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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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public.
► Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

_			dar year, or ta				, 20	13, and e	nding	Oct			<u>, 2014</u>		
В	Check if	applicable	C Name of organ	nization HU	MANITIES	TEXAS					D Employ	yer Iden	tification Nu	ımber	
	Add	lress change	Doing Busines	s As							75-	1493	3438		
	Nan	ne change	Number and s	treet (or P.O b	oox if mall is not de	elivered to street a	ddress)	R	oom/su	ute	E Telepho				
	Insta	al return	1410 RIO	GRANDE	ST.						(51	2) 4	40-19	91	
	Теп	minated				or foreign postal	code								
	Ame	ended return	AUSTIN				т	x 787	01		G Gross r	eceipts	\$2,680	0.067	
	H	dication pending	F Name and add	iress of princip	al officer			707		(a) Is this a	group return			Yes	X
			YVONNE GONZAI			כיי אווכיידא	7	TX 787	01	(b) Are all	subordinates attach a list. (ıncluded	1 7	Yes	H _N
	Tay-e	xempt status	X 501(c)(3)	501(c) ((insert no)	4947(a)(1		,,	If 'No,'	attach a list. ((see inst	ructions)		_
÷			W.HUMANIT		`	(inscrino)	14747(0)(1	701 32		l(a) Crous	exemption nu	I	-		
K		of organization	X Corporation	Trust	Association	Other >		L Year of for							
	rt I	-,		I IIusi	ASSOCIATION	Outer		L rear or to	rmauon	197) 100 3	state or	egal domicile	XT e	
Fa	1 1	Summar Brefly describ	y be the organiza	ion's missi	on or most sid	Inificant activi	hoe:	IIMV +	h	+-+-	- 		- - - -	N7 - 4 - 2	
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Activities & Governance			r humanit												
na		communiti	es and sus	tain re	orresent at	ive demo	TITCTES	_rexas	_ <u>5</u> _ 1	ing in	formed	reng	ruen 1	exas	
Ver	2	Check this bo	x >if the	Organizatio	on discontinue	d its operation	racy D	A CATCT	re the	7117 TI	fite net a	reete	ucated		zens
පි			ting members o									3	I		28
∞ 5			lependent votin									4	 		28
ië.			of individuals e									5	·		2
Ξ			of volunteers (e									6			
Ą	7a 7	Fotal unrelate	d business reve	enue from l	Part VIII, colui	nn (C), line 12	2					7a			0
	b	Net unrelated	business taxab	le income	from Form 99	0-T, line 34						7b			
				<u>-</u>						Р	rior Year		Cur	rent Ye	ar
Revenue	8 (Contributions	and grants (Pa	rt VIII, line	<u>1h)</u> .					2	,288,4	37.	2	,601,	312
	9 F	Program serv	ice revenue (Parcyllit	MAN INCH	29)						42,3	330.			777
	10 I	nvestment in	come (<u>Part V</u> ili	column (A	n; iné s3 4, a	nd 7d)					1	24.		3,	252
~	11 (Other revenue	e.¶RamitVIII.colu	ımn (A), lın	es 5. 667 8c. 9	3c. 10c. and 1	1e)				33,5	08.			726
	12 7	Total revenue	Bada IINEE 8	thro ugh, illi	(musi edual F	Part VIII, colun	nn (A), line	∋ 12)		2	,364,3	399.	2	,680,	067
			milar amounts p			•					424,7	146.		412,	571
			te or formemb									0.			0.
s	15 8	Salaries, othe	compensation	remployed	e be <u>nefits</u> (Pa	rt IX, column (A), lines 5	⊱10)		1	,041,3	315.	1,	,088,	507
JSe	16a F	Professional f	undraising fees	(Part IX, c	olumn (A), lin	e 11e)									
Expenses	ьт	Total fundrais	ıng expenses (l	Part IX. col	umn (D), line :	25) ►		76,24	4						
ũ			es (Part IX, coli			· —				1	000 4		ļ	220	
			es. Add lines 13								,082,4			, 239 <u>,</u>	
			expenses Sub								,548,5			,740,	
800	19	veveriue less	expenses out	Maci III 10 1	6 HOTH lifte 12	• • • • • •		· · · · · ·	• • •		-184, 1			-60,	
\$ ğ		Fotal accete (Part X, line 16)								g of Currer			of Yea	
Asset Bala		•	(Part X, line 10)							<u> </u>	,902,6		5,	948,	
žŠ			,	•							178,8	75.		285,	•
			fund balances.	Subtract III	ne 21 from line	e 20	· · · · ·			5	<u>,723,7</u>	55.	5,	,662,	900
	rt II	Signatur													
Unde	r penaltie lete. Ded	s of perjury, I dec	lare that I have exar er (otber than officer	nined this retui	n, including according information of wi	npanying schedule	s and statem	ents, and to th	ne best	of my knowl	edge and bel	lief, it is t	true, correct,	and	
		<u> </u>		7		nor propercy ness				1 2		<u> </u>			
		Signatus	re of officer	00	- ongoing	3				Dai		<u>201</u>	5		
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			print name and title		<u> </u>		,								
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	pare		► RENEE	J BARI	RY, CPA	0 7									
Us	e Only	Y Firm's addre	ss 10102	BRANT	LEY BND						Firm's EIN	_ 20	-31184	124	
			AUSTI	N			TX 78	748-12	65		Phone no.		2) 636		2
May	the IR	S discuss this	s return with the		shown above?					1			. Ye		Z No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 11/08/13

Form 990 (2013)

Form		HUMANITIES TEXA		75-1	<u>493438</u> Page 2
Par			ervice Accomplishments		
				III	
1	-	e the organization's mission			
			of the National		
	Endowment 1	for the Humanities,	_conducts and supports publ	ic programs in history, lite:	rature, philosophy,
	See Form 990,	, Page 2, Part III, Line 1 (d	ontinued)		
2	-		ficant program services during the year		
					· · U Yes X No
	,	e these new services on t			
3	_			onducts, any program services?	·· Yes X No
		e these changes on Sche			
4	Section 501(c)	(3) and 501(c)(4) organiza	ice accomplishments for each of its th tions and section 4947(a)(1) trusts are if any, for each program service report	ree largest program services, as measu required to report the amount of grants ted.	red by expenses and allocations to
	(Code:) (Expenses S	2 330 193 including grants of	\$ 308,071.)(Revenue	\$ 0.)
74				ates and circulates trave	
				nal materials to support	
					
			rs awards for recognizi		
	publicati	lons, and mainta	Tus a mensice and outli	ne_educational_resources	-
		· 			
					-
	(O - 1	\/F	Includes a second of		
40	(Code:) (Expenses \$	including grants of	\$) (Revenue	\$)
					-
					
					
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4 c	(Code:) (Expenses \$	including grants of	\$) (Revenue	\$)
					- -
					
		- 			
					·
					
		. 			
4	Other program	services. (Describe in Sc	nedule O.)		
	(Expenses	\$	including grants of \$) (Revenue \$)
	Total program	service expenses	2,330,193.		
BAA			TEEA0102 07/02/13		Form 990 (2013)

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Χ 2 2 3 Х Х 4 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. Х 5 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, Х Part I...... 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the Х 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х 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 9 Х 10 Х If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х 11 b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х 11 c 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 Х 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. . . . 11 e Х 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 . . . Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х 12a 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 Х 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X 14b 15 Х Х 16 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) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes.' Х 19 20 a Did the organization operate one or more hospital facilities? If Yes,' complete Schedule H Х 20

20 b

Pai	rt IV Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants or 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	Х	
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	Х	
24:	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		Х
i	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(1 Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	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		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?			v
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	26		X
28	of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
á	Instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	·	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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? If 'Yes,' complete Schedule R, Part I	33		Х
34	and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	of Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If Yes,' complete Schedule R, Part V, line 2	35b		Х
36	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
RAA				- 4

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	x	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-		-	
ments, filed for the calendar year ending with or within the year covered by this return 2a 25 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	x	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-	<u> </u>
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	х	l
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		-
	30	<u> </u>	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b 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.		ļ	۱
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		<u> </u>
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		x
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	-	<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file		-	
Form 8282?	7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds 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?	٠		х
	8		<u> </u>
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?	0 -		х
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 a 9 b		X
10 Section 501(c)(7) organizations. Enter:	90	<u> </u>	^
a Initiation fees and capital contributions included on Part VIII, line 12········· 10 a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a 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.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		L
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
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?	13 a	ļ	
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			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		i

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Form 990 (2013)

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1a 28 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 28 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. Х 8 a b Each committee with authority to act on behalf of the governing body? Χ 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts? Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in X 12 c 13 Х 14 Х 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? Х 15 a 15b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х **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 taken steps to safeguard the organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 1410 RIO GRANDE ST., YVONNE GONZALEZ AUSTIN, 78701 ___ (512) 440-1991

TEEA0106 07/02/13

Form 990 (2013)	HUMANITIES TEXAS	 Page 7

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 rel	ated o	rgan	ızatı	on c	ompe	nsat	ed any current officer,	director, or trustee	
(C)										
(A) Name and Title	(B) Average hours per week (list	one bo	ox, ùni cer an	less p id a di	ersor	more the is both r/trustee	an)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	any hours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) LARRY D CARVER	0.00									
DIRECTOR		Х						0.	0.	0.
(2) SHIRLENE BRIDGEWATER	0.00									
DIRECTOR		Х						0.	0.	0.
(3) MICHAEL L KLEIN	2.00									
CHAIR		Х						0.	0.	0.
(4) MACEO C DAILEY JR DIRECTOR	0.00	Х						0.	0.	0.
(5) JESUS F DE LA TEJA	0.00		П							·
DIRECTOR	7	х	Ш					0.	0.	0.
(6) ELINOR DONNELL	0.00									
DIRECTOR]	х						0.	0.	0.
_(7)_ALWYN_BARR	0.00									
DIRECTOR	<u> </u>	Х	Н					0.	0.	0.
(8) JOY ANN HAVRAN	_0.00						i			
SECRETARY	-	Х					_	0.	0.	0.
(9) RAY M KECK III	0.00		li					_		
DIRECTOR	 	Х	$\vdash \vdash$	\dashv				0.	0.	0.
(10) MONICA PERALES	_0.00			ĺ				_		
DIRECTOR	1 0 00	X	\vdash					0.	0.	0.
(11) PAULA PETERS	0.00							_		
DIRECTOR	1 0 00	Х	$\vdash \vdash$	\dashv	_			0.	0.	<u> </u>
012) CHASE UNTERMEYER DIRECTOR	0.00	X							,	_
(13) SHARON ALLISON	0.00		\vdash		-		_	0.	0.	0.
DIRECTOR	<u> </u>	х							_	•
(14) JOSEPH O JEWELL	0.00			\dashv	-			0.	0.	0.
DIRECTOR	1-5.00	х		ĺ				0.	_	^
DINICION		_^_	Щ						0.	0.

Part VII Section A. Officers, Directors, Tru	stees, l	Key	En	nple	oye	es,	and	d Highest Con	npensated Empl	oyee	S (con	tinued)
ı	(B)	1		-	C)							
(A) Name and title	Average hours per	box	, unle	ss pe	more rson i	than o s both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from		(F) stimated unt of oth	
	week (list any hours for related orgeniza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	com fr org an	ipensation rom the anization d related anization	on n i
(15) JOHN KERR TREASURER	0.00	X		х				0.	0.			0.
(16) JOSEPH R KRIER DIRECTOR	0.00	x						0.	0.			0.
(17) MANUEL F MEDRANO DIRECTOR	0.00	Х						0.	0.			0.
(18) VIRGINIA MITHOFF DIRECTOR	0.00	х						0.	0.			0.
(19) KIT T MONCRIEF DIRECTOR	0.00	х						0.	0.			0.
(20) VENUS F STRAWN DIRECTOR	0.00	х						0.	0.			0.
(21) LESLIE D_BLANTONVICE CHAIR	2.00	х		Х				0.	0.			0.
Q22) G HUGHES ABELL DIRECTOR	0.00	Х						0.	0.			0.
(23) SALLY DUNNING DIRECTOR	0.00	х						0.	0.			0.
(24) JULIUS GLICKMAN DIRECTOR	0.00	х						0.	0.			0.
DIRECTOR	0.00	х						0.	0.			0.
1 b Sub-total			• •	• •	• •	• •		0.	0.	0.		
c Total from continuation sheets to Part VII, Section			• •	• •	• •			249,583.	0.		25,5	
d Total (add lines 1b and 1c)								249,583.	0.		25,5	<u> 599.</u>
from the organization 1		iisteu	abo		WIIO	rece		i more trian \$100,0	OU OF reportable com	pensa	lion	
3 Did the organization list any former officer, director,	or trustee	, key	em	ploy	ee, o	or hig	hes	st compensated en	nployee		Yes	No
 on line 1a? If 'Yes,' complete Schedule J for such inc For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the such individual	ortable co	mpe	nsat <i>If 'Y</i>	ion a 'es' d	and (other	cor	mpensation from		3	,,	X
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' co	mpensati	on fr	om a	anv i	unre	lated	ora	anization or individ	lual	5	X	x
Section B. Independent Contractors										1 3		^
 Complete this table for your five highest compensate compensation from the organization. Report comper 	ed indeper	nden the	t cor cale	ntrac ndar	tors yea	that ir end	rece ling	eived more than \$1 with or within the	00,000 of organization's tax year	ır.		
(A) Name and business address						(В) Description o		(Compe	C) ensatio	n		
		_										
	*1	· · · ·					\dashv					
Total number of independent contractors (including I	out not lim	uted	to th	ose	liste	d abo	ove)) who received mor	re than			
\$100,000 of compensation from the organization	0											

•	Check if Schedule O contains a response or note to any	line in this Part VIII	<u></u>	<u></u>	<u></u> 📙
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>~</u>	1 a Federated campaigns 1 a				
R P	b Membership dues 1 b				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	c Fundraising events 1 c				
A K	d Related organizations 1 d				
	e Government grants (contributions) 1 e				
ERS ERS	f All other contributions, grifts, grants, and similar amounts not included above . 1f 2.601.312				}
죮	similar amounts not included above				
	g Noncash contributions included in lines 1a-1f \$				
<u>~</u>	h Total. Add lines 1a-1f	2,601,312.			
EN	2a MEDIA RENTAL INCOME 1999999	- - </td <td>E 2 222</td> <td>0</td> <td></td>	E 2 222	0	
REVI	2a MEDIA RENTAL INCOME 999999	51,777.	51,777.	0.	0.
<u>S</u>	e	 		 ,	
ES	d				
S E	e				
GRA	f All other program service revenue				
옱	g Total. Add lines 2a-2f	51,777.			
	3 Investment income (including dividends, interest and				
	other similar amounts)	9/202.	3,252.	0.	0.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties	>			
	(i) Real (ii) Personal	_			}
	6 a Gross rents 2,348.				
	b Less: rental expenses	_			
	c Rental income or (loss) . 2,348.				_
	d Net rental income or (loss)	2,348.	2,348.	0.	0.
	7 a Gross amount from sales of assets other than inventory.	-			}
		-			
	b Less cost or other basis and sales expenses				
	c Gain or (loss)	-			
	d Net gain or (loss)	<u> </u>	ĺ		İ
10E	8 a Gross income from fundraising events (not including \$				
3	of contributions reported on line 1c).				
OTHER REVENI	See Part IV, line 18 a				
포	b Less: direct expenses b				
Ö	c Net income or (loss) from fundraising events	▶			
	9 a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities	•			
	10 a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory	▶			
	Miscellaneous Revenue Business Code				
	11a MISC INC 900099	13,661.	13,661.	0.	0.
	b UNREALIZED GAIN 900099	7,717.	7,717.	0.	0.
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	<u> </u>			
	12 Total revenue. See instructions	2,680,067.	78,755.	0.	0.

Part IX Statement of Functional Expenses

Do I	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV. line 21	308,071.	308,071.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	104,500.	104,500.		
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0.	0.		
4 5	Benefits paid to or for members	0.	0.		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salanes and wages	871,820.	660,858.	168,485.	42,477.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	66,083.	49,254.	13,382.	3,447.
9	Other employee benefits	86,571.	65,028.	16,979.	4,564.
10	Payroll taxes	64,033.	48,529.	12,381.	3,123.
11	Fees for services (non-employees)	04,033.	40,323.	14,301.	3,123.
	Management	}	\	}	
	Legal				
	Accounting	45,073.	0.	45,073.	0.
	Lobbying	45,075.	0.	40,073.	<u> </u>
_	Professional fundraising services See Part IV, line 17				
	Investment management fees				
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	16,251.	14,249.	1,399.	603.
	Advertising and promotion				
13	Office expenses	199,434.	164,565.	25,925.	8,944.
14	Information technology				
15	Royalties				
16	Occupancy	72,113.	<u>59,687.</u>	8,686.	3,740.
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	38,668.	25,621.	11,206.	1,841.
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	112,994.	91,220.	15,220.	6,554.
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	18,516.	13,232.	4,333.	951.
a L	COUNCIL CONDUCTED PROGRAMS	736,795.	725,379.	11,416.	0.
	;				
	,				
•	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,740,922.	2,330,193.	334,485.	76,244.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
BAA		TEFA0110 11/0			Form 990 (2013)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 606,922 1 582,420. 2 2 3 748,082 3 664,128. 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule I. 5 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 ß 7 8 8 Prepaid expenses and deferred charges 9 15,310 22,364. 10 a 10 a 742,638 10 c 4,517,808 4,404,814. 11 14,508 11 274,932. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 15 15 16 16 5,902,630 5,948,658 17 17 176.850 285,758 18 18 19 2.025 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 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 D . . . 25 26 178,875 26 285,758. Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 4,477,502 27 4,390,765. 28 28 1,246,253 1,272,135. 29 29 8 R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. FUXD 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 33 5,723,755 5,662,900. 34 5,902,630 34 5,948,658 BAA Form 990 (2013)

OII	m 990 (2013) HUMANITIES TEXAS 75-	<u> 1493</u>	3438		Pa	ige 12
Pa	rt XI Reconciliation of Net Assets					
•	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,68	80,0	67.
2	Total expenses (must equal Part IX, column (A), line 25)	2			40,9	
3	Revenue less expenses. Subtract line 2 from line 1	3			60,8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			23,7	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior penod adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	Ţ	5,66	62 , 9	00.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. X
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		<u> Г</u>			
	If the organization changed its method of accounting from a pnor year or checked 'Other,' explain in Schedule O.					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a	- [Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis		İ			:
	b Were the organization's financial statements audited by an independent accountant?			2 b	x	ı
	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: X Separate basis					
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audir review, or compilation of its financial statements and selection of an independent accountant?	t, 		2 c	х	l
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		[3 a	х	
	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			3 Ь	х	
RA					900 /2	2012\

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ

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

OMB No 1545-0047

Schedule A (Form 990 or 990-EZ) 2013

Open to Public Inspection

Employer identification number 75-1493438 HUMANITIES TEXAS Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described Х in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated Type III - Non-functionally integrated Type II d Tvpe I c By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box . . Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (lii) Provide the following information about the supported organization(s) h (ii) EIN (iii) Type of organizatio (described on lines 1-9 above or IRC section (see instructions)) (v) Did you notify the organization in (vi) is the organization in (vii) Amount of monetary (i) Name of supported (iv) is the organization in column (i) listed in organization support column (i) of your support? column (I) organized in the Yes No (A) (B) (C) (D) (E) Total

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u>Sec</u>	Section A. Public Support											
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total					
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	3,372,608.	2,483,824.	2,242,537.	2,330,767.	2,653,089.	13,082,825.					
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	3,372,608.	2,483,824.	2,242,537.	2,330,767.	2,653,089.	13,082,825.					
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 (f)											
6	Public support. Subtract line 5 from line 4						13,082,825.					
Sec	tion B. Total Support											
	ndar year (or fiscal year nning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total					
7	Amounts from line 4	3,372,608.	2,483,824.	2,242,537.	2,330,767.	2,653,089.	13,082,825.					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	724.	212.	10,684.	17,532.	5,600.	34,752.					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						01,7021					
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)											
	Total support. Add lines 7 through 10						13,117,577.					
12	Gross receipts from related activiti	es, etc (see instruc	ctions)	• • • • • • • • •		12						
13	First five years. If the Form 990 is organization, check this box and s	for the organizate top here	on's first, second, t	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ 🗍					
	tion C. Computation of Pu	<u>blic Support P</u>	ercentage									
	Public support percentage for 2013						99.74 %					
	Public support percentage from 20	•					96.34 %					
16 a	33-1/3% support test — 2013. If the and stop here. The organization of	the organization di jualifies as a public	d not check the book by supported organ	x on line 13, and the	ne line 14 is 33-1/3	% or more, check	this box					
b	33-1/3% support test — 2012. If the and stop here. The organization of	he organization did qualifies as a public	I not check a box only By supported organ	on line 13 or 16a, a nization	nd line 15 is 33-1/3	3% or more, check	this box					
17 a	10%-facts-and-circumstances te or more, and if the organization method organization meets the 'facts-a	ets the 'facts-and-	circumstances' tes	t check this box a	nd stop here. Eyn	lain in Part IV how						
	10%-facts-and-circumstances te or more, and if the organization me organization meets the facts-and-	eets the 'facts-and- circumstances' test	circumstances' test. The organization	st, check this box a qualifies as a pub	nd stop here. Exp licly supported org	laın in Part IV how anızation	the ▶					
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	7b, check this box	and see instructio	ns ▶ 🗍					

	edule A (Form 990 or 990-EZ) 2013	HUMANITI	ES TEXAS			75-1493438	Page 3
Par	t III Support Schedule for	r Organization	ns Described i	n Section 509	(a)(2)		
•	(Complete only if you check			organization failed	d to qualify under P	art II. If the organizat	ion fails
	to qualify under the tests list	ted below, please	complete Part II.)				
	tion A. Public Support		,	1 1 2 2 1 1			
Calen 1	dar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			,			
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b			· · · · · · · · · · · · · · · · · · ·			
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6 · · · · ·						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total Support. (Add Ins 9,10c, 11 and 12)						· · · · · · · · · · · · · · · · · · ·
14	First five years. If the Form 990 is organization, check this box and s	s for the organization top here	on's first, second, t	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ □
Sec	tion C. Computation of Pul						
15			-				96
16	Public support percentage from 20	012 Schedule A, Pa	art III, line 15	<u> </u>	<u></u>	16	g
	tion D. Computation of Inv						
17	Investment income percentage for	2013 (line 10c, co	lumn (f) divided by	line 13, column (f))	17	१
18	Investment income percentage from						ક
19 a	33-1/3% support tests — 2013. If is not more than 33-1/3%, check the	the organization d	id not check the boere. The organizat	ox on line 14, and li ion qualifies as a p	line 15 is more than publicly supported o	33-1/3%, and line 1 organization	7

b 33-1/3% support tests - 2012. 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
20 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) 2013 HUMANITIES TEXAS	15-1493438	Page 4
	Supplemental Information. Provide the explanations required by Part II, line 10; or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).		
			-
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	·		
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		·	
- -		· 	-
	·	· -	-

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047 2013

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

• ;	Section 501(c)(4), (5), or (6) org	anizations: Complete Part III.			
Name	of organization			Employer identific	ation number
HUI	MANITIES TEXAS			75-149343	8
Pa	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	ization.
1	Provide a description of the or	rganization's direct and indirect political camp	aign activities in Part I	V.	, ,
2	•			•	
3	Volunteer hours	<u> </u>			
Pa		rganization is exempt under secti			
1	Enter the amount of any excis	e tax incurred by the organization under secti	ion 4955	▶ \$	5
2	Enter the amount of any excis	e tax incurred by organization managers und	er section 4955		3
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for this	year?		· · · Yes No
4 :	a Was a correction made?				· · · · Tyes TNo
	b If 'Yes,' describe in Part IV.				
Pa	rt I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3)	
1		ended by the filing organization for section 52			
2		organization's funds contributed to other orga			
_					
3	line 17b	itures. Add lines 1 and 2. Enter here and on F			
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made payments. amount of political contribution	and employer identification number (EIN) of al For each organization listed, enter the amount in seceived that were promptly and directly de action committee (PAC). If additional space is	nt paid from the filing of	organization's funds. Also colitical organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)				.,	
(6)					

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

Schedule C (Form 990 or 990-EZ) 2013

		n is exempt under sect	ion 501(c)(3) and f	iled Form 5768 (el	
	··	gs to an affiliated group (and lis	st in Part IV each affiliate	ed group member's name	
	-	share of excess lobbying expe		<i>5</i> ,	•
B Check ► I If the filing	organization check	ed box A and 'limited control' p	provisions apply.		
(The term 'e	Limits on Lobbyi	ng Expenditures ns amounts paid or incurred	1.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	s to influence public	opinion (grass roots lobbying)	5,009.	
• • •	-	slative body (direct lobbying) .	├	0.	
	•	1b)		5,009.	
			<u> </u>	2,735,913.	
e Total exempt purpose expe	enditures (add lines	1c and 1d)	· · · · · · · · · · · · · · · · · · ·	2,740,922.	
f Lobbying nontaxable amou both columns	unt. Enter the amou	nt from the following table in		287,046.	
If the amount on line 1e, colum	nn (a) or (b) is.	The lobbying nontaxable an	nount is:	20., 010.	
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,0	00,000	\$100,000 plus 15% of the excess ov	er \$500,000		
Over \$1,000,000 but not over \$1,	,500,000	\$175,000 plus 10% of the excess ov	er \$1,000,000		
Over \$1,500,000 but not over \$1		\$225,000 plus 5% of the excess ove	r \$1,500,000		
Over \$17,000,000		\$1,000,000			
		line 1f)		71,762.	
•	·	nter -0	 	0.	
j If there is an amount other	than zero on either	ter -0-	ـــ nization file Form 4720 r		· · Yes No
(Some	organizations that	Year Averaging Period Unc t made a section 501(h) elec s below. See the instruction	tion do not have to cor		
·	Lobb	ying Expenditures During 4-	Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount	261,930	265,396.	277,427.	287,046.	1,091,799.
b Lobbying ceiling amount (150% of line 2a, column (e))					1,637,699.
c Total lobbying					
expenditures		0.	0.	0.	0.
d Grassroots nontaxable amount	65,483	66,349.	69,357.	71,762.	272,951.
e Grassroots ceiling amount (150% of line 2d, column (e))	·				409,427.
f Grassroots lobbying expenditures	9,352	2. 3,368.	5,636.	5,009.	23,365.
BAA				Schedule C (Form 9	990 or 990-EZ) 2013

r each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description the lobbying activity.			1		
	Yes	No	An	nount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>	1		
c Media advertisements?			1		
d Mailings to members, legislators, or the public?			 		_
e Publications, or published or broadcast statements?			† ··		_
f Grants to other organizations for lobbying purposes?					_
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		 			_
i Other activities?		l —			_
j Total. Add lines 1c through 11		 	 		_
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		İ			—
b If 'Yes,' enter the amount of any tax incurred under section 4912	ļ	 	1		
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
	l l	ŀ			
· · · · · · · · · · · · · · · · · · ·					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		۱ ۵-			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?), or			_
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?), or		Vos	_
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5			Yes	F
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5			Yes	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5		2	Yes	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5		3		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5		2 3	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5 on 501(c)(5 OR (b) Part i		2 3	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5 on 501(c)(5 OR (b) Part), or	2 3	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5 on 501(c)(5 OR (b) Part i), or s	2 3	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? IT III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? IT III-B Complete if the organization is exempt under section 501(c)(4), section (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' Conserved 'Yes.' Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	on 501(c)(5), or s	section (line 3, is	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' Conserved 'Yes.' Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year Complete if the organization is exempt under section 501(c)(4), section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	on 501(c)(5 on 501(c)(5 DR (b) Part I), or s	2 3 section (line 3, is	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Int III-A Complete if the organization is exempt under section 501(c)(4), section section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), section (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' Considered 'Yes.' Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	on 501(c)(5 on 501(c)(5 OR (b) Part i), or s	2 3 section (line 3, is	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5), or s	2 3 section (line 3, is	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5), or s	2 3 section (line 3, is	501(c)	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	on 501(c)(5), or s	2 3 section (line 3, is	501(c)	

Sheekee (Fram 900 or 90-625 2013 HUMANITEES TEXAS 75-1493438 Page 4 Page 4 Page 14 Page 14 Page 15 Page 15 Page 16 Page 16 Page 17 Page 17 Page 18 Page 17 Page 18 Pag	Schedule C (F	orm 990 or 990-EZ) 2013HUMANITIES TEXAS	75-1493438	Page 4
	Part IV	Supplemental Information (continued)		
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			. 	- -
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			·	
				- -
				- -
				- -
			·	- -
				-
				-
				

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

UITA	IANTTTEC TEVAC				75_1402420	
	IANITIES TEXAS t I │Organizations Maintaining Dono	r Advised Funds or Of	har Similar Euro	de or Ac	175-1493438	
Par	Complete if the organization answer	ered 'Yes' to Form 990 !	ner Similar Fund Part IV line 6	us of AC	counts.	
		· · · · · · · · · · · · · · · · · · ·	·	(L) F	tundo and attack	
_	Total number at and of year	(a) Donor advised	tunas	(D) F	unds and other acco	Dunts
1	Total number at end of year	· · · · · · · · · · · · · · · · · · ·				-
2	Aggregate contributions to (during year)	· · · · · · · · · · · · · · · · · · ·				
3	Aggregate grants from (during year)					·
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor are the organization's property, subject to the org	advisors in writing that the ass janization's exclusive legal con	ets held in donor adv trol?	rised funds	Yes	No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of impermissible private benefit?	and donor advisors in writing the donor or donor advisor, or	hat grant funds can b for any other purpose	e used only conferring	/ Yes	No
Par						
	Complete if the organization answer		<u> </u>			
1	Purpose(s) of conservation easements held by the		apply).			
	Preservation of land for public use (e.g., recr	eation or education)	Preservation of a	an historical	lly important land are	ea
	Protection of natural habitat		Preservation of a	certified h	stonc structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization	held a qualified conservation o	ontribution in the form	n of a cons	ervation easement o	n the
	last day of the tax year.				 	
					Held at the End of t	he Tax Year
	Total number of conservation easements			2 a		
	Total acreage restricted by conservation easeme					
	Number of conservation easements on a certified		•	2 c		
d	Number of conservation easements included in (o structure listed in the National Register			2 d		
3	Number of conservation easements modified, traitax year ►	nsferred, released, extinguishe	ed, or terminated by the	he organiza	ition during the	
4	Number of states where property subject to conse	ervation easement is located	•			
5	Does the organization have a written policy regar and enforcement of the conservation easements					No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing cons	ervation easements	dunng the y	rear	u
7	Amount of expenses incurred in monitoring, insper	ecting, and enforcing conserva	tion easements durin	g the year		
8	Does each conservation easement reported on lin and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requi	rements of section 17	'0(h)(4)(B)(i) · · · · · · Yes	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to the conservation easements.	s conservation easements in it e organization's financial state	s revenue and expen- ments that describes	se stateme the organi	nt, and balance shee zation's accounting f	et, and or
Par	Organizations Maintaining Collection Complete if the organization answer	ctions of Art, Historica ered 'Yes' to Form 990, F	Treasures, or Coart IV, line 8.	Other Sin	nilar Assets.	-
1 a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its financial	eld for public exhibition, educat	ion, or research in fui	ement and therance o	balance sheet works f public service, prov	of ride,
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items.	FAS 116 (ASC 958), to report in public exhibition, education,	n its revenue stateme or research in further	ent and bala rance of put	ince sheet works of a blic service, provide	art, the
	(i) Revenues included in Form 990, Part VIII, lin	e1	· · · · · · · · · · · ·		⊳ \$	
	(ii) Assets included in Form 990, Part X				•	
2	If the organization received or held works of art, he amounts required to be reported under SFAS 116	ustorical treasures, or other sin	nilar assets for financ		1	
а	Revenues included in Form 990, Part VIII, line 1				►\$	
	Assets included in Form 990, Part X				•	• • • • • •
					T	

Part III Organizations maintaini	ng Collections	or Art, misto	ricai i reasures, or	Other Similar Ass	ets (cor	าแทนย	<i>₹a)</i>
3 Using the organization's acquisition, a items (check all that apply):	ccession, and other	records, check a	any of the following that a	re a significant use of its	collection	1	
a Public exhibition		d Loan o	r exchange programs				
b Scholarly research		e Other	 				
c Preservation for future generation	s						
4 Provide a description of the organizati Part XIII	on's collections and	explain how the	y further the organization	's exempt purpose in			
5 During the year, did the organization s to be sold to raise funds rather than to	be maintained as p	art of the organiz	zation's collection?		Yes		No
Part IV Escrow and Custodial A	ount on Form 990	Complete if the Domplete if th	e organization answ 21.	ered 'Yes' to Form	990, Pa 	rt IV,	
1 a Is the organization an agent, trustee, on Form 990, Part X?					Yes		No
b If 'Yes,' explain the arrangement in Pa	rt XIII and complete	the following tab	ole:				
					Amount		
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance				_ \	- 1		T
2 a Did the organization include an amount				L	Yes	<u> </u>	No
b If 'Yes,' explain the arrangement in Pa	irt XIII. Check here ii	tne explantion r	nas been provided in Pan	XIII		∙ ∙ ∟]
Part V Endowment Funds. Con	nnlete if the orga	nization ans	vered 'Ves' to Form	990 Part IV line 10	`		
rait V Liidowillent i diids. Con	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Fou	r viones	back
1 a Beginning of year balance	(a) Current year	(b) Piloi yeai	(c) Two years back	(b) Three years back	(e) Fou	years	Dack
b Contributions					 		
							
c Net investment earnings, gains, and losses	· 						
d Grants or scholarships		···					
e Other expenditures for facilities and programs							
f Administrative expenses		 		_			
g End of year balance					<u> </u>		
2 Provide the estimated percentage of t	=	-	, column (a)) held as:				
a Board designated or quasi-endowmen		 %					
b Permanent endowment	⁸						
c Temporarily restricted endowment	0 1 11 1400	- S					
The percentages in lines 2a, 2b, and	zc snould equal 100	% .					
3 a Are there endowment funds not in the	possession of the o	rganization that	are held and administere	d for the		/ 1	
organization by: (i) unrelated organizations					-	es	No
(ii) related organizations					3a(i) 3a(ii)		
b If 'Yes' to 3a(ii), are the related organi					3b	-+	
4 Describe in Part XIII the intended use					- 30		
Part VI Land, Buildings, and Ed		3 Chdownieth ic					
Complete if the organizat		es' to Form 9	90 Part IV line 11a	See Form 990 Pa	rt X line	10 د	
		·			·····		-
Description of property	(inv	or other basis estment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Bo	ok vai	ue ———
1 a Land			618,240.				<u>240.</u>
b Buildings			4,269,246.	502,274.	3,	766,	<u>972.</u>
d Equipment			259,966.	240,364.		10	602.
e Other				270,304.		12,	<u> </u>
Total. Add lines 1a through 1e. (Column (d)		90, Part X. colun	nn (B), line 10(c)		Δ.	404	814.
BAA	====================================		12/1,		ule D (For		

Part VII	Investments — Other Securities. Complete if the organization answered	Yes' to Form 990. F	Part IV, line 11b. See Form 990. P	art X, line 12.
(a) Descri	iption of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of	
	al derivatives			
(2) Closely-	held equity interests			
(3) Other				
<u>(A)</u>				· · · · · · · · · · · · · · · · · · ·
(B)				
(C)				
(D)				
(E)	. 			· · · · · · · · · · · · · · · · · · ·
<u>(F)</u>				
<u>(G)</u>				
<u>(H)</u>				
<u>(I)</u> _ _				
Total (Column	n (b) must equal Form 990, Part X, column (B) line 12)	·		.
Part VIII	Investments — Program Related. Complete if the organization answered	'Yes' to Form 990 F	Part IV line 11c See Form 990 P	art Y line 13
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-	
(1)		, , , , , , , , , , , , , , , , , , , ,	(1)	
(2)				
(3)		<u> </u>		
(4)		1		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Columi	n (b) must equal Form 990, Part X, column (B) line 13) . •			
Part IX	Other Assets.	N/14- E 000 E	2-411/4	
	Complete if the organization answered	Yes to Form 990, Fescription	Part IV, line 11d. See Form 990, P	(b) Book value
(1)	(4) 50	23011ption		(b) Dook value
(2)				
(3)				
(4)				
(5)				
(6)		· · · · · · · · · · · · · · · · · · ·		
(7)				· · · · · · · · · · · · · · · · · · ·
(8)				
(9) (10)			·-· · · · · · · · · · · · · · · · · · ·	-
	umn (b) must equal Form 990, Part X, column (B),	line 15)		
	Other Liabilities.	mie 10.)		
Part X	Complete if the organization answered 'Yes' to F	form 990. Part IV. line 1	1e or 11f. See Form 990. Part X. line 25	
	(a) Description of liability	(b) Book value	700 111 000 10111 770 1 01 77 1110 20	
(1) Feder	al income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(10)			·	
(11)			 	
	n (b) must equal Form 990, Part X, column (B) line 25)	•		
	uncertain tax positions In Part XIII, provide the text of the foo		ancial statements that reports the organization's liab	ollity for uncertain
	under FIN 48 (ASC 740) Check here if the text of the footnote			

BAA

Schedule **D** (Form 990) 2013

Schedule D	(Form 990) 2013	HUMANITIES 7	rexas			75-1493438	Page 5
Part XIII	Supplemental	HUMANITIES T	ontinued)				
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					. 		-
		_ 					
							
		- <i>-</i>					

SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

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

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

2013

OMB No 1545-0047

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection Employer identification number

75-1493438

ջ []

HUMANITIES TEXAS

Part | General Information on Grants and Assistance

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TEXAS STATE HISTORICAL AS 3001 LAKE AUSTIN BLVD. ST AUSTIN TX 78703	74-6025220	50103	5,300.				PUBLIC EDUCATI
GARDEN &_ 7-844	20-1111056	50103	6,750.				PUBLIC EDUCATI
<u>)F_ A</u> 	75-6001738	50103	5,126.				PUBLIC EDUCATI
	27-0687563	50103	8,040.				PUBLIC EDUCATI
HUMANIT I	75-1721049	501C3	8,500.				PUBLIC EDUCATI
(6) SAN JACINTO BATTLEGROUND P.O. BOX 940536 HOUSTON IX 77094	265/880-74	501C3	5,241.				PUBLIC EDUCATI
(7) DUNHAM BIBLE MUSEUM 1502 FONDREN ROAD HOUSTON TX 77074	74-1400699	50103	5,769.				PUBLIC EDUCATI
(8) PANHANDLE-PLAINS HISTORIC - 2503 4TH AVENUE CANYON TX 79015	75-6019872	501C3	6,750.				PUBLIC EDUCATI
ection 501(c)(3)	and government organisted in the line 11	anizations listed in the	line 1 table				14
	s, see the Instruction	ıs for Form 990.		TEEA3901	07/12/13	Schedu	Schedule I (Form 990) (2013)

Continuation Sheet for Schedule I (Form 990)

2013

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

PUBLIC EDUCATI Schedule I Cont (Form 990) 2013 ر م PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI PUBLIC EDUCATI (h) Purpose of grant or assistance Continuation Page Employer Identification numbe Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) 75-1493438 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 7,200. 7,246. 6,750. 7,200. 5,400. 6,300 5,400 (d) Amount of cash 5,400 6.000 TEEA4001 07/12/13 (c) IRC section if applicable 501C3 501C3 501C3 501C3 501C3 501C3 501C3 50103 501C3 501C3 74-6000813 75-1077979 74-2360058 74-1109655 74-2993083 74-2369010 74-2557753 20-3312964 26-0516082 (p) EIN - KSCE CHANNEL 38 TELEVISIO _1001_BISSONNEIT_STREET__ - FRIENDS OF THE HISTORIC M UNIVERSITY OF TEXAS -- EL _ 500 W_UNIVERSITY_AVE___ ARCHAEOLOGICAL INSTITUTE (a) Name and address of organization or government CONFED REUNION GRNDS SI HOUSTON ARTSAND MEDIA 3501 CAMP BOWIE BLVD -MUSEUM OF EINE ARTS FORT WORTH TX 76107 419 CONGRESS AVE. -- AMON CARTER MUSEUM 2201 WYOMING AVE MEXIC-ARTE MUSEUM _1708_HOUSTON_ST. P. Q. BOX 271062__ EL PASO TX 79968 TEXAS_ FOLKLIFE__ HOUSTON TX 77005 4813 ELLA BLVD. EL PASO TX 79903 HOUSTON TX 77018 HOUSTON IX 77277 MATADOR TX 79244 AUSTIN TX 78756 AUSTIN TX 78701 HUMANITIES TEXAS MEXIA TX 76667 1738 FM 2705 P_0 BOX 582 Name of the organization

Page 2

75-1493438

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. PROGRAM AND SUBMIT A WRITTEN EVALUATION FOR THE FILE MAINTAINED ON THE GRANT. DESK REVIEWS _DOCUMENTS: _NONPROFIT STATUS, BOOKKEEPING PRACTICES, AWARD EXPENDITURES AND COST SHARING ARE PERFORMED ON A SELECT NUMBER OF GRANTEES DURING THE YEAR THAT REVIEWS THE FOLLOWING GRANT IS AWARDED, STAFF, BOARD MEMBERS, OR BOARD ALUMNI ARE ASKED TO ATTEND AN AWARDEES Part IV |Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. PUBLICITY AND ACKNOWLEDGEMENT OF HUMANITES TEXAS, VERIFICATION OF ATTENDANCE FIGURES, THE MAJORITY OF THE GRANTS AWARDED BY ORGANIZATION ARE UNDER \$5,000. ONCE A CONFIRMATION OF CORRECT FEDERAL CFDA NUMBER. A FEW GRANTEES ARE CHOOSEN FOR (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance AN ON-SITE MONITORING VISIT DURING THE YEAR. 95,000 (c) Amount of cash grant Part III can be duplicated if additional space is needed. 19 (b) Number of recipients 1 OUTSTANDING TEACHER AWARD (a) Type of grant or assistance Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_L_Line_2 Pt I Line 2 PT_i_LINE_2 Part III S 9 8 က

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Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

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

Attach to Form 990. See separate instructions.

Information about Schedule J (Form 990) 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		
HUMANITIES TEXAS		75-1493438		
Part I Questions Regarding Compensation				
			Yes	No
1 a Check the appropriate box(es) if the organization provided any of t VII, Section A, line 1a Complete Part III to provide any relevant inf	the following to or for a person listed in Formation regarding these items.	orm 990, Part		
First-class or charter travel	Housing allowance or residence for p	ersonal use		1
Travel for companions	Payments for business use of person	al residence		
Tax indemnification and gross-up payments	Health or social club dues or initiation	fees		İ
Discretionary spending account	Personal services (e.g., maid, chauffe	eur, chef)		
b If any of the boxes on line 1a are checked, did the organization foll reimbursement or provision of all of the expenses described above)	
2 Did the organization require substantiation prior to reimbursing or a trustees, and officers, including the CEO/Executive Director, regard				
3 Indicate which, if any, of the following the filing organization used to CEO/Executive Director. Check all that apply. Do not check any boto establish compensation of the CEO/Executive Director, but explain	exes for methods used by a related organ	inization's nization to		
Compensation committee	Written employment contract			
Independent compensation consultant	Compensation survey or study			
Form 990 of other organizations	Approval by the board or compensation	on committee		
4 During the year, did any person listed in Form 990, Part VII, Sectio or a related organization:	on A, line 1a with respect to the filing orga	nization		
a Receive a severance payment or change-of-control payment?		4 a	ı	X
b Participate in, or receive payment from, a supplemental nonqualifie	ed retirement plan?	4 t		Х
c Participate in, or receive payment from, an equity-based compensation	ation arrangement?	40		Х
If 'Yes' to any of lines 4a-c, list the persons and provide the applica	able amounts for each item in Part III.			
Only section 501(c)(3) and 501(c)(4) organizations must compl	lete lines 5-9.			
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the contingent on the revenues of	organization pay or accrue any compens	sation		
a The organization?			ı	Х
b Any related organization?	• • • • • • • • • • • • • • • • • • • •			Х
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the contingent on the net earnings of	organization pay or accrue any compen	sation		
a The organization?		6a		Х
b Any related organization?			+	X
If 'Yes' to line 6a or 6b, describe in Part III.			1 -	
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the payments not described in lines 5 and 6? If 'Yes,' describe in Part I	organization provide any non-fixed			x
8 Were any amounts reported in Form 990, Part VII, paid or accrued to the initial contract exception described in Regulations section 53 if 'Yes' describe in Part III.	pursuant to a contract that was subject 3.4958-4(a)(3)?			

9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations Page 2

Schedule J (Form 990) 2013 HUMANITIES TEXAS

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title	•	(I) Base compensation	(II) Bonus and incentive compensation	(III) Other reportable compensation	and other deferred compensation	benefits	columns(B)(i)-(D)	reported as deferred in prior Form 990
MICHAEL GILLETTE	€ #	172,400-	0	0	17,672	1, <u>508</u> .	191,580.	0
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Schedule J (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

75-1493438 **HUMANITIES TEXAS** Pt VI, Line 11b Form 990 is prepared by a third party and reviewed and approved by HTX management. In addition the return is included in board <u>orientation manuals and in board meeting notebooks.</u> Pt VI, Line 12c Conflict of interest policy is stated in the bylaws, discussed in board <u>orientation meetings, and emphasized in the grants committee where board</u> members review proposals for funding. Staff also review all areas where there may be a potential conflict of interest. The policy is provided in board meeting notebooks. Pt VI, Line 15a The board of directors, in executive session, conducts an annual review of the <u>executive_director's performance. Decisions regarding compensation are based</u> on performance, comparable salaries of other nonprofit executives, and current financial constraints. Pt VI, Line 15b The executive director authorizes staff compensation based on performance, comparable salaries of other nonprofit staff, and current financial constraints. All staff evaluations are conducted in the course of preparing the annual budget. When necessary, evaluations are conducted in the aftermath of significant projects or programs. Pt VI, Line 19 The bylaws are on HTX's website, and the IRS 990 and audited financial statements are noted as available upon request. Pt XII, Line 2c The Executive Committee, in consulation with the Board of Directors and the Executive Director, is charged with the development, implementation, and evaluation of the administrative and program policies of the council. The Treasurer will provide oversight of the fiscal operations of the council and will provide information to the Board of Directors on the financial status of the council's operations and programs. The Board of Directors will approve selection of an independent accountant for annual audits typically every three years. HTX does undergo an annual audit as required by the U.S. Office of Management Pt XII, Line 3b

Schedule O (Form 990 or 990-EZ) 2013	Page 2
Name of the organization	Employer Identification number
HUMANITIES TEXAS	75-1493438
and_Budget_Circular_A-133	
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Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service

Name of the Organization Employler Identification number

HUMANITIES TEXAS 75-1493438
Part VII Continuation: Officers Directors Trustees Key Employees and

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name and Title	(B)			(0	;)	at apply		(D)	(E)	(F)
Name and The	Average hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estmated amount of other compensation from the organization and related organizations
26 DEBBIE MONTFORD DIRECTOR	0.00	Х						0.	0.	0.
27 CAROL FOXHALL PETERSON DIRECTOR	0.00	Х						0.	0.	0.
28 HECTOR DE J RUIZ DIRECTOR	0.00	Х						0.	0.	0.
29 MICHAEL GILLETTE EXECUTIVE DIRECTOR	40.00			х				172,400.	0.	19,179.
30 YVONNE GONZALEZ DEPUTY DIRECTOR	40.00			х				77,183.	0.	6,420.
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									_	

HUMANITIES TEXAS 75-1493438 1

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

and other humanities disciplines. Humanities Texas strives to strengthen Texas communities and sustain representative democracy by cultivating informed, educated citizens.