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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 Open to Public Inspection

<u> </u>	or the	e 200 <u>9 c</u> a		dar year, or tax year beginning , 2009, and ending				20	
B cı	eck if app			C Name of organization HOUSTON TEXANS FOUNDATION] [Employer ident	tification n	umber	
	Addres			Doing Business As		01-05728	314		
	7 i	change print	or	Number and street (or P O box if mail is not delivered to street address) Room/suit	ıte E	Telephone num	ber		
	 Install	return Sec		4400 POST OAK PARKWAY	ł	(713) 336-	-7800		
	Termin	Speci		City or town, state or country, and ZIP + 4	1				
	Amend	ded ton		HOUSTON, TX 77027	H	Gross receipts	\$	1,227	,123.
-	Applica	ation F	Na	me and address of principal officer JAMES M. KENDRIGAN	- ;	H(a) Is this a group	return for	Yes	X No
Ц.	_j pendin	na i		POST OAK PARKWAY, STE 1400 HOUSTON, TX 77027	١,	affiliates? H(b) Are all affiliates	included?	Yes	No
	Tay ave	empt status	Ť	X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527	╡`	If "No," attach a			
			! vj	HOUSTONTEXANS.COM/COMMUNITY/	⊢.	H(c) Group exemption			
		of organizatio				n 2002 M St			TX
^ Ра			_		matio	11 2002 11 31	ate of legal	donnesse	
Γ¢		Summa							
	1	Briefly des	110	be the organization's mission or most significant activities TON TEXANS FOUNDATION IS COMMITTED TO ENCOURAGIN					
e				ALL YOUTH AND FAMILIES IN HARRIS COUNTY TO REAC			-	- 	
Jan				L AND TO ACHIEVE SUCCESS.		HEIR FOLL			
/er								-	
Governance	2			x 🕨 🔲 if the organization discontinued its operations or disposed of more than 2					10
త	3			ting members of the governing body (Part VI, line 1a)			3		5
Activities	4	Number of	f ın	dependent voting members of the governing body (Part VI, line 1b)			\$		
	5	Total num	ber	of employees (Part V, line 2a)		<u>ئار </u>	5		0
	6	Total num	ber	of volunteers (estimate if necessary)			6		25
	7 a	Total gross	s u	nrelated business revenue from Part VIII, column (C), line 12			а		0.
	Ь	Net unrela	ited	business taxable income from Form-990-T, the 34	· • <u>•</u> .	<u> 7</u>	b		0.
Revenue				T RECEIVED		Prior Year		urrent Y	
				and grants (Part VIII, line-th)		970,356	5.	981	,521.
	9	Program s	en	nce revenue (Part VIII, line 2g)		C).		0.
ě	10	Investmen	nt ir	come (Part VIII, column (A), lines 3, 4, and 7d)		C).		0.
œ				e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		64,653	3.	29	,006.
				e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,035,009	€.	1,010	,527.
				imilar amounts paid (Part IX, column (A), lines 1-3)		702,255	5.	632	985.
				to or for members (Part IX, column (A), line 4)			J.		0.
	4-			er compensation, employee benefits (Part IX, column (A), lines 5-10)		19,506	<u> </u>	14	,967.
Expenses	160	Drofession	nal	fundraising fees (Part IX column (A) line 11e)	0.				0.
ber	l L	Total fund	Irai	fundraising fees (Part IX, column (A), line 11e) sing expenses, Part IX, column (D), line 25) ▶ 134,112.				_	
Ä	170	Other eve	one	les (Part IX, column (A), lines 11a-11d, 11f-24f)		186,484	4.	200	,498.
				es Add lines 13-17 (must equal Part IX, column (A), line 25)		908,245			3,450.
						126,764			2,077.
- 5		Revenue	es	s expenses Subtract line 18 from line 12	B	eginning of Yea		End of Y	
Net Assets or Fund Balances	20	T-4-1		Det Ville 40)		579,379			7,319.
SSB	20			Part X, line 16)		175,182			795.
달	21			s (Part X, line 26)		404,19			$\frac{5}{5},524$.
				fund balances Subtract line 21 from line 20,		404,13	<u>′ • l</u>		7, 524.
Ρâ	rt II			e Block					
		Under per	alti	es of perjury, I declare that I have examined this return, including accompanying schedules و true, correct, and complete Declaration of preparer (other than officer) is based on all	s and	statements, and t	to the bes	tof my k asanv k	nowledge nowledge
_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	/	by 4 - Kindyson			15.10	ac a,	
	ign		_						
Н	lere	'		re of officer		Date			
		I D		S M. KENDRIGAN VICE PRESIDENT		<u></u>			
		Туре	e or	print name and title			delite e i		
Da:-		Preparer'		Date Check self-	K IT		rer's identi nstructions		per
Paid	ı parer's	signature		emplo	oyed	▶			
	parer s Only	Firm's nar				EIN ►			
	·	address, a	nď i	ZÍP + 4		Phone no			
Ma	y the II	RS discus:	s th	is return with the preparer shown above? (see instructions)	· · ·			Yes	X No

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

Form **990** (2009)

SCANNED DEC 2 2 2010

ATTACHMENT 3

632,985.

303,127) (Revenue \$

(Expenses \$

4d Other program services (Describe in Schedule O.)

4e Total program service expenses ▶

303, 127 including grants of \$

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?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N	ľΑ
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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? If "Yes," complete Schedule D, Part II	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; serve as a custodian for amounts not listed in Part	<u> </u>		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes,"</i>			
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	-		
	quasi-endowments? If" Yes," complete Schedule D, Part V	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	-10		
• •	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	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.			
	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			
	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.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's separate of consolidated financial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X]
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII.	12		X
124	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	12		 ^
120	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	148	<u> </u>	<u> </u>
-	business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140	l <u>-</u>	<u> </u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		<u> </u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	46		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		 ^
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	4-		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	 	 ^
10	- 		"	
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	-
13	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	امدا	_v	
20	If "Yes," complete Schedule G, Part III	19	X	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	Щ.	Х

Part IV

Part	IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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 question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3) and 501(c)(4) 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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	i		
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part N	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			.,
	Part N	28c	37	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			X
	conservation contributions? If "Yes," complete Schedule M	30		<u> ^</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			х
32	Part I	31		<u> </u>
JZ	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	132		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	"		
•	III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	L	Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	
	Part VI	37	Х	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Far	Statements Regarding Other IRS Fillings and Tax Compilance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	ł		
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			لــــــــــــــــــــــــــــــــــــــ
	gaming (gambling) winnings to prize winners?	1c		Х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			1
	instructions)		1	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			ļ
	this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			·
	and Financial Accounts.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5 c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			l
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			ĺ
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<u> </u>
	and services provided to the payor?	7 a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с	Х	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	İ		
	required?	7h		L
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

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 in Schedule O. See instructions.

<u>Sect</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	_	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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 in Schedule O	9a		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	1,0b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
- •	form?	11		Х
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		İ	
а	The organization's CEO, Executive Director, or top management official	15a		Х
-		15b		Х
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)	1.4.2		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	100		
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ TX/			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)			
. •	available for public inspection. Indicate how you make these available. Check all that apply	_ Jy	,	
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	reet		
	policy, and financial statements available to the public.	. 031		
20		ne		
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► JAMES M. KENDRIGAN 4400 POST OAK PARKWAY, STE 1400 HOUSTON, TX	702	7	
	713-336-7833			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

01-0572814

- 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. 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons.

| X | Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	ndwidual trustee	institutional trustee	chec Officer	Key employee	ল Highest compensated temployee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
ROBERT C. MCNAIR										,
DIRECTOR/PRESIDENT		Х		Х						
JANICE S. MCNAIR										
DIRECTOR/VP		X	L.	Х						
DANIEL C. MCNAIR										
DIRECTOR/VP		Х		Х						
MELISSA M. REICHERT DIRECTOR		x								
RUTH M. SMITH										
DIRECTOR	1	Х								
SUZANNE THOMAS										
VICE PRESIDENT	1			Х						
SCOTT E. SCHWINGER		1			1			• • •		
VICE PRESI			ļ	Х						
JAMES M. KENDRIGAN										
VICE PRESIDENT	1	1		Х						
JAMEY ROOTES										
VICE PRESIDENT	1			Х						
TONY WYLLIE VICE PRESIDENT				х						
		-		<u> </u>						
		ļ		<u> </u>	_		L_			
										

Part VII Section A. Officers, Directors, Tru	istees, Ke	y Em	plo	ye	es,	and F	lig	hest Compensat	ed Employee	s (conti	nued)
(A) Name and title	(B) Average		ion (chec	C) k all t	that app		(D) Reportable	(E) Reportable		Estir	F) nated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-Mi	s SC)	otl compe fron organ and r	unt of her nsation n the ization elated zations
				-								
			_									
				_								
1b Total	<u> </u>						<u> </u>	<u> </u>				
2 Total number of individuals (including but not reportable compensation from the organization			_	ed a	bov	e) who	o re	eceived more than	\$100,000 in			
3 Did the organization list any former office	or direct		4	ınta	_	kov s		alougo or highes	t			Yes No
employee on line 1a? If "Yes," complete Schede	ule J for su	ch ına	lvid	ual						. -	3	Х
4 For any individual listed on line 1a, is the the organization and related organizations individual	greater th	nan \$	150	0,00	0?	If "Y	es,	" complete Sched	ule J for suc	ch _	4	X
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	e or accr	ue c	omp	oens	satio	on fro	om	any unrelated of	rganization f	or _	5	X
Section B. Independent Contractors	oomproto .	00,,00	<u> </u>		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>01. po</u> .		<u> </u>	 	ــــــــــــــــــــــــــــــــــــــ		
Complete this table for your five highest compensation from the organization.	compensa	ted ir	ndep	ene	dent	con	trac	ctors that receive	d more than	\$100,0	000	of
(A) Name and business add	ress							(B) Description of se	rvices	Com	(C)	ation
							+					
							‡					
							\dagger					
2 Total number of independent contractors (in more than \$100,000 in compensation from the				nite	d to	thos	se I	isted above) who	received			

Par	t VIII	Statement of Revenue	01-0572814						
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
ts s	1a	Federated campaigns 1a							
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b							
	С	Fundraising events 1c 476,860	_	ļ					
gif Ilar	d	Related organizations 1d							
ons, simi	е	Government grants (contributions) 1e	_						
utic ier s	f	All other contributions, gifts, grants,							
t ib		and similar amounts not included above . 1f 504,661	<u>. </u>						
Son	g	Noncash contributions included in lines 1a-1f \$129, 173							
	<u>h</u>	Total. Add lines 1a-1f	_						
nua		Business Cod	e			ļ			
Zev.	2a								
Service Revenue	b								
Ž	¢								
Š	ď								
3rar	е								
Program	f g	All other program service revenue	• 0	<u> </u>		 			
	3		<u> </u>			<u>'</u>			
	3	Investment income (including dividends, interest, and other similar amounts)	0	j					
	4	Income from investment of tax-exempt bond proceeds							
	5	Royalties · · · · · · · · · · · · · · · · · · ·							
	,	(i) Real (ii) Personal	<u> </u>						
	6a	Gross Rents							
	b	Less rental expenses							
	c	Rental income or (loss)							
	d	Net rental income or (loss)	0						
	7a	Gross amount from sales of (i) Securities (ii) Other							
	/ a	assets other than inventory							
	ь	Less cost or other basis			,				
		and sales expenses							
	c	Gain or (loss)							
	d	Net gain or (loss)	0						
ne re	8a	Gross income from fundraising							
e		events (not including \$ 476,860. ATCH 4							
ě		of contributions reported on line 1c)							
E.		See Part IV, line 18							
Other Revenue	Ь	Less direct expenses b				ļ			
0	C	Net income or (loss) from fundraising events . ATCH. 5.	53,708.						
	9a	Gross income from gaming activities. See Part IV, line 19 21, 39							
	١.								
	b c	Less' direct expenses b 46,10 Net income or (loss) from gaming activities ATCH . 6.							
	10a		21,702						
	IVa	Gross sales of inventory, less returns and allowances a			İ				
	ь	Less. cost of goods sold b	7						
		Net income or (loss) from sales of inventory	0						
		Miscellaneous Revenue Business Cod							
	11a								
	ь								
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d	0.						
	12	Total Revenue. See instructions	1,010,527		1				

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) but are not required to complete columns (B), (C), and (D).

	All other organizations must comple	te column (A) but ar	e not required to com	plete columns (B), (C),	and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			1	
	organizations in the U.S. See Part IV, line 21	632,985.	632,985.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				- · · · · · · · · · · · · · · · · · · ·
	organizations, and individuals outside the				
	US See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	0.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		Ì		
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	0.	•		
8	Pension plan contributions (include section 401(k)				
~	and section 403(b) employer contributions)	5,661.		5,661.	
9	Other employee benefits	5,314.		5,314.	
10	Payroll taxes	3,992.		3,992.	
11	Fees for services (non-employees)	,			
	Management	47,384.	İ	47,384.	
	Legal	333.		333.	
	Accounting	7,493.		7,493.	•
	Lobbying	0.			
	Professional fundraising services See Part IV, line 17	0.			· · · · · · · · · · · · · · · · · · ·
	Investment management fees	0.			<u> </u>
g		0.			
12	Advertising and promotion	4,850.			4,850.
13	Office expenses	1,991.		1,292.	699.
14	Information technology	0.		_,	
15	Royalties	0.			
16	Occupancy	8,400.			8,400.
17	Travel	12,405.		2,907.	9,498.
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
10	Conferences, conventions, and meetings	150.		150.	
20	Interest	769.		769.	
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance	0.			
24	Other expenses Itemize expenses not				•
4-7	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
9	CREDIT CARD FEES	4,712.		1,005.	3,707.
_	MERCHANDISE GIVEAWAYS	11,303.		1,066.	10,237.
_	PERMITS AND FILING FEES	21,250.		,	21,250.
	TALENT FEES	18,850.			18,850.
	POLICE ESCORT SERVICES	1,200.			1,200.
	All other expenses	59,408.		3,987.	55,421.
	Total functional expenses. Add lines 1 through 24f	848,450.	632,985.	81,353.	134,112.
	Joint Costs. Check here ▶ If following	,	102,000.	,000.	
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				
JSA					Form 990 (2009)
052 1	000				. 5 556 (2008)

2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(e)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D b Less: accumulated depreciation 11 Investments - publicity traded securities 12 Investments - publicity traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 175, 182, 17 170, 795 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest complete Part II of Schedule D 25 Total liabilities. Add lines 17 through 25, 175, 182, 26 27 Total riabilities. Complete Part X of Schedule D 28 Total liabilities. Add lines 17 through 25, 27 29 Total riabilities. Complete Part X of Schedule D 20 Tax-exempt bond liabilities 20 Total riabilities. Complete Part X of Schedule D 21 Total liabilities. Add lines 17 through 25, 25 28 Total liabilities. Add lines 17 through 25, 25 29 Total liabilities. Add lines 17 through 25, 25 20 Total riabilities. Complete Part X of Schedule D 21 Total liabilities. Add lines 17 through 25, 25 29 Total liabilities. Add lines 30 through 34. 20 Capital stock or trust principal, or current funds 31 Parci-in or capital surplus, or land, building, or equipment fund 31 Parci-in or capital surplus, or land, building, or equ	Pa	rt X	Balance Sheet			
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2 Savings and temporary cash investments		1	Cash - non-interest-bearing	449,850.	1	613,816.
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10 Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D b Less: accumulated depreciation. 11 Investments - publicly traded securities. 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intagnible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses. 175, 182, 17 170, 795 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 10 Tax-exempt bond liabilities 11 Deferred revenue 12 Secured mortgages and notes payable to unrelated third parties 12 Secured mortgages and notes payable to unrelated third parties 12 Total liabilities. Add lines 17 through 25 175, 182, 25 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 170, 795 175, 182, 26 175, 182, 26 170, 795 175, 182, 26 175, 182, 26 170, 795 175, 182, 26 170, 795 175, 182, 26 175, 182, 26 170, 795 175, 182, 26 170, 795 175, 182, 26 170, 795 175, 182, 26 170, 795 175, 182, 26 170, 795 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 27 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182, 26 175, 182,		2	Savings and temporary cash investments		2	
A Accounts receivable, net 116, 061. 4 117, 433.		3			3	
S Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part III of Schedule L S		4	Accounts receivable, net	116,061.	4	117,433.
Schedule L Receivables from other disqualified persons (as defined under section 4958(c)(3)(B). Complete Part II of Schedule L. Notes and loans receivable, net. Inventories for sale or use. Inventories for sale		5	Receivables from current and former officers, directors, trustees, key			
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10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 10c	4	9	Prepaid expenses and deferred charges	9,000.	9	5,000.
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14				- · · -	13	
15 Other assets See Part IV, line 11			, -	•	14	
16					15	
17		_		579,379.		737,319.
18 Grants payable	_			175,182.	17	170,795.
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22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 404,197, 33 566,524	S				21	
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Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 404,197. 32 566,524	Ē		·			
23 Secured mortgages and notes payable to unrelated third parties	ڐ	ŀ			22	
24 Unsecured notes and loans payable to unrelated third parties		23			23	
25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Corganizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that follow SFAS 117, check here ▶ X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 404, 197. 32 566, 524 33 Total net assets or fund balances		24			24	
Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 20 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 20 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 20 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 21 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 21 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 22 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 22 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 23 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 24 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 25 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 26 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 26 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 27 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 30 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 31 Organizations that do not follow SFAS 117, ch		25			25	<u></u>
complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▼ X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 3404,197.33 566,524		26		175,182.	26	170,795.
30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 404,197. 32 566,524 33 Total net assets or fund balances 404,197. 33 566,524	es					,
30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 404,197. 32 566,524 33 Total net assets or fund balances 404,197. 33 566,524	ဋ	27	Unrestricted net assets		27	•
30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 404,197. 32 566,524 33 Total net assets or fund balances 404,197. 33 566,524	3al:	28			28	
30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 404,197. 32 566,524 33 Total net assets or fund balances 404,197. 33 566,524	ᅙ	29			29	
30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 404,197. 32 566,524 33 Total net assets or fund balances 404,197. 33 566,524	or Fur		Organizations that do not follow SFAS 117, check here ▶ X			
		30			30	
	Se	31				
	As	32		404,197	+	566,524.
	Net	33		404,197	+	566,524.
in the contraction of the contra	_	34	Total liabilities and net assets/fund balances	579,379		737,319.

Pa	art XI Financial Statements and Reporting			_
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.		. 3.	ţ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	1	Х
b	Were the organization's financial statements audited by an independent accountant?	2b		X
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?	2c		Ì
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	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
b				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3 b		

SCHEDULE A (Form 990 or 990-EZ)

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. ➤ See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

ization

HOUSTON TEXANS FOUNDATION 01-0572814 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, See section 509(a)(2), (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type II c Type III - Functionally integrated Type III - Other Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(11) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (iii) Type of organization (iv) Is the organization (i) Name of supported (ii) EIN (v) Did you notify (vii) Amount of (vi) Is the organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section col. (i) of your governing document? (i) organized in the (see instructions)) support? US? Yes Nο No Yes

Par	Support Schedule for Org (Complete only if you check	ganizations De ted the box on	escribed in Sealine 5, 7, or 8	ections 170(I of Part I.)	o)(1)(A)(iv) an	nd 170(b)(1)(A	\)(vi)
Sec	tion A. Public Support			· .			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	857,031	672,519	682,594	970,356	981,521	4,164,021
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	857,031	672,519.	682,594.	970,356	981,521	4,164,021
5	The portion of total contributions by each						
	person (other than a governmental unit or				·		
	publicly supported organization) included		,				
	on line 1 that exceeds 2% of the amount				ļ		
	shown on line 11, column (f). ATCH 1						514,120
6	Public support. Subtract line 5 from line 4						3,649,901
Sec	tion B. Total Support				_		
Cale	endar year (or fiscal year beginning in) 🕒 📗	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	857,031.	672,519	682,594.	970,356	981,521	4,164,021
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						4,164,021
12	Gross receipts from related activities, etc (s	ee instructions) .				12	
13	First five years. If the Form 990 is for	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
	organization, check this box and stop here	<u> </u>	<u></u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>		▶
	tion C. Computation of Public Sup						07.65
14	Public support percentage for 2009 (lin						87.65%
15	Public support percentage from 2008						82.96%
16a	331/3% support test - 2009. If the o						
	this box and stop here. The organization	-		•			
b	331/3% support test - 2008. If the o						
	check this box and stop here. The orga						
17a	10%-facts-and-circumstances test - 2	-					
	or more, and if the organization me						
	Part IV how the organization meets t						upported
	organization	. 					▶∟
þ	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga						
	Explain in Part IV how the organization						publicly
	supported organization						▶ 📖
18	Private foundation. If the organizatio	n did not chec	k a box on line	: 13, 16a, 16b	, 17a, or 17b,	check this box	and see

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support			,			
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include					İ	
	any "unusual grants ")						
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						
	ıts behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	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						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	1					
	line 6)	,					
Sec	tion B. Total Support					'	
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	. , ,	, ,				
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources	1					
ь	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11							
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or					İ -	
•-	loss from the sale of capital assets						
	(Explain in Part IV.)		}				
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for	the organizatio	n's first, second,	third, fourth, or	fifth tax year a	as a section 50)1(c)(3)
	organization, check this box and stop here	-			-		· · · · · —
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8	, column (f) divid	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2008 Sche					16	 %
Sec	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2009 (li	ne 10c, column (f) divided by line	13, column (f))		17	%
18	Investment income percentage from 2008					18	%
19a	33 1/3% support tests - 2009. If the o						
	17 is not more than 33 1/3 %, check the	_					. —
b	33 1/3% support tests - 2008. If the org						
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		•	•	•	• • • •	. —
JSA						***************************************	n 990 or 990-EZ) 2009

48,095.

7,974.

133,701.

108,772.

28,292.

46,585.

514,120.

NFL YOUTH FOOTBALL

PHILIP BURGUIERRES

RELIANT ENERGY

VERIZON WIRELESS

WESTIN GALLERIA

TOTAL

WEATHERFORD INTERNATIONAL LTD

SCHEDULE A, PART II - EXCESS CONTRIBUTIONS

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

ATTACHMENT 1

83,280.

83,280.

83,280.

83,280.

83,280.

83,280.

(NOT OPEN TO PUBLIC INSPECTION) CONTRIBUTOR NAME	TOTAL CONTRIBUTION	LESS 2% OF LINE 11(F)	EXCESS CONTRIBUTION AMOUNT
AMEGY BANK	156,625.	83,280.	73,345.
BMC SOFTWARE	87,217.	83,280.	3,937.
COCA COLA	85,396.	83,280.	2,116.
HEB	97,363.	83,280.	14,083.
NFL CHARITIES	130,500.	83,280.	47,220.

131,375.

91,254.

216,981.

192,052.

111,572.

129,865.

1,430,200.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047 Open To Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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.

See separate instructions

ame of the organization					Employer identification	n number
OUSTON TEXANS FOUNDATION					01-0572814	4
Fundraising Activities. Comp Form 990-EZ filers are not re				"Yes" to Form 9	90, Part IV, line	17.
1 Indicate whether the organization raise				activities. Check a	Ill that apply	
a Mail solicitations	е			non-government g		
b Internet and email solicitations	f		_	government grants	3	
c Phone solicitations	g	Spec	ial fundra	ising events		
d In-person solicitations						
2a Did the organization have a written or or key employees listed in Form 990, I	oral agreement w Part VII) or entity	ith any ind in connec	dividual (in tion with p	cluding officers, d rofessional fundra	irectors, trustees ising services?	Yes No
b If "Yes," list the ten highest paid individed to be compensated at least \$5,000 by		fundraiser	s) pursuar	nt to agreements u	under which the fund	draiser is
(i) Name of Individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		υυ. (γ)	
		ļ				
		1				
		-				
		+				
						-
			,			
			L			
Total						
List all states in which the organizatio registration or licensing	n is registered o	or license	d to solic	it funds or has t	peen notified it is	exempt from
rx, 		- -				
						
			-			
				-		

	_	G (Form 990 or 990-EZ) 2009		01-0	5/2814			Page 2
Pa	rt I	Fundraising Events. Complemore than \$15,000 on Form	ete if the organization n 990-EZ, line 6a. Lis	answered "Yes" to Fost events with gross re	orm 990, Part IV, line eceipts greater than	e 18, or \$5,000.	reporte	d
			(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 LUNCHEON (event type)	(c) Other Events 5 (total number)	(add co	otal even ol (a) thro col (c))	
Revenue	1	Gross receipts	322,310.	171,685.	207,069.		701	,064
&		Less: Charitable contributions		138,127.	96,047.		476	,860
	3	Gross income (line 1 minus line 2)	79,624.	33,558.	111,022.		224	,204
	4	Cash prizes						
	5	Noncash prizes			1,923.		1_	, 923
suses	6	Rent/facility costs						
Jirect Expenses	7	Food and beverages						
Dire	8	Entertainment						
	9	Other direct expenses	77,542.	41,393.	49,638.		168	, 573
	11	Direct expense summary Add lines Net income summary. Combine line	3, column (d), and line 1	0				496.) ,708
Pa	rt I	Gaming. Complete if the or than \$15,000 on Form 990-	ganization answered " -EZ, line 6a.	Yes" to Form 990, Pa	art IV, line 19, or repo	orted m	ore	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming		al gaming hrough c	
Re	1	Gross revenue			21,398.		21	, 398
ses	2	Cash prizes						_
Expenses	3	Noncash prizes			25,980.		25	,980
Direct	4	Rent/facility costs				i		
	5	Other direct expenses			20,120. X Yes 100.0000 %	ļ	20	,120
	6	Volunteer labor	Yes%	Yes%	No			
	7	Direct expense summary. Add lines	2 through 5 in column (d)		(46,	100.
	8	Net gaming income summary. Comb	oine line 1, column d, and	d line 7	>			,702
9		nter the state(s) in which the organiza the organization licensed to operate					Yes a	No X
) If	"No," explain QUALIFIED NON-PROFIT ORGA					, u	
	W	REQUIRED TO REGISTER. Vere any of the organization's gaming		ended or terminated duri		<u> </u>	0a	Х
t) If 	"Yes," explain [.] 						
11	D	oes the organization operate gaming	activities with nonmember	ers [?]			1	
12	ls	the organization a grantor, beneficiar	ry or trustee of a trust or					x

ched	ule G (Form 990 or 990-EZ) 2009 01-0572814			F	age 3
			\Box	Yes	No
13	Indicate the percentage of gaming activity operated in:		1	l	
а	The organization's facility	%		ŀ	
	An outside facility	%			
14	Enter the name and address of the person who prepares the organization's gaming/special events boo	ks	Ĭ		
	and records.				
	Name ► MARILAN LOGAN				
	Address ▶ 2 RELIANT PARK, RELIANT STADIUM HOUSTON, TX 77054				
		ļ			
15 a	Does the organization have a contract with a third party from whom the organization receives gami	- 1			v
	revenue?		5a		<u> </u>
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	³			
_	amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:				
C	if res, enter name and address of the third party.		1		
	Name ▶				
	Address ►			•	
16	Gaming manager information:				
	Name ►		ļ		
	Name				ļ
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	Docomption of controct provided p				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
	Is the organization required under state law to make charitable distributions from the gaming proceeds	to			
	retain the state gaming license?	1	7a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organization	ons 🗍	Ţ		

or spent in the organization's own exempt activities during the tax year ▶ \$

SCHEDULEI

OMB No 1545-0047

(Eorm 990)		Grants		Assistance	Grants and Other Assistance to Organizations,	cions,		
	U	Governmen	ents, and	Individuals	its, and Individuals in the United States	l States		2003
Department of the Treasury Internal Revenue Service	ပိ	mplete if the	organization : ▼	n answered "Yes" to F ► Attach to Form 990.	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	line 21 or 22.		Open to Public Inspection
Name of the organization HOUSTON TEXANS I	FOUNDATION					:	Employer identification number $01-0572814$	on number
Part I General Info	General Information on Grants and Assistance	nd Assistan	93					
1 Does the organizati	Does the organization maintain records to substantiate the	substantiate t	he amount of t	he grants or assista	ance, the grantees'	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	or assistance, and	
the selection criteria 2 Describe in Part IV	the selection criteria used to award the grants or assistance?	nts or assistan edures for mo	ice?	e of grant funds in the	ne United States.		- : : : :	Yes ×
Part Grants and	Grants and Other Assistance to Governments	Governmen	ts and Organ	izations in the Ur	ited States. Com	and Organizations in the United States. Complete if the organization answered "Yes" to	tion answered "Ye	ss" to
•	Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	by recipient to (0) if addition	hat received more the	more than \$5,000	O. Check this box in	f no one recipient re	eceived more than	\$5,000. Use
1 (a) Name and address of organization or government	ss of organization	(b) EIN	RC section applicable	(d) Amount of cash grant	(d) Amount of cash grant (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHEDULE ATTACHED				419,298.				EDUCATIONAL, FINANCI
SCHEDULE ATTACHED					213, 687			EDUCATION - YOUTH
2 Enter total number of	Enter total number of section 501(c)(3) and government organizations	d government	organizations				A	80
3 Enter total number of other organizations	Enter total number of other organizations .	Notice see	the Instruction	s for Form 990			▼ · · · · · · · · · · · · · · · · · · ·	Schedule I (Form 990) 2009
in a man to the family of the								

9E1288 2 000

Desemption of Non-Gesh Assistence Wein Perpose Mission

Build healthy spirit, mind, and body for all	Pursuit of excellence in research, education and patient	Carle A home for at-risk children	Dreast Cancer Research	To save lives and end breast cancer forever by empowering people, ensuring quality care for all and energrizing science to find the cures	World hunger relief	Education Sports museum dedicated to preserve Texas	sports history Social Services	Education and advocacy regarding mental health issues	Emergency Relef and Training	Provide comprehensive services to refugees, immigrants	and low-income residents of Harris County Shelter and support services to survivors of domestic and	sexual violence Educaton	Education	Education	Education	Education		Education	Education	Education	Education	Education	Education	Education	Education	Education	Education	Education	Education	Education	Education	Education	Relant Energy Scholarship Recipient - Raquel Kilgore	Reliant Energy Scholarship Recipient - Leroy Seals	* Reliant Energy Scholarship Recipient - Edward Garza	* Reliant Energy Scholarship Recipient - Julia Hatridge	 Relant Energy Scholarship Reciplent - Lindsey Reynolds 	* Reliant Energy Scholarship Recipient - Caroline Suter	* Reliant Energy Scholarship Recipient - Brlejae Huff	* Reliant Energy Scholarship Recipient - Lyndey Hlavaty	To help residents move from a dependency on the welfare	system to seir-sumiciency To help residents move from a dependency on the welfare	system to self-sufficiency	To provide highest quality care to children with neuronizouloskeletal conditions, burn injuries and certain when example to another provident page to another providents.
120,750 74-7109737	100,000 76-0094743	37,500 76-0270942		10,000 76-0360372	10,000 58-2323535	10,000 74-2603242	10.788 74-1167964		2,000	1,000	1,000	1,000	1,000	1,000	200	500	000	200	500	200	000	200	200	200	200	200	500	200	200	200	500	000	1.000 75-6000121		1,000 74-6001399		1,000 75-1305566	1,000 74-6000203	1,000 74-6001399	1,000 74-6000531	875 13-4286816	875 13-3932198		6,000 36-2193608
1600 Louisiana, Houston, TX 77002	1707 Sunset, Houston, 1X 77005	1520 A-AIRLINE DRIVE, HOUSTON, TX 77009		5433 Westheimer #325, Houston, TX 77056	PO Box 23224, Columbia, SC 29224	1108 S University Parks Dr Waco, TX 76706	50 Waugh Drive, Houston, TX 77007-5813	2211 Norfolk Suite 810, Houston, TX 77098	2700 Southwest Freeway, Houston, TX 77001-	0397 6440 Hilcroft, Suite 411, Houston, TX 77081-3104	1010 Waugh Dr, Houston, TX 77019	PO Box 271389, Houston, TX 77277	3200 N Cleveland St., Dayton, TX 77535	6331 Highway Blvd , Houston, TX 77494	13719 White Heather Dr., Houston, TX 77045	397 Vauthler St , La Marque, TX 77568	77381	1201 Henderson Rd , Angleton, TX 77515	2050 Cullen Blvd , Pearland, TX 77581	16825 Spring Cypress Rd , Cypress, 1X 77429	5500 Aug N. Donarbor TV 77471	3300 Ave N , Rosenberg, TA 77471 16713 Fila Blvd Houston TX 77090	PO Box 370. Santa Fe . TX 77510	14703 FM 2100 Rd , Crosby, TX 77532	3501 S Sgy Lucian Addams Dr , Port Arthur, TX	77642 19601 Hwy 6. Mavel. TX 77578	4410 Crenshaw, Pasadena, TX 77504	4400 FM 723 Rd , Richmond, TX 77406	16301 Chimney Rock Rd , Houston, TX 77053	7414 Saint Lo Rd, Houston, TX 77033	1100 Sheldon Rd , Channelview, TX 77530	20950 Fields Store Kd , waller, LA 77464 20811 Flia Blvd Spring TX 77388	PO Box 19199. Admoton. TX 76019	PO Box 10042, Beaumont, TX 77710	31 E Cuilen, Houston, TX 77204	PO Box 30016, College Station, TX 77842	800 West Campbell Rd , Richardson, TX 75080	1 University Station D5200, Austin, TX 78712-	3200 31 E Cullen, Houston, TX 77204	PO Box 30016, College Station, TX 77842	PO Box 14133, Houston, TX 77221	7210 Peerless, Houston, TX 77021		6977 Main St., Houston, TX 77030
Cash Grants: YMCA of Grater Houston	I ne Methodist Hospital Foundation	Boys & Girls Clubs of Greater Houston	Fink Kibbons Project	Susan G Komen for the Cure	Souper Bowl for Caring	Texas Sports Hall of Fame	United Way of Greater Houston	The Mental Health Association of Greater	Houston American Red Cross	Alliance for Multicultural Community Serivce	Houston Area Women's Center	Neighborhood Centers, Inc	Dayton High School	Katy High School	Madison High School	La Marque High School	THE WOODISION FIRM SCHOOL	Angleton High School	Pearland Dawson High School	Cypress Woods High School	Terry Lich School	Vestfeld High School	Santa Fe High School	Crosby High School	Port Arthur Memorial High School	Manyel Mayerick Booster Club	Pasadena Memorial	Foster High School	Willowridge High School	Jones High School	Channelview High School	Waller High School Kilen Colline High School	University of Texas at Arlington	Lamar University	University of Houston	Texas A&M University	The University of Texas at Dallas	The University of Texas as Austin	University of Houston	Texas A&M University	Houston Southside Community Center	Houston Help Inc , dba Corder Place		Shriners Hospital for Children

Donor/Name:	Address	Denetten	ණි(දේම)¢ ධ්යේරෝගේ Desedpton රෝගත≠ Valvetion	Desertptton රේග්මත-පින්න (Assistance) - (Dain Perposs/Alisaton
Touchdown Club	PO Box 7507 The Woodlands, TX 77387	2,000	2,000 74-6088653	Assisting student athletes through weight rooms and
FCA Bush Dinner	1 Riverway Ste 900, Houston, TX 77056	2,000	2,000 44-0610626	scrioiars rilus Youth Athletes Interdenominational ministry
Texas Children's Hospital/Kris Brown's Kick	Texas Children's Hospital/Kris Brown's Kick PO Box 300630 MC4-4483, Houston, TX 77230- Prist	5,500	5,500 74-1100555	Pediactric Hospital
The Andre Johnson Foundation	PO Box 300265, Houston, TX 77230	5,000	5,000 65-6407812	Community supported projects to help youth and families
Impact Player	5553 Desert Gold Cincinnatı, OH 45247	5,000	5,000 20-1189015	To provide emotional, career and financial support for
The DeMeco Ryans Foundation	2900 First Ave S, Ste A, Birmingham, AL 35233	5,000	5,000 26-0336746	wounded and disabled war heroes Create Innovative programs that provide access to
				educational, recreational, & healthy living intlatives for vourth
The Vonta Leach Foundation	PO Box 1720, Fayetville, NC 28302	9,500	5,500 20-8744170	Educational and recreational opportunities to youth in Robeson County
The Dunta Robinson Foundation	394 S Milledge Ave Ste 254, Athens, GA 30605	5,000	5,000 80-0175612	Provides meal and other services to the less fortunate
The Amobi Okoye Foundation	2431 Sara Ridge Ln, Katy, TX 77450	5,000	26-1081588	Programs and services to address the basic needs of
Houston Food Bank	3811 Eastex Freeway, Houston, TX 77026	2,494	30-1134810	Largest source of food for hunger relief chartles in 18 SE counties
Texas Womens Empowerment Foundation	Texas Womens Empowerment Foundation 9516 North Freeway - Houston, TX 77037	2,706	2,706 57-1163486	Mentoring families, from all walks of life, helping them to reach their fullest potential in the areas of personal development, business, education, finances, and socioeconnic development
Heart Sign	740 CR 138, Hutto, TX 78634	3,000	3,000 55-0901456	Supports deaf children and their families through camps,
Baylor College of Medicine	PO Box 203146, Houston, TX 77216	5,000	5,000 76-0417040	reueals and workshops Medical research
Toys for Tots	PO Box 1947, Quanico, VA 22134	2,507	2,507 20-3021444	Provides toys to underprivileged youth
Total Cash Grants		419,298		

Donot-Namo	Denote the second of the secon	30(c)3(c)3(c)3(c)3(c)3(c)3(c)3(c)3(c)3(c)3	Method of	Donations Our * * * * * * * * * * * * * * * * * * *	Dain Runos dulistion
Non-Cash Grants: Men with Divine Purpose	P O BOX 20124, Houston, TX 77225	4,061 11-3814245	Book	Football Tickets, T-shirts	To educate, equip, empower, and expand opportunities to
US Dream Academy	3919 Ward, Houston, TX 77021	15,486 59-3514841	Book	Football Tickets, T-shirts	male vouth from single-parent families To empower children who are at risk of incarceration to maximze their potential by providing them with academic,
The FORGE	3150 Yellowstane, Haustan, TX 77054	8,392 72-0485959	Book	Football Tickets, T-shirts	social and values enrighment through supportive mentoring and the use of technology Support for educational and athletic programs for inner-city
Discovery Youth Foundation	4321 Stonewall, Houston, TX 77020	4,061 20-3538575	Book	Football Tickets, T-shirts	families To movtivate teenagers to discover and devlop their talents and ignite a passion for achlevement and self
Houston Parks and Recreation	604 Sawyer, Houston, TX 77007	8,392 74-6001164	Book	Football Tickets, T-shirts	improvement through a summer program and year round mentorshin Protect, improve and preserve parkland in Houston
Boys & Girls Club-Y ET Centers	1520 Airline, Hauston, TX 77009	8,392 76-0270942	Book	Football Tickets, T-shirts	To inspire and enable all young people to realize their full
Star of Hope	6801 Ardmore, Houston, TX 77054	4,061 74-1152599	Book	Football Tickets, T-shirts	potential as productive citizens To meet the needs of homeless men, women & children
Man of Principle	10223 Broadway, Pearland, TX 77584	4,196 20-4956444	Book	Football Tickets, T-shirts	To provide concepts of life principles, spiritual awareness,
YES Prep Schools	6201 Bonhomme, Ste 168N, Houston, TX 77036	4,196 76-0563835	Book	Football Tickets, T-shirts	and leadership for voung men A public school to serve low-income minority students in 6-
Sunshine Kids	2814 Virginia Street, Houston, TX 77098	4,061 76-0020802	Book	Football Tickets, T-shirts	12 grade To add quality of life to children with cancer by providing
Texas Childrens Hospital	1919 S Braeswood, MC 4-4483, Houston, TX	9,767 74-1100555	Book	Football Tickets, T-shirts	them with aroup activities Provide the highest level of care for children and their
The Rise School	77230 8080 N Stadium, Houston, TX 77054	1,375 76-0606866	Book	Football Tickets, T-shirts	families To provide early childhood education services to children
Casa de Esperanza	P O Box 66581, Houstan, TX 77266	4,061 76-0105306	Book	Football Tickets, T-shirts	win developmental delays as well as to children windut deabilities Provides residential, medical, ad psychological care to
Make-A-Wish Foundation	1604 Bissannet, Hauston, TX 77005	8,392 76-0116615	Book	Football Tickets, T-shirts	meet the needs of children in creisis due to abuse, neglect or HIV/AIDS and offers counseling to the family To grant the wishes of children with life-threatening
Corder Place	7210 Peerless, Houston, TX 77021	4,061 13-3932198	Book	Football Tickets, T-shirts	medical conditions to enrich the human expenence with hose strenath and lov from a dependency on the welfare. To help residents move from a dependency on the welfare.
Shriner's Hospital	6977 Main, Houston, TX 77030	12,453 36-2193608	Book	Football Tickets, T-shirts	system to self-sufficiency To provide highest quality care to children with
Casa Phoenix	6001 Gulf Freeway, Houston, TX 77023	4,061 74-1696961	Book	Football Tickets, T-shirts	neuronusculoskeletal condutors, burn injuries and certain other social health care needs Provides substance abuse treatment to males ages 13-17
Fifth Ward Enrichment Program	4014 Market, Houston, TX 77020 Houston, TX and Surrounding Asses	4,061 76-0485778	Book	Football Tickets, T-shirts Football Tickets T-shirts	To empower youth to become responsible adults
programs YMCA of Greater Houston	1600 Louisiana, Houston, TX 77002	63,216 74-7109737	Book	Football Tickets, T-shirts & Merch	Educational - Youth Build healthy spirt, mind, and body for all
Anderson Academy-Aldine ISD	7401 Wheatley Street Houston, TX 77088	4,500	Book	Giveaway 2 Sony Playstations w/ Game Bike	Education
Bikes given away to youth programs at Christmas	Houston, TX and Surrounding Areas	8,278	Book	Purchase of bikes for donation	Educational - Youth

Total Non-Cash Grants

213,687

01-0572814

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance • (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule 1 (Form 990) 2009 Part IV Part III

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

OMB No 1545-0047

2009
Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HOUSTON TEXANS FOUNDATION

Employer identification number 01-0572814

		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Method o	(d) f determ /enues	ining	i
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							
10	Securities-Closely held stock							
11	Securities-Partnership, LLC,							
	or trust interests							
12	Securities-Miscellaneous	<u> </u>						
13	Qualified conservation							
	contribution-Historic							
	structures							
14	Qualified conservation							
	contribution-Other							
15	Real estate-Residential							
16	Real estate-Commercial							
17	Real estate-Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►(CATERING)	X	1	45,000.				
26	Other ►(FACILITY)	X	1	8,400.				
27	Other ►(CATERING) Other ►(FACILITY) Other ►(GAME TICKETS)	Х	521	49,783.	_			
28	Other ► (MEAT SMOKER)	Х	1	25,980.	FMV			
29	Number of Forms 8283 received b	y the organi	zation during the tax year for	or contributions for				
	which the organization completed I				29			
							Yes	No
30 a	During the year, did the organiza	ition receive	by contribution any prope	erty reported in Part I, lin	e 1-28 that	:	ŀ	
	it must hold for at least three year	irs from the	date of the initial contribu	ition, and which is not re-	quired to be			
	used for exempt purposes for the e	ntire holding	period?			30a		Χ
b	If "Yes," describe the arrangement	in Part II						
31	Does the organization have a	gift accept	ance policy that require	s the review of any r	non-standard			
	contributions?					31		Χ
32a	Does the organization hire or use	e third parti	es or related organization	s to solicit, process, or s	sell noncash			
	contributions?					32a	_	Χ
b	If "Yes," describe in Part II							
33	If the organization did not report re	evenues in c	olumn (c) for a type of pro	perty for which column (a)) is chacked	1 1		

describe in Part II

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

OMB No 1545-0047 2009 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HOUSTON TEXANS FOUNDATION

Employer identification number

01-0572814 ATTACHMENT 2

PART VI, SEC. C, Q. 19

THE HOUSTON TEXANS FOUNDATION GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

ATTACHMENT 3

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE HOUSTON TEXANS FOUNDATION IS COMMITTED TO ENCOURAGING AND ENABLING ALL YOUTH AND FAMILIES IN HARRIS COUNTY TO REACH THEIR FULL POTENTIAL AND TO ACHIEVE SUCCESS. IT SEEKS TO ASSIST THROUGH EDUCATIONAL, FINANCIAL, VOLUNTEER AND COLLABORATIVE SUPPORT. THE FOUNDATION ADMINISTERS PROGRAMS THAT DEVELOP STRONG MINDS AND BODIES, WITH AN EMPHASIS ON LEADERSHIP, INTEGRITY AND CHARACTER FOR THE YOUTH WHO WILL BECOME THE LEADERS OF THE NEXT GENERATION.

FORM 990, PART III, LINE 4D - OTHER PI	ROGRAM SERVICES	ATTACHI	MENT 4
DESCRIPTION	GRANTS	EXPENSES	REVENUE
RELIANT SCHOLARSHIPS	7,000.	7,000.	
MENTAL HEALTH ASSOCIATION OF GREA	10,000.	10,000.	
PINK RIBBON PROJECT	21,803.	21,803.	
COACH OF THE WEEK	12,000.	12,000.	
UNITED WAY OF GREATER HOUSTON	10,788.	10,788.	
SOUPER BOWL OF CARING	10,000.	10,000.	

Name of the organization
HOUSTON TEXANS FOUNDATION

Employer identification number 01-0572814

ATTACHMENT 4 (CONT'D)

FORM 9	990,	PART	III,	LINE	4D -	OTHER	PROGRAM	SERVICES
--------	------	------	------	------	------	-------	---------	----------

DESCRIPTION	GRANTS	EXPENSES	REVENUE
RACE FOR THE CURE	10,000	10,000	
TEXAS SPORTS HALL OF FAME	10,000	10,000	
OTHER EDUCATIONAL & MEDICAL ORGANIZATIONS	211,536	211,536	
TOTALS	303,127	303,127	

ATTACHMENT 5

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT
GAME DAY AUCTIONS	46,174.
GOLF TOURNAMENT	242,686.
TEAM LUNCHEON	138,127.
OTHER EVENTS (BOWLING, MAG)	49,873.
TOTAL	476,860.

ATTACHMENT 6

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
GAME DAY AUCTIONS	17,441	13,156	4,285
GOLF TOURNAMENT	79,624	77,542	2,082
TEAM LUNCHEON	33,558	41,393	-7,835
OTHER EVENTS (BOWLING, MAG)	93,581	38,405	55,176
TOTALS	224,204	170,496	53,708

Page 2

Name of the organization Employer identification number HOUSTON TEXANS FOUNDATION 01-0572814 ATTACHMENT 7 FORM 990, PART VIII - GAMING ACTIVITIES GROSS DIRECT NET DESCRIPTION INCOME EXPENSES INCOME -24,702 SMOKER RAFFLE 21,398 46,100 TOTALS 21,398 46,100 -24,702 ATTACHMENT 8 FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES ENDING BOOK VALUE DESCRIPTION 5,000. PREPAID TRANSPORTATION CHARGE DEPOSITS TOTALS 5,000.

SCHEDULE R (Form 990)

HOUSTON TEXANS FOUNDATION

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37.
 ★ Attach to Form 990.

2009	Open to Public

OMB No 1545-0047

Employer Identification number

01-0572814

Part I	Identification of Disregarded Entities (Complete if the organization	the organization answered "Yes" on Form 990, Part IV, line 33.)	ו Form 990, Part	t IV, line 33.)		
	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
1 1 1						
Part II	Identification of Related Tax-Exempt Organizations (Complete if that one or more related tax-exempt organizations during the tax year	(Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it uring the tax year.)	wered "Yes" on	Form 990, Part I	V, line 34 becaus	ë it
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity
1 1 1						
						•
For Privacy	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.				Sched	Schedule R (Form 990) 2009

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009 Yes No managing partner? (h) Percentage ownership General or Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) 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 partnership during the tax year.) (g) Share of end-of-year assets 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.) (h) Disproportonsis altocatons? Š Yes (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp,
or trust) (f) Share of total income (d) Direct controlling Predominant income (related, unrelated, excluded from tax under sections 512-514) (state or foreign country) (c) Legal domicile (d)
Direct controlling
entity (b) Primary activity (c)
Legal
domicile
(state or
foreign (a)Name, address, and EIN of related organization (b) Primary activity (a) Name, address, and EIN of related organization Part III Part IV

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.) Schedule R (Form 990) 2009 Part V

2			Yes
Ž -	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. In 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?		大き 大き 大き
	Receipt of (ii) interest (iii) annuities (iii) rovalties or (iv) rent from a controlled entity	•	1a
0			1b
י נ			10
ν τ			1d
3 G			10
)			2, 2,
-	Sale of assets to other organization(s)		¥
D			19
_	Exchange of assets		1 h
-	Lease of facilities, equipment, or other assets to other organization(s)		=
			A Property of the Property of
-	Lease of facilities, equipment, or other assets from other organization(s)		
¥	Performance of services or membership or fundraising solicitations for other organization(s)		¥ ;
-	Performance of services or membership or fundraising solicitations by other organization(s)		F
Ε	Sharing of facilities, equipment, mailing lists, or other assets.		1 m
_	Sharing of paid employees		- T
			g
0	Reimbursement paid to other organization for expenses		10
Ω			1p
•			Topic Services
σ	Other transfer of cash or property to other organization(s)		19
-			11
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	and transaction thres	olds.
	(a) Name of other organization (b) Name of other organization	n Amount involved) involved
Ξ			
Ś			
3			
9			
9			
9			
		Schedule R	Schedule R (Form 990) 200

01-0572814

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Schedule R (Form 990) 2009

Part VI Unrelated Organiza

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

gloss revenues una was not a reface organization occurrences regarding containing to the filtre (d)	(a)	(c) Legal domicile	(d) Are all partners	1	(f) Disproportion	(g) Code V-UBI	(h) General or
אמוופ, מסטיסט, מוס בוא טו פוטיץ	בוווופול פכוועול	(state or foreign country)	section 501(c)(3) organizations?	end-of-year assets	allocations?		
			Yes No		Yes	ı —	Yes No
HOUSTON NFL HOLDINGS, LP TWO BELLIANT DARK HOLISTON TX 77054	PROF SPORTS	×	×			×	×
	İ						
							_
							-
		; ; ;				Schedule R (Form 990) 2009	، 990) 2009