,	
	Public support percentage for 20	•			-		%
	Public support percentage from 2						%
Sec	tion D. Computation of Inv						
17		· ·		-		-	%
	Investment income percentage f					<u> </u>	%
	<b>33-1/3% support tests—2020.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies a	as a publicly supp	orted organization	▶ ∐
	<b>33-1/3% support tests—2019.</b> If t line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization	, check this box	and <b>stop here.</b> Th	e organization qu	ialifies as a public	ly supported organ	ization ▶

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	<b>4</b> c		
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 <b>Part VI</b> , 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined in 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 <b>Part VI.</b>	9с		
0 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer line 10b below.	10a		
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.).	10b		

Pai	rt IV	Supporting Organizations (continued)			
11	∐ac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below,			
	the g	overning body of a supported organization?	11a		
		nily member of a person described in line 11a above?	11b		
		s controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .	11c		
Sec	tion	B. Type I Supporting Organizations		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
1	or mo office orgar than were	the governing body, members of the governing body, officers acting in their official capacity, or membership of one one supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported nization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers	1	Yes	No
2	Did the that of the benear	the tax year.  The organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion (	C. Type II Supporting Organizations		l l	
				Yes	No
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion l	D. All Type III Supporting Organizations			
1	D:4 th	he experiention provide to each of its supported experientions, by the last day of the fifth month of the		Yes	No
1	orgar year,	he organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	orgai	ilzation's governing documents in effect on the date of notification, to the extent not previously provided:	•		
2	orgar	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tin	ason of the relationship described in line 2, above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard.	3		
Sec	tion l	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
		The organization satisfied the Activities Test. Complete line 2 below.			
	H	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	H	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	instru	uctions	s).
2	Activi	ities Test. Answer lines 2a and 2b below.		Yes	No
i	suppo orgai respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted tantially all of its activities.	2a		
ı	more reaso	the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the ons for the organization's position that its supported organization(s) would have engaged in these activities for the organization's involvement.	2b		
3	Parer	nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
	a Did th	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If 'Yes' or 'No,' provide details in <b>Part VI.</b>	3a		
ı		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	付 V □ Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	v. 20, 1970 (explain ir t complete Sections A	Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(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		
Sec	tion 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):			
	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	I Total (add lines 1a, 1b, and 1c)	1d		
	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		
Sec	tion 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		3		
4	3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated		-
BAA			Schedule A (F	orm 990 or 990-EZ) 20

Schedule A (Form 990 or 990-EZ) 2020

	•	•					
art V	Type III Non-	Functional	lv Integrat	ed 5090	a)(3) Supporting	<b>Organizations</b>	(continued)

Sec	tion D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required – provide 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 organization is responsive (provide details		
	in <b>Part VI</b> ). See instructions.	8	
9	Distributable amount for 2020 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in <b>Part VI</b> ). See instructions.			
3 Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
<b>b</b> Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

BAA

Schedule A (Form 990 or 990-EZ) 2020

Part VI

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. (See instructions.)

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## PUBLIC DISCLOSURE COPY Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Employer identification number

	on Parks Board		74-1860046
Organiz	ation type (check one)	):	
Filers of	f:	Section:	
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	nc
		527 political organization	
Form 99	0-PF	501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
	, ,	ered by the <b>General Rule</b> or a <b>Special Rule.</b> , (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.
General	Rule		
		ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributions for determining a contribution of the contributions for determining and the contributions for determining and contributions.	
Special	Rules		
X	under sections 509(a) received from any or	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line contributor, during the year, total contributions of the greater of (1) \$5,000; line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	e 13, 16a, or 16b, and that
	during the year, tota purposes, or for the	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece I contributions of more than \$1,000 exclusively for religious, charitable, scienti prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' id address), II, and III.	fic, literary, or educational
	during the year, con \$1,000. If this box is charitable, etc., purp	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece tributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contine checked, enter here the total contributions that were received during the year cose. Don't complete any of the parts unless the <b>General Rule</b> applies to this cosively religious, charitable, etc., contributions totaling \$5,000 or more during the	ributions totaled more than r for an <i>exclusively</i> religious, organization because
		isn't covered by the General Rule and/or the Special Rules doesn't file Schedu No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 9	

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Page 2 Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Name of organization Employer identification number Houston Parks Board 74-1860046 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (b) Name, address, and ZIP + 4 (c) Total contributions (a) No. Person Χ <u>1</u>\_ **Payroll** 1,000,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (a) No. (c) Total contributions Person 2\_\_ **Payroll** 285,000. Noncash (Complete Part II for noncash contributions.) (a) No. (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution Person 3\_ **Payroll** 936,838. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (c) Total (a) No. contributions Person 4\_ **Payroll** 350<u>,</u>000. Noncash (Complete Part II for noncash contributions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
[7   		\$ <u>130,888.</u>	Person X  Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$450,000.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
BAA	TEEA0702L 07/28/20	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2020)

Name of organization
Houston Parks Board
T4-1860046

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (b) Name, address, and ZIP + 4 (d) Type of contribution (c) Total contributions (a) No. Person Χ **Payroll** 450,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution (a) No. Person 8 **Payroll** 498,809. Noncash (Complete Part II for noncash contributions.) (a) No. (b) Name, address, and ZIP + 4 (c) Total (d) Type of contribution contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (a) No. (c) Total contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) Type of contribution (a) No. (c) Total (b) Name, address, and ZIP + 4 contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) Type of contribution (a) No. (c) Total (b) Name, address, and ZIP + 4 contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.)

1

Employer identification number

Houston Parks Board

Name of organization

BAA

74-1860046

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

### Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (b) Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received Land 3\_ 915,585. 12/21/21 (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received (b) Description of noncash property given Publicly traded securities 5 74,221. 4/22/21 (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (See instructions.) (a) No. from (d) Date received (b) Description of noncash property given (c) FMV (or estimate) Part I (See instructions.) (a) No. (b) Description of noncash property given (c) FMV (or estimate) (d) Date received from Part I (See instructions.)

Houston Parks Board

Employer identification number

74-	1860046

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 information once. See instructions.)\$							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	N/A							
		(e) Transfer of gift						
	Transferee's name, addres		Relationship of transferor to transferee					
(a)	435 (19							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
			<del> </del> 					
		(e) Transfer of gift						
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee				

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

#### If the organization answered 'Yes,' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

•	Section 501(c)(4), (5), or (6)	organizations: Complete Part III.			
Name	of organization			Employer identification	ation number
Ηοι	ıston Parks Board			74-186004	
	_	rganization is exempt under section			zation.
1		organization's direct and indirect political of on of 'political campaign activities')	ampaign activities in	Part IV.	
2	•	expenditures (See instructions)		▶ ბ	<b>:</b>
		campaign activities (See instructions)			
	· · · · · · · · · · · · · · · · · · ·	organization is exempt under section			
1	Enter the amount of any ex-	cise tax incurred by the organization under	section 4955	▶\$	0.
2		cise tax incurred by organization managers			
3		a section 4955 tax, did it file Form 4720 for			
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount directly ex	xpended by the filing organization for section	n 527 exempt function	n activities > \$	
2		ng organization's funds contributed to other es			
3		nditures. Add lines 1 and 2. Enter here and		▶\$	
4	Did the filing organization fi	le Form 1120-POL for this year?			Yes No
5	Enter the names, addresses organization made payment amount of political contribution segregated fund or a political contribution.	s and employer identification number (EIN) is. For each organization listed, enter the ains received that were promptly and directly delal action committee (PAC). If additional spanning	of all section 527 pol mount paid from the f ivered to a separate po ace is needed, provide	itical organizations to willing organization's fundition's funditical organization, such e information in Part IV	hich the filing ds. Also enter the as a separate
	<b>(a)</b> Name	(b) Address	<b>(c)</b> EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2020

Part II-A Complete if section 501(	the organization i	s exempt under sec	ction 501(c)(3) and	filed Form 5768 (el	ection under
	••	to an affiliated group (and	list in Part IV each affilia	ited group member's name	
<u>  </u>		share of excess lobbying		itou group mombor o nam	, ,
_	•	ed box A and 'limited cor	•		
(The term	Limits on Lobbyin 'expenditures' means	g Expenditures s amounts paid or incurr	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence publi	c opinion (grassroots lob	bying)	2,500.	
<b>b</b> Total lobbying expenditudes	22,500.				
c Total lobbying expenditu	25,000.	0.			
<b>d</b> Other exempt purpose e	•		ļ	24,967,691.	
e Total exempt purpose e	xpenditures (add lines	s 1c and 1d)		24,992,691.	0.
f Lobbying nontaxable an both columns		ınt from the following tab		1,000,000.	
If the amount on line 1e, colu		ne lobbying nontaxable	amount is:		
Not over \$500,000		% of the amount on line 1e.	4500.000		
Over \$500,000 but not over \$1,	· ·	00,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		75,000 plus 10% of the excess			
Over \$1,500,000 but not over \$ Over \$17,000,000		25,000 plus 5% of the excess o ,000,000.	ver \$1,500,000.		
g Grassroots nontaxable a	·	· ·		250 000	0
<b>h</b> Subtract line 1g from lin	•	•	ļ	250,000.	0.
i Subtract line 1f from line				0.	0.
j If there is an amount othe section 4911 tax for this	·		ι		
	4-`	Year Averaging Period U nade a section 501(h) ele	Inder Section 501(h)		
·		w. See the separate instr			
	Lobbyii	ng Expenditures During	4-Year Averaging Perio	od T	
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	(e) Total
2 a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
<b>c</b> Total lobbying expenditures			15,667.	25,000.	40,667.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures				2,500.	2,500.
BAA				Schedule C (Forn	n 990 or 990-EZ) 2020

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

(election under section 501(n)).		a)		(b)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?					
c Media advertisements?d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
<ul><li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li><li>i Other activities?</li></ul>					
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	1(c)(5)	, or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			L		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior y	ear?	3		L
Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (banswered 'Yes.'	) Part I	, or se III-A, li	ction 5 ne 3, is	01(c)	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politica expenses for which the section 527(f) tax was paid).	I				
a Current year.		2 a			
<b>b</b> Carryover from last year.		2 b			
<b>c</b> Total		2 c			
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (See instructions)		5			

#### Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection
Employer identification number

Hou	ston Parks Board			74-1860046
Par	t   Organizations Maintaining Donor	r Advised Funds or Other	Similar Fun	ds or Accounts.
•	Complete if the organization answ	vered 'Yes' on Form 990, F	Part IV, line	6.
		(a) Donor advised fun	ds	(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 donors are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing of the donor or donor advisor, or	that grant func r for any other	ds can be used only purpose conferring Yes No
Par	Conservation Easements. Complete if the organization answ	vered 'Yes' on Form 990, F	Part IV, line	7.
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (for examp	le, recreation or education)	Preservation	on of a historically important land area
	Protection of natural habitat		Preservation	on of a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he last day of the tax year.	eld a qualified conservation contrib	ution in the forn	n of a conservation easement on the
				Held at the End of the Tax Year
a	Total number of conservation easements			2a
Ł	Total acreage restricted by conservation easen	nents		2b
c	: Number of conservation easements on a certifi	ed historic structure included in	(a)	2c
C	Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, and	not on a histor	ic 2 d
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished, or	terminated by th	ne organization during the
4	Number of states where property subject to conser			_
5	Does the organization have a written policy reg			
6	and enforcement of the conservation easemen Staff and volunteer hours devoted to monitoring, in			
	<u> </u>			
7	Amount of expenses incurred in monitoring, inspect ►\$	cting, handling of violations, and er	nforcing conserv	vation easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requi	rements of sec	ction 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements.	orts conservation easements in in the organization's financial sta	ts revenue and tements that d	d expense statement and balance sheet, and escribes the organization's accounting for
Par		ctions of Art, Historical Tr vered 'Yes' on Form 990, F	easures, or Part IV, line	Other Similar Assets. 8.
1 a	If the organization elected, as permitted under historical treasures, or other similar assets held Part XIII the text of the footnote to its financial	d for public exhibition, education	, or research in	atement and balance sheet works of art, n furtherance of public service, provide in
k	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	r public exhibition, education, or re	search in furthe	rance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, I			
	(ii) Assets included in Form 990, Part X			
	If the organization received or held works of art, hi amounts required to be reported under FASB A	ASC 958 relating to these items:		
a	Revenue included on Form 990, Part VIII, line	1		
L	Accots included in Form 990 Part Y			<b>▶</b> \$

Part III   Organizations Mainta	ining Collections	s of Art, Histor	rical	Treasures, or	Other	Similar Ass	ets (co	<u>ontinu</u>	ed)
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):									
a Public exhibition		d Loan o	r exch	ange program					
<b>b</b> Scholarly research	b Scholarly research e Other								
c Preservation for future generations									
4 Provide a description of the organize Part XIII.		explain how they	further	the organization's	exempt	purpose in			
5 During the year, did the organiza to be sold to raise funds rather the	ation solicit or receive han to be maintained	e donations of art, I as part of the or	, histor ganiza	rical treasures, or ation's collection?	other s	similar assets	Yes		No
Part IV Escrow and Custodia line 9, or reported an	I Arrangements. amount on Form	Complete if th 990, Part X, I	ne org ine 2	ganization ans 1.	wered	I 'Yes' on Fo	rm 990	), Par	t IV,
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian or ot	ner intermediary f	or con	tributions or other	assets	s not included	Yes	Ī:	X No
<b>b</b> If 'Yes,' explain the arrangement								Ŀ	<u> </u>
, ,		•	3				Amount		
<b>c</b> Beginning balance					10	:			
<b>d</b> Additions during the year									
e Distributions during the year									
f Ending balance					. 1f				0.
2a Did the organization include an a							X Yes		□No
<b>b</b> If 'Yes,' explain the arrangement						· .		X	
bili res, explain the arrangement		ee Part XIII		ias been provided	onra	70 / 1111		· · · · <u>Z</u>	7
Part V Endowment Funds. C				nd 'Ves' on For	m 991	) Part IV lir	na 10		
rait v Elidowillelit Fullus.	(a) Current year	(b) Prior year		(c) Two years back		Three years back		our years	e hack
<b>1 a</b> Beginning of year balance	6,234,155.	6,287,49		6,001,014		5,588,069.			277.
<b>b</b> Contributions	0,234,133.	0,201,43	93.	0,001,014	•	3,300,009.	4,	911,	211.
_									
c Net investment earnings, gains,	1,731,319.	-20,53	32	320,881		446,508.		6/1	269.
and losses	1,731,317.	20,55	٥٧.	320,001	•	440,500.		041,	207.
· ·							-		
e Other expenditures for facilities and programs	15,372.					0.			
f Administrative expenses	37,047.	32,80	08.	34,400		33,563.		24,	477.
<b>q</b> End of year balance		6,234,15		6,287,495		6,001,014.			069.
2 Provide the estimated percentag						,			
<b>a</b> Board designated or quasi-endowm	-	ૄ	•	. ,,					
<b>b</b> Permanent endowment ▶	38.76%								
c Term endowment ► 6	1.24 %								
The percentages on lines 2a, 2b, a		0%.							
<b>3a</b> Are there endowment funds not in too organization by:	the possession of the	organization that ar	re held	and administered	for the		Г	Yes	No
(i) Unrelated organizations							3a(i)	103	Х
(ii) Related organizations							3a(ii)	Χ	
<b>b</b> If 'Yes' on line 3a(ii), are the rela							3b	X	
4 Describe in Part XIII the intended	-						30	Λ	<u> </u>
		ation's endownier	iit iuiiu	is. See Part	. VII	Τ			
Part VI Land, Buildings, and Complete if the organ	• •	'Yes' on Form	1 990,	, Part IV, line	11a. S	See Form 99	0, Par	t X, Iir	ne 10.
Description of property		t or other basis evestment)		Cost or other asis (other)	(c) A	ccumulated preciation	(d) E	Book va	alue
<b>1 a</b> Land			9	9,583,057.			9	,583.	,057.
<b>b</b> Buildings				91,817.		68,864.			, 953.
<b>c</b> Leasehold improvements				,		,			
<b>d</b> Equipment				314,686.		204,288.		110	,398.
<b>e</b> Other				33,405.		25,045.			,360.
Total. Add lines 1a through 1e. (Colum		rm 990. Part X oo	olumn				۵		, 768.
BAA	(=,			<u> </u>			ule D (Fo		

BAA

		<ul> <li>Other Securities.</li> </ul>		N/A	
	Complete if the	e organization answered	l 'Yes' on Form 990	, Part IV, line 11b. See Form 99	90, Part X, line 12
(a) Desc	cription of security or cate	egory (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	-year market value
(1) Financ	cial derivatives				
(2) Closely	y held equity interes	sts			
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G) (L)					
(H)					
(l)					
		990, Part X, column (B) line 12.) 🕨			
Part VIII	Investments -	- Program Related.	l 'Vec' on Form 990	N/A , Part IV, line 11c. See Form 99	00 Part Y line 13
	(a) Description of		(b) Book value	(c) Method of valuation: Cost or end-	
(1)	(a) Description of	IIIVCSUIICIIC	(b) Book value	(c) Method of Valuation. Gost of Cha	or year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Colur		990, Part X, column (B) line 13.) 🕨			
Part IX	Other Assets.		N/A	D	30 D IV II 15
	Complete if the			, Part IV, line 11d. See Form 9	
/1\		( <b>a)</b> De	scription		<b>(b)</b> Book value
(1)					
(2)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(9) (10)					
(9) (10)	olumn (b) must eaua	al Form 990. Part X. column (	B) line 15.)	<b>&gt;</b>	
(9) (10) <b>Total.</b> (Co			B) line 15.)		
(9) (10)	Other Liabilitie	es.			
(9) (10) <b>Total.</b> (Co	Other Liabilitie	<b>es.</b> ganization answered 'Yes' on F		e or 11f. See Form 990, Part X, line 25.	(b) Book value
(9) (10) <b>Total.</b> (Co <b>Part X</b>	Other Liabilitie	<b>es.</b> ganization answered 'Yes' on F	Form 990, Part IV, line 11		(b) Book value
(9) (10) <b>Total.</b> (Co <b>Part X</b> 1. (1) Fede	Other Liabilitie Complete if the orderal income taxes	<b>es.</b> ganization answered 'Yes' on F	Form 990, Part IV, line 11		
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con	Other Liabilitie Complete if the orderal income taxes	es. ganization answered 'Yes' on F (a) Descr	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr	Form 990, Part IV, line 11		758,868.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due (4) Pay (5)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due (4) Pay (5) (6)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X  1. (1) Fede (2) Con (3) Due (4) Pay (5) (6) (7)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due (4) Pay (5) (6) (7) (8)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due (4) Pay (5) (6) (7) (8) (9)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due (4) Pay (5) (6) (7) (8)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10) Total. (Co Part X 1. (1) Fede (2) Con (3) Due (4) Pay (5) (6) (7) (8) (9)	Other Liabilitie Complete if the orderal income taxes astruction coefe to HPB LGC,	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc	Form 990, Part IV, line 11		758,868. 248,488.
(9) (10)  Total. (Co  Part X  1. (1) Fede (2) Com (3) Due (4) Pay (5) (6) (7) (8) (9) (10) (11)  Total. (Colum	Other Liabilitie Complete if the orderal income taxes astruction come to HPB LGC, rcheck Protect	es. ganization answered 'Yes' on F (a) Descr ontracts payable Inc etion Program Loan	Form 990, Part IV, line 11 iption of liability	e or 11f. See Form 990, Part X, line 25.	758,868. 248,488. 591,231.
(9) (10)  Total. (Color 1)  1. (1) Feder (2) Conrect (3) Dues (4) Pay (5) (6) (7) (8) (9) (10) (11)  Total. (Colum 2. Liability for 1)	Other Liabilitic Complete if the orderal income taxes astruction coes to HPB LGC, rcheck Protect  mnn (b) must equal Form 9 or uncertain tax positions.	ganization answered 'Yes' on F  (a) Descr  entracts payable  Inc  etion Program Loan  290, Part X, column (B) line 25.)  In Part XIII, provide the text of the fo	Form 990, Part IV, line 11 iption of liability	e or 11f. See Form 990, Part X, line 25.	758,868. 248,488. 591,231.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	•
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	21,198,654.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
<b>b</b> Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) See Part XIII 2d 1,733,025.		
e Add lines 2a through 2d.	2 e	2,627,651.
3 Subtract line 2e from line 1.	3	18,571,003.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	53,233.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	18,624,236.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	rn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	25,200,280.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.) See Part XIII 2d 2,783.		
e Add lines 2a through 2d.	2 e	28,989.
3 Subtract line 2e from line 1	3	25,171,291.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	53,233.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	25 224 524

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part IV, Line 2b - Explanation Of Escrow Account Liability

HBP is holding funds in the amount of \$96,357 on behalf of three park-related organizations which have little activity and no current need for the funds.

#### Part V, Line 4 - Intended Uses Of Endowment Fund

Part XIII Supplemental Information.

The majority of the endowed funds are held by the Houston Parks Board Foundation and are intended to support the operations of Houston Parks Board. Houston Parks Board also holds cash that is restricted for the development of permanent parks and green

Space.

BAA Schedule D (Form 990) 2020

Part XIII | Supplemental Information (continued)

Schedule D, Part XI, Line 2d	
Other Revenue Included In F/S But Not Included On Form 990	)

Income of related Foundation  $\frac{$1,733,025}{$1,733,025}$ 

Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S

Expenses of related Foundation \$ 2,783.

Total \$ 2,783.

**BAA** TEEA3305L 08/18/20 **Schedule D (Form 990) 2020** 

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization 74-1860046 Houston Parks Board **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e X Solicitation of non-government grants Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name and address of individual (iii) Did fundraiser (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No Sterling Assoc. Fundrais 55 Waugh Dr -ing Χ 102,500 Houston TX 77007 Consulting 2,031,090 1,928,590. Carol Moffett Fundrais 2 1703 Welch St -ing
Consulting Houston TX 77006 Χ 1,251,288 76,100 1,175,188. 3 4 5 6 7 9 10 Total. 3,282,378. 178,600. 3,103,778. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2020 Houston Parks Board 74-1860046 Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (a) Event #1 **(b)** Event #2 (c) Other events (add column (a) Annual Lunch None through column (c) (event type) (event type) (total number) Revenue **1** Gross receipts..... 495,066. 495,066. 2 Less: Contributions..... 486,966 486,966. **3** Gross income (line 1 minus line 2)..... 8,100 8,100. Cash prizes..... Direct Expenses Rent/facility costs..... 65,575. 65,575. **7** Food and beverages ..... 8,776. 8,776 9 Other direct expenses..... 10 Direct expense summary. Add lines 4 through 9 in column (d)..... 74,351. Net income summary. Subtract line 10 from line 3, column (d)..... -66,251 Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming Revenue (add column (a) through column (c)) (a) Bingo bingo/progressive bingo (c) Other gaming Gross revenue..... Direct Expenses 2 Cash prizes..... Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) ...... 8 Net gaming income summary. Subtract line 7 from line 1, column (d)..... **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If 'No,' explain:

**b** If 'Yes,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

Schedule G (Form 99	O or 990-EZ) 2020 Houston Parks Board 74	-1860	046	Page <b>3</b>
	zation conduct gaming activities with nonmembers?		Yes	No
-	n a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to table gaming?		Yes	No
13 Indicate the perc	entage of gaming activity conducted in:			
		13 a		%
•	ty	13 b		ું જ
	nd address of the person who prepares the organization's gaming/special events books and records:			
Name ►				
Address ► _				
<b>b</b> If 'Yes,' enter the of gaming reve	zation have a contract with a third party from whom the organization receives gaming revenue e amount of gaming revenue received by the organization ► \$ and the ue retained by the third party ► \$ me and address of the third party:	e?e amour		No
Name ►				
Address ►				
16 Gaming manag	r information:			
Name ►				
Gaming manag	er compensation ► \$			
	ervices provided			:
Director/off	eer Employee Independent contractor			
17 Mandatory distr	outions:			
<b>a</b> Is the organization	n required under state law to make charitable distributions from the gaming proceeds to retain the		. TYes	□No
<b>b</b> Enter the amour	of distributions required under state law to be distributed to other exempt organizations or spent in the exempt activities during the tax year > \$		٠٠٠ ا	
Part IV Supple and Pa	nental Information. Provide the explanations required by Part I, line 2b, coluter III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any sion. See instructions.	imns ( additi	iii) and ( onal	v);

# SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service Name of the organization

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.

Open to Public Inspection

Employer identification number

Houston Parks Board						74-186004	6
Part I General Information on G	rants and Assista	ance				·	
1 Does the organization maintain records the selection criteria used to award t	to substantiate the ame	ount of the grants or ce?	assistance, the grantees'	eligibility for the grants	or assistance, and		X Yes No
2 Describe in Part IV the organization's p	rocedures for monitorin	g the use of grant fu	unds in the United States.		See	Part IV	
Part II Grants and Other Assista							
Form 990, Part IV, line 21	, for any recipient	that received	more than \$5,000. F	Part II can be dupli	icated if additiona	al space is neede	d.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Houston Parks Board LGC, Inc. 300 N Post Oak Lane							Land and
Houston, TX 77024	26-3091027	Government	9,725,448.	0.			Project
(2) Houston Parks Board LGC, Inc. 300 N Post Oak Lane	26, 2001027	Carramant		2 267 722	EMY	Conveyed accepts	Land and
Houston, TX 77024	26-3091027	Government	0.	2,267,732.	FMV	Conveyed assets	Project
(3) City of Houston 901 Bagby Street	E4 6001164		255 642				
Houston, TX 77002	74-6001164	Government	256,649.	0.			Land funding
<u>(4)</u>							
(5)							
(6)							
(7)							
(8)							
2 Enter total number of section 501(c)	(3) and government of	rganizations listed	in the line 1 table			<u> </u>	<u> </u>
3 Enter total number of other organiza	• •	-					0

Schedule I (Form 990) 2020 Houston Parks Board 74-1860046 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

#### Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

The Houston Parks Board solicits gifts and bequests for park acquisitions, additions, and improvements within the City of Houston and the surrounding metropolitan area. From time to time, it transfers land to or purchases land for the City of Houston or the Houston Parks Board LGC, a local government corporation formed to hold the parkland and improvements managed by the HPB for the City of Houston. HPB also acts as an agent for the City of Houston regarding certain funds maintained on behalf of the City. One such fund provides scholarships to students. The Houston Parks and Recreation Department's A.S.K. Group determines the A.S.K. scholarship recipients and has the HPB write a check directly to the school the student is attending. The A.S.K.

#### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Houston Parks Board

Employer identification number 74–1860046

Par	rt I Questions Regarding Compensation			
	<u>'</u>		Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.  Part II	Т		
	First-class or charter travel  X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
ŀ	<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
-	reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	. 1 b	Χ	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	. 2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/ Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
ā	a Receive a severance payment or change-of-control payment?	. 4a		Х
	b Participate in or receive payment from a supplemental nonqualified retirement plan?			Χ
(	c Participate in or receive payment from an equity-based compensation arrangement?	. 4 c		Χ
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	a The organization?	. 5 a		Х
ŀ	<b>b</b> Any related organization?	. 5 b		Χ
	If 'Yes' on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	a The organization?			X
ľ	<b>b</b> Any related organization?	. 6 b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	. 7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)?			
	If 'Yes,' describe in Part III	. 8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			
	section 53.4958-6(c)?	. 9		

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown	of W-2 and/or 1099-MI	SC compensation	(C) Datingment	(D) Namtavahla	(E) Total of	(E) Componentian
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Elizabeth White	(i)	258,194.	0.	24,000.	11,275.	28,106.	321,575.	0.
1 President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
Jeri Nordbrock (thru Nov 2020)	(i)	114,431.	0.	26,000.	5,625.	17,752.	163,808.	0.
2 CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
Charles Place (thru Jun 2020)	(i)	195,630.	0.	1,842.	3,684.	0.	201,156.	0.
3 Capital Pgm Mg Dir	(ii)	0.	0.	0.	0.	0.	0.	0.
Matthew Rondot	(i)	<u> 128,950.</u>	0.	26,000.	<u>6,270.</u>	10,529.	<u>171,749.</u>	0.
4 Conserv/Maint Dir	(ii)	0.	0.	0.	0.	0.	0.	0.
Richard McNamara (fr Sep 2020)	(i)	<u> 124,914.</u>	<u>0.</u>	2,761.	<u>5,521.</u>	24,121.	<u> 157,317.</u>	0.
<b>5</b> Intrim Cap Pgm Mg	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
6	(ii)							
	(i)				L		<b> </b>	
7	(ii)							
	(i)				<b> </b>			
8	(ii)							
_	(i)		<b> </b>		<b> </b>		<b> </b>	
9	(ii)							
	(i)		<b> </b>		<b> </b>		<b></b>	
10	(ii)							
44	(i)		<b> </b>		<b> </b>		<b></b>	
11	(ii)							
10	(i)		<b> </b>		<b> </b>		<b></b>	
12	(ii)							
12	(i)				<b></b>		<b></b>	
13	(ii)							
14	(i)		<b> </b>		<b> </b>		<b></b>	
14	(ii)							
15	(i)		<del> </del>		<del> </del>		<del> </del>	
15	(ii)							
10	(i)		<del> </del>		<b> </b>		<del> </del>	
16	(ii)		TEE / / 1 0 2 1 0 0 / 2 5	/20			Calcadala	L (Forms 000) 2020

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TEEA4102L 09/25/20

Schedule J (Form 990) 2020

Page 2

Schedule J (Form 990) 2020 Houston Parks Board 74-1860046 Page 3

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### Part 1, Line 1a - Relevant Information Regarding Compensation Benefits

The COO received a \$26,189 travel and housing reimbursement when his move was delayed due to Covid. The reimbursed travel and housing expenses were treated as taxable compensation in 2021.

TEEA4103L 09/25/20

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

**Open to Public** Inspection

Name of the organization Employer identification number 74-1860046 Houston Parks Board Part I Types 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	Metho noncash	<b>(d)</b> od of dete contribut	ermin ion ar	ing nounts
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications.							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property.							
9	Securities - Publicly traded	Х	3	103,441.	NYSE			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests .							
12	Securities - Miscellaneous							
13	Qualified conservation contribution — Historic structures							
14	Qualified conservation contribution — Other							
15	Real estate – Residential							
16	Real estate – Commercial							
17	Real estate – Other	Х	2	915,585.	Apprai	sal F	MV	
18	Collectibles			•				
19	Food inventory.							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts.							
23	Scientific specimens							
24	Archeological artifacts.							,
25	Other ► ()							
26	Other • ()							
27	Other ► ()							
28								
29	Number of Forms 8283 received by the organization dorganization completed Form 8283, Part V, Dones				29			
	, see , , , , , , , , , , , ,		3			Y	'es	No
30a	During the year, did the organization receive by contri it must hold for at least three years from the date for exempt purposes for the entire holding period?	of the initia	I contribution, and whic	ch isn't required to be u	sed	30 a		X
h	If 'Yes,' describe the arrangement in Part II.					50 a		Λ
	Does the organization have a gift acceptance police	cv that requi	ires the review of any n	nonstandard contribution	ns?	31	Х	
	Does the organization hire or use third parties or i		-			<u> </u>	77	
	noncash contributions?					32 a		X
	If 'Yes,' describe in Part II.		home of managements for	aiala aaluunna (-) i!	امما			
33	If the organization didn't report an amount in colu describe in Part II.	mn (c) for a	type of property for wh	nicn column (a) is chec	кеа,			

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

Schedule M (Form 990) 2020

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

BAA TEEA4602L 08/18/20 Schedule M (Form 990) 2020

#### SCHEDULE O (Form 990 or 990-EZ)

#### 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 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Houston Parks Board 74-1860046

#### Form 990, Part III, Line 4d - Other Program Services Description

The Houston Parks Board assists with special projects to promote cultural activities and athletic events as well as managing trust accounts for City supported park and community programs.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is reviewed by the HPB's Director of Accounting and Finance and President then distributed to the Board of Directors prior to filing with the IRS.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Members of the HPB Board of Directors and Staff complete disclosure statements annually and update them when changes occur from the disclosure statement on file at HPB. If a conflict of interest is disclosed, the Governance & Nominating committee reviews the material facts associated with the potential conflict. If the committee determines a conflict exists, the member is separated from influencing all future board actions with respect to such conflict.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

A subcommittee of the Executive Committee of HPB conducts an evaluation review for the top management official. The evaluation includes a performance review, an evaluation of compensation for comparable positions, and feedback from other board members. A written substantiation of the review and compensation decision is then prepared.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The President & CEO evaluates officers and key employees on an annual basis. The process includes a performance review and an evaluation of compensation for comparable positions.

Name of the organization	Employer identification number
Houston Parks Board	74-1860046

## Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents, the conflict of interest policy, and financial statements are available upon request.

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

#### **SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** 

Part I Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

OMB No. 1545-0047 2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Houston Parks Board

Employer identification number

74-1860046

(a) Name, address, and EIN (if applicable) of disregarded el	ntity (b) Primary a	(b) (c) Primary activity Legal domicile (state or foreign country)		c) nicile (state n country)	<b>(d)</b> Total income		(e) End-of-year assets		(f) Direct controll entity		olling
<u>(1)</u>											
(2)											
(3)											
Part II Identification of Related Tax-Exempt On had one or more related tax-exempt org	rganizations. Complete anizations during the t	e if the orgax year.	ganization	answere	d 'Yes	on Form 99	0, Par	t IV, line 34,	becau	se it	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal dom or foreign	c) iicile (state n country)	(d) Exempt ( section	Code	(e) Public charity (if section 501	status (c)(3))	(f) Direct contro entity	olling	Sec 512 controlled	(b)(13) d entity?
										Yes	No
(1) Houston Parks Board LGC, Inc 300 N Post Oak Lane Houston, TX 77024 26-3091027	Provide support for the City's park system	2	ΓX	170(c)	) (1)	Governm	ent	City o			Х
(2) Houston Parks Board Foundation 300 N Post Oak Lane Houston, TX 77024 27-4576670	Provide support for Houston Parks Board	2	ΓX	501 (c)		12a		Houston E	Parks	Х	
<u>(3)</u>				( - ,	, ,						
<u>(4)</u>											

Part III	Identification of Related Organizations Taxable as a Partnership	. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34,
	because it had one or more related organizations treated as a pa	rthership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(related, unrelated, excluded from tax under sections end-of-year assets allocations? K-		tionate allocations		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	nal or aging ner?	(k) Percentage ownership	
		country)		512-514)			Yes	No	1065)	Yes	No	
(1)												
(2)												
(3)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled	) (b)(13) d entity?
		country)	entity	or trust)				Yes	No
(1)									
	Ī								
	Ī								
(2)									
	Ī								
	Ī								
(3)									
	†								
	†								1
	1			I		1		ı .	

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

b	Gift, grant, or capital contribution to related organization(s)	1 b	Χ	
С	Gift, grant, or capital contribution from related organization(s)	1 c		X
	Loans or loan guarantees to or for related organization(s).	1 d		Χ
е	Loans or loan guarantees by related organization(s)	1 e		Χ
	Dividends from related organization(s).	1f		Χ
_	Sale of assets to related organization(s)	1 g		Х
	Purchase of assets from related organization(s).	1 h		Х
	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
		4.		•••
	Lease of facilities, equipment, or other assets from related organization(s).	1 k		Х
	Performance of services or membership or fundraising solicitations for related organization(s).	11		X
	Performance of services or membership or fundraising solicitations by related organization(s).	1 m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
0	Sharing of paid employees with related organization(s)	10	Χ	
	Delimber and a siddle substant annual self-self-self-self-self-self-self-self-		,,	
•	Reimbursement paid to related organization(s) for expenses	1 p	Х	
q	Reimbursement paid by related organization(s) for expenses.	1 q	Χ	
	Other transfer of each or preparty to related expeniantian(a)	1		37
	Other transfer of cash or property from related organization(s).	1r 1s		X
	Other transfer of cash or property from related organization(s)	15		Χ
		(ď	)	
	Name of related organization   Iransaction   Amount involved   Metr	<b>d)</b> od of d		
	type (a-s) al	nount i	involv	ed
1)				
2)				
3)				
4)				
5)				
6)				
				0000
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# Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	( 3	Yes	No	
<u>(1)</u>													
<u>(2)</u>													
(3)													
<u>(4)</u>													
<u>(5)</u>													
<u>(6)</u>													
<u>(7)</u>													
<u>(8)</u>													
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Schedule R (Form 990) 2020

# Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.