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CENTRAL HOUSTON INC
909 FANNIN STE 1650
HOUSTON TX 77010

007093

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

✓ Jacqueline S. Kaszurich ✓ 2/26/15

Signature of officer or trustee Date

✓ Chief Operating Officer

Title

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Central Houston, Inc.	76-0062145

Form 990, Part III, Line 4d Program Service Expenses: 5,000, Grants and allocations. 0, Revenue: 0 Rice Scholarship Fund - To fund a scholarship for Rice University School of Architecture.

Form 990, Part III, Line 4d: Program Service Expenses: 5,349, Grants and allocations: 0, Revenue. 0 Other projects include Urban Collaborative and Strategic Planning

Form 990, Part III, Line 2: The Homelessness Initiatives program is new for 2013: The City of Houston is participating in the 100,000 homes national campaign to end chronic homelessness. The City of Houston, in partnership with Central Houston, The Coalition for the Homeless, The Corporation for Supportive Housing, and other local agencies, are working together to better coordinate the procedures described in the Continuum of Care. The program targets the most chronic homeless first, committing 1,000 housing vouchers for this purpose. The ultimate target is to provide 2,500 units of housing for the homeless, combined with supportive services, over the next three years. Contribution includes funding for a full-time staff director to lead the initiatives of the Mayor's office.

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Form 990, Part VI, Section A, Line 1a: Members of the governing body (the Board of Directors) have delegated authority to act on its behalf to the Executive Committee, which is made up of the Chairman and Vice Chairman of the Board, the President, and 13 Board members elected by the Board of Directors. The Executive Committee has all the powers of the Board of Directors.

Form 990, Part VI, Section A, Line 8b. Executive Committee meeting minutes are recorded only if action items are voted on for approval.

Form 990, Part VI, Section B, Line 11b: The President and the Chief Operating Officer review the Form 990 in detail, which is prepared by an independent CPA before it is filed with the IRS. The Form 990 is provided to the Audit Committee and each voting member of the Board of Directors before it is filed.

Form 990, Part VI, Section B, Line 12c: The conflict of interest policy states that it is the responsibility of employees, officers, and directors to identify potential conflicts of

Name of the organization	Employer identification number
Central Houston, Inc.	76-0062145

interest and inform Central Houston, Inc. (CHI). Then, CHI takes that individual out of a decision making role with regard to the issue that has a conflict of interest. CHI reviews the policy annually with officers, directors, and key employees and renews a disclosure statement.

Form 990, Part VI, Section B, Line 15: The process to determine the compensation of the President and other management employees is to obtain data from comparable organizations in Houston, as well as periodically purchasing survey results from independent research organizations focusing on non-profit organization compensation. That information gathered is used to determine compensation by the Executive Committee with counsel of Houston Downtown Management District's Chairman.

Form 990, Part VI, Section C, Line 19: CHI makes available the governing documents, conflict of interest policy, and financial statements when they are requested.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization: Central Houston, Inc.
Employer identification number: 76-0062145

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

(a) Name, address, and EIN (if applicable) 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)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) Central Houston Civic Improvement, Inc 76-0113584 909 Fannin, Suite 1650 Houston, TX 77010	Improve appearance	TX	501(c)(3)	7	N/A		X
(2)	and quality of life						
(3)	in Houston CBD						
(4)							
(5)							
(6)							
(7)							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

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

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
c	Gift, grant, or capital contribution from related organization(s)	1c		X
d	Loans or loan guarantees to or for related organization(s)	1d		X
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l	*Performance of services or membership or fundraising solicitations for related organization(s)*	1l		X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o	Sharing of paid employees with related organization(s)	1o	X	
p	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

2 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.

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions).