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DLN: 93493045007074

Form **990**

Department of the Treasury Internal Revenue Service

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)

2012

OMB No 1545-0047

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

A Fo	r the	2012 cal	endar year, or tax year beginnir	ng 06-01-2012 , 2012, and endin	g 05-31-	2013					
3 Che	eck ıf a	applicable	C Name of organization Garden Club of Houston				D Employ	yer iden	tification number		
_	dress ch	_	Doing Business As				76-00	08423			
_	me cha	_									
_	ial retu		Number and street (or P O box if it 4212 San Felipe Box 486	mail is not delivered to street address) R	oom/suite	!	E Telepho	ne numb	er		
_	mınate 		· ·				(713)	498-45	513		
_	ended		City or town, state or country, and Houston, TX 77027	ZIP + 4							
App	olication	n pending					G Gross re	eceipts \$	340,931		
			F Name and address of pro Debbie Robinson	ncipal officer		H(a) Is th		return 1	for □ Yes 🔽 No		
			4212 San Felipe Box 486			annie	ites.		1 1631 140		
			Houston,TX 77027						ed?		
[Ta:	x-exem	npt status	✓ 501(c)(3)	(Insert no) 4947(a)(1) or 527	,	If "N	o," attach	a list (see instructions)		
w	ebsite	e: ► ww	w gchouston org			H(c) Grou	ıp exemptı	on num	ber ►		
			Corporation Trust Associati			L Vanuat fa	rmation 192	24 M	State of legal domicile T		
	rt I		mary	on pouler p		L fear of to	imation 192	24 M 3	state of legal doffficile 1.		
				on or most significant activities							
		The mis	sion of the Garden Club of Hous	ton is to stimulate the knowledge		_			the quality of the		
11	!	environn	nent through programs and acti	on in the fields of education, conse	ervation	<u>, and civic i</u>	mproveme	nt			
aovemanice	.										
5											
2] , ;	Chack th	are how b . If the eventuation d	recentinged its energtions or disp	acad af	mara than 3	FO/ of the		ata		
5		Check ti	is box 🖣 II the organization d	iscontinued its operations or disp	osea oi	more than 2	5% 0116	net ass	ets		
	3	Number	of voting members of the gover	ning body (Part VI, line 1a)				з			
ACIIVIIES Q			Number of voting members of the governing body (Part VI, line 1a)								
É			Total number of individuals employed in calendar year 2012 (Part V, line 2a)								
Ę				necessary)				6	36		
•				Part VIII, column (C), line 12				7a			
				from Form 990-T, line 34				7b			
				,		Pric	or Year		Current Year		
	8	Contri	butions and grants (Part VIII. I	ıne 1h)			168,9	43	171,117		
₫	9			Ine 2g)			318,8		167,147		
Rayenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)						40	2,667		
2	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						38	_,		
	12			L (must equal Part VIII, column (/							
				<u> </u>			488,8		340,931		
	13		·	t IX, column (A), lines 1-3).			443,1	.68	194,812		
	14		ts paid to or for members (Part				(
ø	15	Saları 5–10)	es, other compensation, employ				(
<u>3</u>	16a		, sional fundraising fees (Part IX								
æ	l .				• •						
Ω	1						285 3	4.5	255 960		
					-						
x 27	1	- KCVCII	de less expenses subtract line	10 110111111111111111111111111111111111	• • •	Beginnin		-			
2							'ear		End of Year		
3 TE	20	Total	assets (Part X, line 16)				576,6	19	471,700		
E	21	Total	liabilities (Part X, line 26) .						(
	22		sets or fund balances Subtrac	t line 21 from line 20			576,6	19	471,700		
Par	rt II	Sign	ature Block								
Not Assets of Expenses Fund Balances	b 17 18 19	Total fu O ther Total o Reven	ndraising expenses (Part IX, column (I expenses (Part IX, column (A), expenses Add lines 13–17 (mi ue less expenses Subtract line	25)			13 16 nt	255,9 450,7 -109,8 End of Year 471.7			
2 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	20	Total	assets (Part X, line 16)				576,6	19	471,70		
Ē							576 <i>.</i> 6	19			
				time 21 nom mie 20	• •	L	3,0,0		7/1,/00		
				camined this return, including acco	ompanyı	ng schedule	es and stat	tements	s, and to the best of		
	rer ha	as any ki	nowledge	mplete Declaration of preparer (o	ther tha	20	014-02-14 ate	all infor	mation of which		
lere		'	on Bryan Treasurer								
· `	-		on Bryan Treasurer or print name and title								
		<u> </u>	Print/Type preparer's name	Preparer's signature	Dat	e Cha	eck 🔽 ıf	PTIN			
Paid	4	J	ody Blazek	,		I CITE	eck J✔ If -employed	P000726	574		
		F	ırm's name 🕨 Blazek & Vetterling				n's EIN 🕨				
	pare		irmis address - 2000 W1 C	200			no no /740	120 57	20		
Jse	On	ly ⁻	Firm's address 🟲 2900 Weslayan Suite	200		Pho	ne no (713)	439-57	לכ		
			Houston, TX 770275	132							

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

) (Revenue \$

78,963 including grants of \$

407,168

(Expenses \$

Total program service expenses ►

Part IV	Checklist of	f Reauired	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^{22}	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
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	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	990 (2012)			Page
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
	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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $\$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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</i> "Yes," complete Schedule R, Part I	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
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	Yes	

Le Extert the number reported in Box 3 of Form 1096 Exter 10-4 finds applicable 1		Check if Schedule O contains a response to any question in this Part V	•	Yes	No
be Enter the number of Form W-2G included in line 1s Enter-Orlinat approaches Did the organization carnity with backup withholding piles for reportable payments to vendors and reportable gaming (gamburg) amongs to proze winters? 2 Enter the number of employees reported on Form W-3. Transmittal of Wape and Tax Satisments, filed on the calendar year ending with or within the year occeed by this return. 3 If all least one is reported on line 2s, did the organization of selection of the calendar year ending with or within the year occeed by this return. 4 If a sum of lines 1 and all as is greater than 25, you may be required to e-file, cele instructions? 3 Did the organization have uncelsted business gross income of \$1,000 or more sum on the year? 3 a. If If Yes, his infect a form 990. If the his year? If Yim, formouse a celeptation on School or. 4 At any time during the calendar year, did the organization have an interest in an a significant or other nationally over, a financial account in a foreign country. 5 See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 Was the organization approach or a perhy to a prohibited lax shelter transaction at any time during the lax year? 5 See 1 If Yes, to line 5 a or 5b, did the organization file Form 6086-T? 6 Did be the arganization have annual gross receipts their are formally preserved as \$100,000, and did the organization solic any contributions that they receive deductible organization is described by the properties of the organization and solic any contributions where the schedulations is characteristic and the organization and partly for goods and services provided to the organization motify the donor of the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). 9 Of the organization received a contribution of cess, boats, airplaces, or other vehicles, did the organization of the payor? 10 If Yes, if and the organization in return of	1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1		1 65	IAC
Did the organization comply with backup withfulding rules for reportable payments to vendors and reportable gaming (gaminting) winnings to prace winners? 2 Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, field of the calendar yeer ending with or within the vear covered by this return. 5 If all the organization has earlied and a second or form W-3. Transmittal of Wage and the second of the second of the second or th					
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Tax Statements, field for the calendar year ending with or within the year covered by this return. If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3b. If it responses to the organization have unrelated business gross income of \$1,000 or more during the very? 4c. If it responses the dear form 990-T for this year? If No." provide an organization in Schedule 0. 4c. At any time during the calledary vear, did the organization have an interest in, or a signature or other financial secount, and the count in a foreign country. Is account, seconds or the financial secount in a foreign country. 5c. Was the organization a party to a prohibited tax shelter transaction of Fining requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5c. Was the organization aparty to a prohibited tax shelter transaction at any time during the tax shelter transaction? 5c. Was the organization and the foreign country. 5c. Was the organization and the foreign country. 5c. Was the organization and the foreign country. 5c. Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions in the Term 8886-T? 5c. If Yes, I all the organization necled with every solicitation an express statement that such contributions or gifts were not tax desocrable? 5c. If Yes, I all the organization necled with every solicitation an express statement that such contributions or gifts were not tax desocrable? 6c. If Yes, I all the organization necled we have yes oblication an express statement that such contributions or gifts were not tax desocrable? 7c. If Yes, I all the organization necleve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to		gaming (gambling) winnings to prize winners?	1c	Yes	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 50, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes, 1 has it filed a form \$90.T for this year? If Yes, 7 provide an explanation in Schedule 0. 3b If Yes, 1 has it filed a form \$90.T for this year? If Yes, 7 provide an explanation in Schedule 0. 3c A tax y time during the calendary year, did the organization have an interest in, or a significant or other financial accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over a financial accounts of the fina	2a	Tax Statements, filed for the calendar year ending with or within the year covered			
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b If "Yes," that it filled a Form 990. T for this year? If 'No," provide an explanation in Schedule 0 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority account?) b If "Yes," enter the name of the foreign country: See instructions for hing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts 5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6d Doss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization bear annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization base annual gross receipts that are normally greater than \$100,000, and did the organization of the deductible contributions ander section \$100(c). 7 Organizations that may receive deductible contributions under section \$100(c). 8 Did the organization merceive greater than \$100,000, and the section \$100(c). 9 Did the organization merceive greater than \$100,000, and the section \$100(c). 9 Did the organization flore that greater than \$100,000, and the section \$100(c). 9 Did th		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2Б		N
49 A At any time during the calendar year, dut 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 accounts) 1 If "Yes," enter the name of the foreign country 5 See instructions for filing requirements for form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 See instructions for filing requirements for form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 Was the organization a party to a prohibited tax shelter transaction? 5 Was the organization are annual gross receipts that are normally greater than \$1.00,000, and dut the organization solicit any contributions that were not tax deductible as charitable contributions? 6 If "Yes," did the organization fulled with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 1 If "Yes," did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 1 If "Yes," and ded the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 1 If "Yes," did the organization include on the value of the goods or services provided? 1 If "Yes," indicate the number of forms 8282 filed during the year or gifts of the organization file form 8599 as required? 2 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 3 If the organization rec	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts by If "Yes," indirect the name of the foreign country. See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See Instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See Instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See Instructions for filing requirements that it was one a party to a prohibited tax shelter transaction? 50 Did any taxable party notify the organization that it was one as a party to a prohibited tax shelter transaction? 51 Did any taxable party notify the organization that it was one as a party to a prohibited tax shelter transaction? 52 Did by the second shelt any contributions that it was one as a party to a prohibited tax shelter transaction? 53 Did Instruction See the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt any receipts that are normally greater than \$100,000, and did the organization shelt any receipts that are normally greater than \$100,000, and did the organization shelt any receipts that the number of Foreign Sees (\$100,000,000). 52 Did the organization that the average of the sees of \$150,000 and experty sees a contributions or quits seen to tax deductible? 53 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 54 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 55 Did the organization funds, directly or indirectly, to pay premiums on a personal benefit contract? 56 Did the organization maintaining door edvised funds and section \$90(3) supporting organizations. Did the organizations maintaining			3b		N
account)? If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts So Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So Dos the organization have annual gross receipts that are normally greater than \$10,000, and did the organization shart were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts where not tax deductible? Organizations that may receive deductible contributions under section 170(c). If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," indicate the number of Forms \$282 filed during the year. 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? Did the organization sell, exchange, or otherwise dispose of trangible personal property for which it was required to file Form \$282 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations make any taxable distribution so under section 4966? Sponeso	4a				
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5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "yes," to line 5a or 5b, did the organization file form 8886-T? 5c So Does the organization have annual gross receipts that are normally greater than \$100,000, and did 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? 5c If "Yes," idd the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? b If "Yes," idd the organization on bifty the donor of the value of the goods or services provided? 7 Did the organization of the donor of the value of the goods or services provided? 7 Did the organization of the more of forms \$282 filed during the year. 7 To the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 9 If the organization received a contribution of qualified intellectual property, did the organization is a Form 1938-C? 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor	Ь	If "Yes," enter the name of the foreign country			
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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? b If "P'es," did the organization sulfy the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of fangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year . 7d	b		6b		
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C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$2.82? d If Yes," indicate the number of Forms \$2.82 filed during the year		Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
file Form 8:282?	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
by Comparization make any taxable distributions under section 4966? by Did the organization make any taxable distributions under section 4966? by Did the organization make any taxable distributions under section 501(c)(27) organizations. Enter a Gross income from members or shareholders by Gross income from members or shareholders corrected the first fi	c				
b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c					IN
contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds 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? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders b Gross income from members or shareholders b 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) 112a Section 501(c)(12) organizations. Enter 11b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organiza	u	Ti res, indicate the number of Forms 8282 med during the year			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	e				
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Th If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Or a did the organization organization and in the supporting organization and onor advised fund an antalined by a sponsoring organization. Did the supporting organization, or a donor advised fund an antalined by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization section for advised funds. 10 Did the organization flower section 4966? 11 Did the organization is licensed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Schedule O 12 Did the organization is licensed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health	_				N
required?					IN
Form 1098-C?	y				N
the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	h		7h		N
business holdings at any time during the year?	8				
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?			Ω		N
a Did the organization make any taxable distributions under section 4966?	9	Sponsoring organizations maintaining donor advised funds	_		14
b Did the organization make a distribution to a donor, donor advisor, or related person?	_		9a		N
a Initiation fees and capital contributions included on Part VIII, line 12			9b		N
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	10	Section 501(c)(7) organizations. Enter			
facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
a Gross income from members or shareholders	b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11	Section 501(c)(12) organizations. Enter			
against amounts due or received from them)	а	Gross income from members or shareholders			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	· · · · · · · · · · · · · · · · · · ·			
year	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand	b	- 1401			
Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand	L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а		13a		N
In which the organization is licensed to issue qualified health plans	L				
	U	' land			
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a N	c	Enter the amount of reserves on hand			
	14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N

_				
Se	ction A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 7		res	110
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who 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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,	_	Yes	
8	or persons other than the governing body?			
a	year by the following The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13		No
L 4	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
L6a	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			•
L7	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of

 $State\ the\ name,\ physical\ address,\ and\ telephone\ number\ of\ the\ person\ who\ possesses\ the\ books\ and\ records\ of\ the\ organization$

interest policy, and financial statements available to the public during the tax year

►Sharon Bryan 2938 Del Monte Houston, TX (713)498-4513

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's

- 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, or 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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
(1) Ellen Donnelly Past President	5 00	х		х				0	0	0
(2) Marjorie Crawford	0 00 5 00									
Correspond Sec	0 00	Х		х				0	0	0
(3) Liz Wozencraft	5 00									
Recording Sec	0 00	Х		X				0	0	0
(4) Sharon Bryan	15 00	,,		\ ,				0	0	-
Treasurer	0 00	Х		Х				0	0	0
(5) Laurie Liedtke	10 00	x		Х				0	0	0
2nd Vice Pres	0 00	^_								
(6) Sue White	30 00	х		×				0	0	0
1st Vice Pres (7) Debbie Robinson	0 00									
	40 00	х		х				0	0	0
President	0 00									
-										
										_
					<u> </u>	<u> </u>				Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					5	(D) Reportable compensation from the organization (W-		(E) Reportable compensation from related organizations (W-		(F) Estima imount o compens from t	ited f other sation
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	_	Highest compensated employee	Former	2/1099		2/1099-MISC		rganızatı relate organıza	ed
	Cub Tabal													
1b c d	Total from continuation sheet Total (add lines 1b and 1c) Total number of individuals (in	<u></u>						► ►	ho receive	ud more th	an			
	\$100,000 of reportable compe	-											Yes	No
3	Did the organization list any fo on line 1a? <i>If</i> " <i>Yes," complete</i> S					key •	emplo	yee, •	, or highes	t compen	sated employee	3	1.00	No
4	For any individual listed on line organization and related organ individual											4		No
5	Did any person listed on line 1 services rendered to the organ										or individual for	5		No
<u> </u>	ection B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization from the organizati	ve highest comp											tax year	
	N	(A) Name and business	address							Des	(B) cription of services		(C Comper	
2	Total number of independent co	ntractors (inclu	ding but	not	lımıt	ed to	thos:	e list	ted above)	who rece	ıved more than			

\$100,000 of compensation from the organization $\blacktriangleright 0$

Part V		Statement of Revenue Check if Schedule O contains a response to any question	ın this Part VIII .			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 2	1a	Federated campaigns 1a				
ant	b	Membership dues 1b 77,665				
Gr.	С	Fundraising events 1c				
ffs, ir A	d	Related organizations 1d				
. Gi	e	Government grants (contributions) 1e				
ms, Sin	-	——————————————————————————————————————				
Contributions, Gifts, Grants and Other Similar Amounts	T	All other contributions, gifts, grants, and similar amounts not included above 93,452				
di þ	g	Noncash contributions included in lines 1a-1f \$		ĺ		
on, nd	h	Total. Add lines 1a-1f	171,117			
C		Business Code				
ппе	2a	Plant & bulb mart 900004	167,147	167,147		
evel	b	30001	107,117	107,117		
e B	С					
ir vic	d					
Š	е					
Program Serwce Revenue	f	All other program service revenue				
Ρζ	q	Total. Add lines 2a-2f	167,147			
	3	Investment income (including dividends, interest,	·			
		and other similar amounts)	2,667			2,667
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	Ŭ			
	6a	Gross rents (1) Kedi (11) Fersonal				
	b	Less rental				
	С	expenses Rental income				
	d	or (loss) Net rental income or (loss)	0			
		(I) Securities (II) Other				
	7a	Gross amount from sales of				
		assets other than inventory				
	b	Less cost or				
		other basis and sales expenses				
	С.	Gain or (loss)	0			
	d 8a	Net gain or (loss)	0			
enne	Ou .	events (not including \$ of contributions reported on line 1c)				
Other Revenue		See Part IV, line 18				
,th.		Less direct expenses b	_			
0	C	Net income or (loss) from fundraising events	0			
	9a	Gross income from gaming activities See Part IV, line 19 a				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances .				
	b	Less cost of goods sold b				
		Net income or (loss) from sales of inventory	0			
		Miscellaneous Revenue Business Code				
	11a					
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	0			
	12	Total revenue. See Instructions ▶	340,931	167,147		2,667

		Statement of Functional Expenses				
ectio	n 501	L(c)(3) and $501(c)(4)$ organizations must complete all columns. All	other organizat	ions must comp	olete column (A)	
	(Check if Schedule O contains a response to any question in this Par	t I X			<u> </u>
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		ts and other assistance to governments and organizations e United States See Part IV, line 21	194,762	194,762		
2		ts and other assistance to individuals in the ed States See Part IV, line 22	50	50		
3	orgar	ts and other assistance to governments, nizations, and individuals outside the United es See Part IV, lines 15 and 16	0			
4	Bene	fits paid to or for members	0			
5		pensation of current officers, directors, trustees, and employees	0			
6	(as d	pensation not included above, to disqualified persons efined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)	0			
7	Othe	r salarıes and wages	0			
8		ion plan accruals and contributions (include section 401(k) 03(b) employer contributions)	0			
9	Othe	r employee benefits	0			
10	Payro	oll taxes	0			
11	Fees	for services (non-employees)				
а	Mana	gement	0			
b	Legal	l	0			
С	Acco	unting	2,600		2,600	
d	Lobby	yıng	0			
e	Profe	ssional fundraising services See Part IV, line 17	0			
f	Inves	stment management fees	0			
g	colun	r (If line 11g amount exceeds 10% of line 25, nn (A) amount, list line 11g expenses on dule O)	11,147	11,147		
12		ertising and promotion	12,756	6,378		6,378
		e expenses	3,211	0,370	3,211	0,570
14		mation technology	300		300	
15		Ities	0		300	
16	-	ipancy	4,044	4,044		
17		el	11,027	11,027		
18	Paym	nents of travel or entertainment expenses for any federal,	0	11,027		
19		erences, conventions, and meetings	40,397	30,730	9,667	
20		est	0			
21		nents to affiliates	17,999	13,499	4,500	
22	Depre	eciation, depletion, and amortization	0			
23	Insur	rance	0			
24	misc	r expenses Itemize expenses not covered above (List ellaneous expenses in line 24e If line 24e amount exceeds 10% e 25, column (A) amount, list line 24e expenses on Schedule O)				
а	News	letter/directory	11,080		11,080	
b	Great	t Small Trees Project	14,613	14,613		
c	Bulb	mart	24,380	18,822	5,558	
d	Bulb	and plant material	98,596	98,596		
e	Allot	ther expenses	3,810	3,500	310	
25	Total	functional expenses. Add lines 1 through 24e	450,772	407,168	37,226	6,378
26	repor educa	costs. Complete this line only if the organization ted in column (B) joint costs from a combined ational campaign and fundraising solicitation Check				

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X	(A) Beginning of year		· · · · · · · · · · · · · · · · · · ·
	1	Cash—non-interest-bearing	2,862	1	43.676
	2	Savings and temporary cash investments	573.757	2	428,024
	3	Pledges and grants receivable, net	575,757	3	0
	4	Accounts receivable, net		4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key			
	5	employees, and highest compensated employees Complete Part II of Schedule L		5	0
ets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
Assets	7	Notes and loans receivable, net		7	0
₹	8	Inventories for sale or use		8	0
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation		10c	0
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	570.040	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	576,619	16	471,700
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
8	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabili		persons Complete Part II of Schedule L		22	
⊐	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
		D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
S D O		Organizations that follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 27 through 29, and lines 33 and 34.			
B	27	Unrestricted net assets		27	
ස ස	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	_
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 30 through 34.			
S)	30	Capital stock or trust principal, or current funds		30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds	576,619	32	471,700
ĕ	33	Total net assets or fund balances	576,619	33	471,700
2	34	Total liabilities and net assets/fund balances	576,619	34	471,700

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			দ
1	Total revenue (must equal Part VIII, column (A), line 12)		3	340,931
2	Total expenses (must equal Part IX, column (A), line 25)		4	150,772
3	Revenue less expenses Subtract line 2 from line 1		- 1	109,841
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			76,619
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O) 9			4,922
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10		2	171,700
Par	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			. 区
			Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other Hybrid If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed o a separate basis, consolidated basis, or both	١		
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	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 Consolidated basis Both consolidated and separate basis			
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?	e 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a		No
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 in Schedule O and describe any steps taken to undergo such audits	3b		

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As Filed Data -

DLN: 93493045007074

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Garden Club of Houston

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.

Inspection

									76-00084		
	rt I			blic Charity Sta						structions	i
The	organı	zatıon ıs	not a privat	e foundation becaus	eitis (Forl	ınes 1 throu	ıgh 11, check	only one be	ox)		
1	Г	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(l	o)(1)(A)(i).		
2	Γ	A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Schedı	ule E)				
3	Γ	A hosp	ital or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).		
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1)(A)(iii). i	Enter the
_	_	hospita	al's name, ci	ty, and state							
5	ļ	_	n organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
	_			A)(iv). (Complete P	•						
6				local government or	_						
7	Г			at normally receives			support from	a governme	ntal unit or fr	om the gen	eral public
8	_			on 170(b)(1)(A)(vi). described in sectior			nnlata Dart II	`\			
9	 -		•	at normally receives			•	•	uitions maml	harabın faa	and groce
9	١,٠	_		ities related to its ex					•	-	-
		•		oss investment inco	· ·	=					
		•		ganization after June				•		tax) II o III bi	1511165565
10	_	-	-		•			•	-		
10	<u> </u>	_		ganized and operated	•		•		. , . ,		Ab
11	ı			ganized and operated ly supported organiz							
				bes the type of supp						oc section :	oos(u)(s). eneek
				b						n-function	ally integrated
e	Γ	By che	cking this b	ox, I certify that the	organization	ıs not conti	rolled directly	or indirectl	y by one or m	nore disqua	lified persons
				on managers and ot	her than one	or more pub	olicly support	ed organızat	ions describe	ed in sectio	n 509(a)(1) or
_			1509(a)(2)	received a western d	. t . rm . n . t n	from the ID	C that it is a	Tune I Tun	a II am Tuna	III aunnart	una orannization
f			this box	received a written de	etermination	nom the 1K	5 tilat it is a	Type I, Typ	e II, oi i ype	III Support	
g				2006, has the organi	ızatıon accep	ted any gift	or contribution	on from any	of the		,
			ng persons?								
		., .		irectly or indirectly o	•		J	persons des	scribed in (ii)		Yes No
		•		governing body of th		5	u,			119	
			•	er of a person descr						11g	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g	(iii)
h		Provide	e the follown	ng information about	the supporte	ed organizat	ion(s)				
			ı	T	T		T		T		T
	i) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you		(vi) Is t		(vii) A mount of
	suppor rganiza			organization (described on	organızatı col (i) lıst		the organiz		organizati col (i) orga		monetary support
O.	guinz	acion		lines 1- 9 above	your gove		suppor		in the U		Зарроге
				or IRC section	docume	_					
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
Toto			l			1					

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
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							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	246,625	108,230	120,745	168,943		171,117	815,660
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	237,938	307,483	243,974	318,852		167,147	1,275,394
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0
6	Total. Add lines 1 through 5	484,563	415,713	364,719	487,795		338,264	2,091,054
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	19,970	13,625	12,200	6,750		6,425	58,970
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							0
c	Add lines 7a and 7b	19,970	13,625	12,200	6,750		6,425	58,970
8	Public support (Subtract line 7c from line 6)	·	·	·	·			2,032,084
Se	ction B. Total Support							
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2000	(c) 2010	(d) 2011	(e) 20	12	(f) Total
		(u) 2000	(0) 2009					
9	in) ► A mounts from line 6	484,563	(b) 2009 415,713	364,719	487,795	(6) 20	338,264	2,091,054
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					(6) 20		
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after	484,563	415,713	364,719	487,795	(6) 26	338,264	2,091,054
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	484,563	415,713	364,719	487,795	(6) 26	338,264	2,091,054 26,259
t b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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	484,563 7,115	415,713 8,395	364,719 5,042	487,795 3,040	(c) Zc	2,667	2,091,054 26,259 0
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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	484,563 7,115	415,713 8,395	364,719 5,042	487,795 3,040		2,667	2,091,054 26,259 0 26,259
b c 111	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)	7,115 7,115 491,678	8,395 8,395 424,108	364,719 5,042 5,042	3,040 3,040 490,835		2,667	2,091,054 26,259 0 26,259 0 0 2,117,313
t b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	7,115 7,115 491,678	8,395 8,395 424,108	364,719 5,042 5,042	3,040 3,040 490,835		2,667	2,091,054 26,259 0 26,259 0 2,117,313
to a b c c 111 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	484,563 7,115 7,115 491,678 for the organization	415,713 8,395 8,395 424,108 m's first, second,	364,719 5,042 5,042	3,040 3,040 490,835		2,667	2,091,054 26,259 0 26,259 0 0 2,117,313
to a b c c 111 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	484,563 7,115 7,115 491,678 for the organizatio	415,713 8,395 8,395 424,108 m's first, second,	364,719 5,042 5,042 369,761 third, fourth, or f	3,040 3,040 490,835		2,667	2,091,054 26,259 0 26,259 0 2,117,313
b c 11 12 13 14 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ction C. Computation of Pub	484,563 7,115 7,115 491,678 for the organization	415,713 8,395 8,395 424,108 on's first, second,	364,719 5,042 5,042 369,761 third, fourth, or f	3,040 3,040 490,835	501(c)(2,667	2,091,054 26,259 0 26,259 0 2,117,313 ization,
toa b c c 111 12 13 14 See 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage for 2012	484,563 7,115 7,115 491,678 for the organizatio lic Support Pe (line 8, column (f	415,713 8,395 8,395 424,108 n's first, second, rcentage divided by line rt III, line 15	364,719 5,042 5,042 369,761 third, fourth, or f	3,040 3,040 490,835	501(c)(2,667	2,091,054 26,259 0 26,259 0 2,117,313 ization, 95 970 %
toa b c c 111 12 13 14 See 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage from 2012	484,563 7,115 7,115 491,678 for the organizatio lic Support Pe (line 8, column (f 1 Schedule A, Pa	415,713 8,395 8,395 424,108 11 A second, arcentage 12 A divided by line art III, line 15 13 The Percentage	364,719 5,042 5,042 369,761 third, fourth, or f	487,795 3,040 3,040 490,835 ifth tax year as a	501(c)(2,667	2,091,054 26,259 0 26,259 0 2,117,313 ization, 95 970 %
toa b c c 111 12 13 14 See 15 16 See See	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage from 201 ction D. Computation of Inve	491,678 7,115 7,115 491,678 for the organization lic Support Pe (line 8, column (for 1 Schedule A, Palestment Income 2012 (line 10c, column 10c, c	415,713 8,395 8,395 424,108 In's first, second, Ircentage Odivided by line rt III, line 15 The Percentage Iumn (f) divided by	364,719 5,042 5,042 369,761 third, fourth, or f	487,795 3,040 3,040 490,835 ifth tax year as a	501(c)(15 16	2,667	2,091,054 26,259 0 26,259 0 2,117,313 ization, 95 970 % 95 070 %

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493045007074

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Garden Club of Houston

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Employer identification number

						76-0008423	
Part I General Inform 1 Does the organization mai		s and Assistance stantiate the amount of th	ne grants or assistance	e, the grantees' eligibil	ity for the grants or ass	istance, and	
the selection criteria used Describe in Part IV the organization							✓ Yes
		o Governments and receive					d "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Urban Harvest 2311 Canal Street Houston,TX 77003	76-0501430	501(c)(3)	15,000	0			School teaching garden
(2) Museum of Natural Science 1 Hermann Circle Houston,TX 77030	74-1036131	501(c)(3)	25,000	0			Cockrell Butterfly Center
(3) Museum of Fine Arts 1001 Bissonnet Houston,TX 77005	74-1109655	501(c)(3)	25,000	0			Rienzi Garden Restoration
(4) Museum of Fine Arts 1001 Bissonnet Houston,TX 77005	74-1109655	501(c)(3)	12,000	0			Bissonnet Plantings
(5) Memorial Park Conservancy 6501 Memorial Drive Houston,TX 77007	76-0655841	501(c)(3)	30,000	0			Reforestation due to drought
(6) Katy Prairie Conservancy 3015 Richmond 250 Houston,TX 77098	76-0377029	501(c)(3)	8,000	0			Updating education outreach
(7) Houston Hospice 1905 Holcombe Blvd Houston,TX 77030	74-2092951	501(c)(3)	9,983	0			Garden maintenance
(8) Hermann Park Conservancy 6001 Fannın St Houston,TX 77030	76-0327389	501(c)(3)	50,000	0			Centennial Garden
Enter total number of sectEnter total number of othe							7

Ш	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	1	1	1	1	1

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		At the completion of the fiscal year, the recipients of our Community Contribution grants report to our president via letter how funds have been used. Our projects are all supervised by a GCH member, "the Project Chair", and those chairs submit yearend reports describing the use of funds we have granted. These reports are submitted to the club president for evaluation

Software ID: 12000229

Software Version: 2012v2.0

EIN: 76-0008423

Name: Garden Club of Houston

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Urban Harvest2311 Canal Street Houston,TX 77003	76-0501430	501(c)(3)	15,000	0			School teaching garden
Museum of Natural Science1 Hermann Circle Houston,TX 77030	74-1036131	501(c)(3)	25,000	0			Cockrell Butterfly Center

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Museum of Fine Arts1001 Bissonnet Houston,TX 77005	74-1109655	501(c)(3)	25,000	0			Rienzi Garden Restoration
Museum of Fine Arts1001 Bissonnet Houston,TX 77005	74-1109655	501(c)(3)	12,000	0			Bissonnet Plantings

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Memorial Park Conservancy 6501 Memorial Drive Houston,TX 77007	76-0655841	501(c)(3)	30,000	0			Reforestation due to drought
Katy Prairie Conservancy 3015 Richmond 250 Houston,TX 77098	76-0377029	501(c)(3)	8,000	0			Updating education outreach

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Houston Hospice1905 Holcombe Blvd Houston,TX 77030	74-2092951	501(c)(3)	9,983	C			Garden maıntenance
Hermann Park Conservancy 6001 Fannin St Houston,TX 77030	76-0327389	501(c)(3)	50,000	C			Centennial Garden

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As Filed Data -

DLN: 93493045007074

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

Employer identification number Name of the organization Garden Club of Houston 76-0008423

Identifier	Return Reference	Explanation
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Increases	Add back old outstanding checks = \$4922
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Upon request
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Annually, at the beginning of the fiscal year, all members of the Executive Board of Directors are required to complete and sign a Conflict of Interest Form adopted by the Garden Club of Houston. It requires disclosure of any relationships, positions or circumstances in which the director is involved that might contribute to a Conflict of Interest as defined in the GCH Policy.
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	Executive Board reviews complete copy of form 990 prior to filing
Form 990, Part VI, Line 7b	Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	Board of Directors first votes and then, if approved, full membership votes on slate of Officers, and Community Contribution, Project and other grant awards
Form 990, Part VI, Line 7a	Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	Affiliate and Active members are allowed to vote on slate of officers
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	Active, Affiliate, Associate, Inactive, Provisional and Honorary members
Form 990, Part III, Line 4d	Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 Other Program Services The Club's mission is to stimulate the know ledge and love of gardening and to protect the quality of the environment through programs and action in the fields of education, conservation and civic improvement Programs to accomplish this mission include open meetings, flow er shows, conferences, correspondence and publications