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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

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.

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

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:
☒ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
HOUSTON TEXANS FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)Room/suite

TWO NRG PARK

City or town, state or province, country, and ZIP or foreign postal code
HOUSTON, TX 77054

F Name and address of principal officer:
MARILAN LOGAN
TWO NRG PARK
HOUSTON, TX 77054

H(a) Is this a group return for subordinates?
☐ Yes ☒ No

H(b) Are all subordinates included?
☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

D Employer identification number
01-0572814

E Telephone number
(832) 667-2004

G Gross receipts \$ 4,913,040

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.HOUSTONTEXANS.COM/COMMUNITY/

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2002

M State of legal domicile: TX

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
THE HOUSTON TEXANS FOUNDATION IS COMMITTED TO BE CHAMPIONS FOR YOUTH BY ENHANCING THEIR QUALITY OF LIFE. THE FOUNDATION SUPPORTS AND ADMINISTERS PROGRAMS IN EDUCATION, CHARACTER DEVELOPMENT AND HEALTH AND FITNESS TO EMPOWER OUR NEXT GENERATION OF TEXANS.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	4
4	Number of independent voting members of the governing body (Part VI, line 1b)	4
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	0
6	Total number of volunteers (estimate if necessary)	500
7a	Total unrelated business revenue from Part VIII, column (C), line 12	342,154
7b	Net unrelated business taxable income from Form 990-T, line 39	307,039

Revenue

	Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	2,583,050
9	Program service revenue (Part VIII, line 2g)	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,537
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-438,115
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,156,472
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,878,549
14	Benefits paid to or for members (Part IX, column (A), line 4)	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶55,517	
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	347,715
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,226,264
19	Revenue less expenses. Subtract line 18 from line 12	-69,792

Expenses

	Prior Year	Current Year
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,878,549
14	Benefits paid to or for members (Part IX, column (A), line 4)	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶55,517	
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	347,715
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,226,264
19	Revenue less expenses. Subtract line 18 from line 12	-69,792

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,620,438
21	Total liabilities (Part X, line 26)	1,244,676
22	Net assets or fund balances. Subtract line 21 from line 20	375,762

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

MARILAN LOGAN SVP, CFO & TREASURER

Type or print name and title

2020-11-16

Date

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date 2020-11-16	Check <input type="checkbox"/> if self-employed	PTIN P00395735
Firm's name ▶ ERNST & YOUNG LLP			Firm's EIN ▶ 34-6565596	
Firm's address ▶ 111 MONUMENT CIRCLE SUITE 4000 INDIANAPOLIS, IN 46204			Phone no. (317) 681-7445	

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

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

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code:) (Expenses \$	235,920	including grants of \$	235,920) (Revenue \$)
See Additional Data				

4b	(Code:) (Expenses \$	233,736	including grants of \$	233,736) (Revenue \$)
See Additional Data				

4c	(Code:) (Expenses \$	210,000	including grants of \$	210,000) (Revenue \$)
See Additional Data				


(Code:) (Expenses \$	1,517,595	including grants of \$	1,384,939) (Revenue \$)
VARIOUS GRANTS WERE GIVEN TO OTHER CHARITABLE ORGANIZATIONS THAT SUPPORT THE MISSION OF THE HOUSTON TEXANS FOUNDATION.			

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

(Expenses \$	1,517,595	including grants of \$	1,384,939) (Revenue \$)
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4e Total program service expenses ►	2,197,251
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 Yes	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	34
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	9
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	No
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a 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?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
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?			7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?			9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
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	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		12a	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a	
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	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a	No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			15	No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16	No

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	4	
	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	4	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		No
14	Did the organization have a written document retention and destruction policy?		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official		No
b	Other officers or key employees of the organization		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **TX**

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
►MARILAN LOGAN TWO NRG PARK HOUSTON, TX 77054 (832) 667-2126

Part VII**Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JANICE S MCNAIR DIR, CO-FOUNDER, SR CHAIR	1.00	X		X				0	0	0
(2) DANIEL C MCNAIR DIR, CHAIRMAN & CEO	1.00	X		X				0	0	0
(3) RUTH MCNAIR SMITH DIRECTOR	1.00	X						0	0	0
(4) MELISSA MCNAIR DIRECTOR	1.00	X						0	0	0
(5) JAMEY ROOTES PRESIDENT	1.00			X				0	0	0
(6) SUZANNE THOMAS EXEC VP & SECRETARY	1.00			X				0	0	0
(7) MARILAN LOGAN SR VP, CFO & TREASURER	1.00			X				0	0	0
(8) GREGORY K KONDRITZ VP, GEN COUNSEL & SECRETARY	1.00			X				0	0	0
(9) HANNAH MCNAIR VICE PRESIDENT	1.00			X				0	0	0
(10) DEBRA STRAIT VICE PRESIDENT	1.00			X				0	0	0
(11) JENNIFER DAVENPORT EXECUTIVE DIRECTOR	1.00			X				0	0	0

Part VII

1b Sub-Total			
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)	0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Form 990 (2019)										Page 9							
Part VIII Statement of Revenue																	
Check if Schedule O contains a response or note to any line in this Part VIII										<input type="checkbox"/>							
										(A) Total revenue		(B) Related or exempt function revenue		(C) Unrelated business revenue		(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts		1a Federated campaigns		1a													
		b Membership dues		1b													
		c Fundraising events		1c		2,033,512											
		d Related organizations		1d													
		e Government grants (contributions)		1e													
		f All other contributions, gifts, grants, and similar amounts not included above		1f		1,663,371											
		g Noncash contributions included in lines 1a - 1f:\$		1g		190,261											
		h Total. Add lines 1a-1f ▶												3,696,883			
Program Service Revenue				Business Code													
		2a															
		b															
		c															
		d															
		e															
		f All other program service revenue.															
		g Total. Add lines 2a-2f. ▶															
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts) ▶				22,787								22,787			
		4 Income from investment of tax-exempt bond proceeds ▶															
		5 Royalties ▶															
				(i) Real		(ii) Personal											
		6a Gross rents		6a													
		b Less: rental expenses		6b													
		c Rental income or (loss)		6c													
		d Net rental income or (loss) ▶															
				(i) Securities		(ii) Other											
		7a Gross amount from sales of assets other than inventory		7a													
		b Less: cost or other basis and sales expenses		7b													
		c Gain or (loss)		7c													
		d Net gain or (loss) ▶															
		8a Gross income from fundraising events (not including \$ 2,033,512 of contributions reported on line 1c). See Part IV, line 18		8a		322,079											
		b Less: direct expenses		8b		861,346											
		c Net income or (loss) from fundraising events ▶						-539,267						-539,267			
		9a Gross income from gaming activities. See Part IV, line 19		9a		871,291											
		b Less: direct expenses		9b		529,137											
		c Net income or (loss) from gaming activities ▶						342,154				342,154					
		10a Gross sales of inventory, less returns and allowances		10a													
b Less: cost of goods sold		10b															
c Net income or (loss) from sales of inventory ▶																	
Miscellaneous Revenue		Business Code															
11a																	
b																	
c																	
d All other revenue																	
e Total. Add lines 11a-11d ▶																	
12 Total revenue. See instructions ▶						3,522,557		0		342,154		-516,480					

Form 990 (2019)

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 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 domestic organizations and domestic governments. See Part IV, line 21	2,064,595	2,064,595		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	178,333		177,889	444
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	19,833		11,137	8,696
12 Advertising and promotion				
13 Office expenses	1,808		211	1,597
14 Information technology	274		274	
15 Royalties				
16 Occupancy				
17 Travel	1,717		185	1,532
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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.)				
a SAFETY TRAINING	71,447	71,447		
b VOLUNTEER DAY	23,521	23,521		
c MERCHANDISE GIVE-AWAYS	19,818	4,533		15,285
d PRINTING	17,907		16,038	1,869
e All other expenses	76,817	33,155	17,568	26,094
25 Total functional expenses. Add lines 1 through 24e	2,476,070	2,197,251	223,302	55,517
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,212,929	1	1,176,193
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	359,661	4	1,218,999
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	36,401	8	60,702
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	11,447	15	9,675
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,620,438	16	2,465,569	
Liabilities	17 Accounts payable and accrued expenses	1,204,599	17	1,038,470
	18 Grants payable	40,077	18	4,850
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,244,676	26	1,043,320
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	375,762	31	1,422,249
	32 Total net assets or fund balances	375,762	32	1,422,249
33 Total liabilities and net assets/fund balances	1,620,438	33	2,465,569	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,522,557
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,476,070
3	Revenue less expenses. Subtract line 2 from line 1	3	1,046,487
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	375,762
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,422,249

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

Software ID:
Software Version:
EIN: 01-0572814
Name: HOUSTON TEXANS FOUNDATION

Form 990 (2019)

Form 990, Part III, Line 4a:

HOUSTON FOOD BANK TO PROVIDE SUPPORT FOR THE VARIOUS HOUSTON FOOD BANK PROGRAMS SUCH AS BACKPACK BUDDY PROGRAM, KIDS CAFE AT BOYS AND GIRLS CLUBS, COOKING MATTERS PROGRAM & THE TASTE OF THE TEXANS. HOUSTON FOOD BANK PROVIDES ACCESS TO NUTRITIOUS MEALS AND PROVIDES CHILD HUNGER-RELIEF, NUTRITION EDUCATION AND FOOD COLLECTION PROGRAMS.

Form 990, Part III, Line 4b:

YMCA OF GREATER HOUSTON TO PROVIDE SUPPORT FOR THE YMCA OF GREATER HOUSTON'S 2019 BETTER US CAMPAIGN. THE PROGRAM FOCUSES IN THE FOLLOWING INITIATIVES: TO IMPROVE ACADEMIC PERFORMANCE; ELIMINATE CHRONIC DISEASE & CHILDHOOD OBESITY; ELIMINATE DROWNING & CREATE OPPORTUNITIES FOR SOCIAL EQUITY.

Form 990, Part III, Line 4c:

DEPELCHIN CHILDREN'S CENTER TO PROVIDE SUPPORT FOR DEPELCHIN CHILDREN'S CENTER'S WORK WITH FOSTER CARE AND ADOPTION SERVICES FOR FAMILIES THROUGHOUT THE GREATER HOUSTON AREA. DEPELCHIN'S FOSTER CARE PROGRAM SPECIALIZES IN PLACEMENT AND CARE OF HIGH NEED CHILDREN. DEPELCHIN'S CPS ADOPTION PROGRAM SUPPORTS COUPLES AND INDIVIDUALS WHO WISH TO ADOPT CHILDREN IN THE CUSTODY OF CHILD PROTECTIVE SERVICES WHO NEED A PERMANENT, LOVING HOME.

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
HOUSTON TEXANS FOUNDATION

Employer identification number
01-0572814

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 12, check only one box.)

- 1 ☐ 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 (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	2,055,997	2,387,255	2,057,589	2,583,050	3,696,883	12,780,774
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	2,055,997	2,387,255	2,057,589	2,583,050	3,696,883	12,780,774
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) . . .						2,052,506
6	Public support. Subtract line 5 from line 4.						10,728,268
Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .	2,055,997	2,387,255	2,057,589	2,583,050	3,696,883	12,780,774
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	1,253	3,646	7,576	11,537	22,787	46,799
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .					307,039	307,039
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11	Total support. Add lines 7 through 10						13,134,612
12	Gross receipts from related activities, etc. (see instructions)					12	322,079
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>							
Section C. Computation of Public Support Percentage							
14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))					14	81.680 %
15	Public support percentage for 2018 Schedule A, Part II, line 14					15	89.480 %
16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>							
b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>							
17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>							
b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>							
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>							

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .						
10a 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 VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . .						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2018. 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 ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
1		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
2		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
3a		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3b		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
4a		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
4c		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
7		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9a		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9b		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10a		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
10b		

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1

☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 01-0572814

Name: HOUSTON TEXANS FOUNDATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 TASTE OF THE NFL (event type)	(c) Other events 13 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	378,050	347,250	1,630,291	2,355,591
	2 Less: Contributions	323,533	278,820	1,431,159	2,033,512
	3 Gross income (line 1 minus line 2)	54,517	68,430	199,132	322,079
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	67,722	7,913		75,635
	6 Rent/facility costs	5,110	21,077		26,187
	7 Food and beverages	41,251	2,125		43,376
	8 Entertainment		2,374		2,374
	9 Other direct expenses	15,237	16,864	681,673	713,774
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				861,346
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-539,267

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue	1 Gross revenue			871,291	871,291
	2 Cash prizes			392,075	392,075
	3 Noncash prizes				
	4 Rent/facility costs			2,797	2,797
	5 Other direct expenses			134,265	134,265
Direct Expenses	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				529,137
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				342,154

9 Enter the state(s) in which the organization conducts gaming activities: TX

a Is the organization licensed to conduct gaming activities in each of these states? ☒ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☒ No

b If "Yes," explain: _____

11

Does the organization conduct gaming activities with nonmembers?

☒ Yes

☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes

☒ No

13

Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	100.000 %
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

MARILAN LOGAN

Address ▶

TWO NRG PARK HOUSTON, TX 77054

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes

☒ No

b

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$.

c

If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16

Gaming manager information:

Name ▶

EMILY BRUSS

Gaming manager compensation ▶

\$

Description of services provided ▶

OVERSEES THE EVENT AND MANAGES THE STAFF, VOLUNTEERS, MARKETING SUPPORT, LOGISTICAL OPERATIONS AND FULFILLMENT TO WINNER.

☐ Director/officer

☒ Employee

☐ Independent contractor

17

Mandatory distributions:

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes

☒ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
------------------	-------------

Schedule G (Form 990 or 990-EZ) 2019

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
HOUSTON TEXANS FOUNDATION

Employer identification number

01-0572814

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 75
- 3 Enter total number of other organizations listed in the line 1 table ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

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

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

Return Reference	Explanation
PART I, LINE 2:	THE HOUSTON TEXANS FOUNDATION EXERCISES DUE DILIGENCE TO DETERMINE THAT ALL RECIPIENTS ARE QUALIFIED PUBLIC CHARITIES IN GOOD STANDING AND WILL USE THE FUNDS FOR THEIR INTENDED PURPOSE IN SUPPORT OF THE FOUNDATION'S MISSION.

Additional Data

Software ID:
Software Version:
EIN: 01-0572814
Name: HOUSTON TEXANS FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
THE METHODIST HOSPITAL FOUNDATION 1707 SUNSET HOUSTON, TX 77005	76-0094743	501(C)(3)	14,246				PURSUIT OF EXCELLENCE IN RESEARCH, EDUCATION AND PATIENT CARE.
DEPELCHIN CHILDREN'S CENTER 4950 MEMORIAL DRIVE HOUSTON, TX 77007	76-0318867	501(C)(3)	210,000				STRENGTHEN THE LIVES OF CHILDREN BY ENHANCING THEIR MENTAL HEALTH AND PHYSICAL WELL-BEING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
LAMAR CONSOLIDATED INDEPENDENT SCHOOL DISTRICT 3911 AVENUE I ROSENBERG, TX 77471	74-6002016	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK
ALIEF ISD - HASTINGS HIGH SCHOOL FOOTBALL PO BOX 68 ALIEF, TX 77411	74-6000019	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
PEARLAND ISD - DAWSON HIGH SCHOOL 1928 N MAIN PEARLAND, TX 77581	74-6001854	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK
HARDIN-JEFFERSON INDEPENDENT SCHOOL DISTRICT PO BOX 2003 SOUR LAKE, TX 77659	74-6002329	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON INDEPENDENT SCHOOL DISTRICT - FURR HIGH SCHOOL 4400 WEST 18TH STREET HOUSTON, TX 77092	74-6001255	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK
TOMPKINS HIGH SCHOOL ATHLETIC BOOSTER CLUB 4400 FALCON LANDING BLVD KATY, TX 77494	46-2624581	501(C)(3)	2,500				COACH OF THE WEEK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON INDEPENDENT SCHOOL DISTRICT - STEPHEN F AUSTIN HIGH SCHOOL 4400 WEST 18TH STREET HOUSTON, TX 77092	74-6001255	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK
FORT BEND ISD 16431 LEXINGTON BLVD SUGAR LAND, TX 77479	74-6025253	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HISD 4400 WEST 18TH STREET HOUSTON, TX 77092	74-6001255	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK
HISD 4400 WEST 18TH STREET HOUSTON, TX 77092	74-6001255	GOVERNMENT ENTITY	5,000				COACH OF THE WEEK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
REDSTONE RAVENS FOOTBALL 7031 TIMBER EDGE LANE HUMBLE, TX 77346	81-2200225	501(C)(3)	5,000				TEAM EQUIPMENT
KATY ISD 6301 STADIUM LANE KATY, TX 77494	74-6001484	GOVERNMENT ENTITY	5,000				COACH OF THE WEEK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
J FRANK DOBIE HIGH SCHOOL 10220 BLACKHAWK BLVD HOUSTON, TX 77089	74-6001850	GOVERNMENT ENTITY	2,500				COACH OF THE WEEK
ALLIANCE FOR MULTICULTURAL 6440 HILLCROFT AVE STE 411 HOUSTON, TX 77081	76-0171217	501(C)(3)	5,000				COMMUNITY QB AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
SAN JOSE CLINIC 2615 FANNIN ST HOUSTON, TX 77002	76-0373703	501(C)(3)	5,000				COMMUNITY QB AWARD
AVDA INC 1001 TEXAS AVE STE 600 HOUSTON, TX 77002	74-2141981	501(C)(3)	5,000				COMMUNITY QB AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
CHRISTIAN COMMUNITY SERVICES PO BOX 27924 HOUSTON, TX 77227	74-2128141	501(C)(3)	25,000				COMMUNITY QB AWARD
EASTER SEALS OF GREATER HOUSTON 4500 BISSONNET STE 340 BELLAIRE, TX 77401	74-1238418	501(C)(3)	5,000				COMMUNITY QB AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
WESLEY COMMUNITY CENTER 1410 LEE ST HOUSTON, TX 77009	74-1132578	501(C)(3)	5,000				COMMUNITY QB AWARD
THE WOMEN'S RESOURCE 30 N POST OAK RD STE 204 HOUSTON, TX 77024	76-0318261	501(C)(3)	5,000				COMMUNITY QB AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
GOODWILL 1140 WEST LOOP NORTH HOUSTON, TX 77055	74-1285095	501(C)(3)	5,000				COMMUNITY QB AWARD
HOUSTON AREA WOMENS CENTER 1010 WAUGH DR HOUSTON, TX 77019	74-2029166	501(C)(3)	5,000				COMMUNITY QB AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON POLICE FOUNDATION 1200 TRAVIS ST HOUSTON, TX 77002	20-1209272	501(C)(3)	10,000				PAL PROGRAM, YOUTH FITNESS ZONE
RESTORING JUSTICE PO BOX 2813 HOUSTON, TX 77252	81-3279488	501(C)(3)	7,500				NFL SOCIAL JUSTICE GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
SPARK HUDDLE FOR 100 PO BOX 1562 HOUSTON, TX 77019	75-2388253	501(C)(3)	10,000				HUDDLE FOR 100
SER-JOBS FOR PROGRESS OF THE TEXAS GULF COAS 6565 ROOKIN STREET HOUSTON, TX 770745013	74-1590387	501(C)(3)	7,500				NFL SOCIAL JUSTICE GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
GOOD SPORTS INC 1515 WASHINGTON ST STE 300 BRAintree, MA 02184	75-3138664	501(C)(3)	1,400				PROVIDE EQUIPMENT, APPAREL & FOOTWEAR
HOPE LODGE HOUSTON - AMERICAN CANCER SOCIETY 6301 RICHMOND HOUSTON, TX 77057	13-1788491	501(C)(3)	13,225				SAVE LIVES, CELEBRATE LIVES, AND LEAD THE FIGHT FOR A WORLD WITHOUT CANCER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
THE METHODIST HOSPITAL FOUNDATION 1707 SUNSET HOUSTON, TX 77005	76-0094743	501(C)(3)	130,590				PURSUIT OF EXCELLENCE IN RESEARCH, EDUCATION AND PATIENT CARE.
UNITED WAY OF GREATER HOUSTON 50 WAUGH DRIVE HOUSTON, TX 77007	74-1167964	501(C)(3)	2,902				SUPPLIES FOR TEXANS VOLUNTEER CARE DAY: THE BRIDGE OVER TROUBLED WATERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
KIDS TRIATHLON INC 2317 BLANDING BOULEVARD JACKSONVILLE, FL 32210	74-1255635	501(C)(3)	14,928				ORGANIZING KIDS TRIATHLONS AROUND THE NATION.
AMERICAN NATIONAL RED CROSS 431 18TH ST NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	5,000				ASSISTANCE WITH NATURAL DISASTER IN A RED CROSS SHELTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
BO'S PLACE 10050 BUFFALO SPEEDWAY HOUSTON, TX 77054	76-0326979	501(C)(3)	10,000				BEREAVEMENT CENTER OFFERING GRIEF SUPPORT SERVICES.
BOYS & GIRLS CLUBS OF GREATER HOUSTON 815 CROSY ST HOUSTON, TX 77019	76-0270942	501(C)(3)	150,000				TO FACILITATE THE GROWTH OF TODAY'S YOUTH.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
TEXAS SPORTS HALL OF FAME 1108 SOUTH UNIVERSITY OAKS DR WACO, TX 76706	74-2603242	501(C)(3)	5,000				PRESERVES THE LEGACIES OF OUR INDUCTEES & THE HISTORY OF SPORTS IN TX IN ORDER TO EDUCATE & INSPIRE GUESTS OF ALL AGES.
UNITED SERVICE ORGANIZATIONS INC PO BOX 96860 WASHINGTON, DC 200777677	13-1610451	501(C)(3)	500				PROVIDED ASSISTANCE TO MILITARY FAMILIES IN NEED DUE TO GOVERNMENT SHUTDOWN.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
TEXAS CHILDREN'S HOSPITAL PO BOX 300630 HOUSTON, TX 77230	74-1100555	501(C)(3)	50,000				TEXAS CHILDREN'S INPATIENT REHABILITATION UNIT.
BOYS & GIRLS CLUBS OF GREATER HOUSTON 815 CROSY ST HOUSTON, TX 77019	76-0270942	501(C)(3)	250				RISE AND SHINE BREAKFAST DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
WOMEN IN SPORTS AND EVENTS INC 5225 KATY FREEWAY STE 230 HOUSTON, TX 77007	47-5525789	501(C)(3)	2,500				WISE CHAPTER OF HOUSTON
SER-JOBS FOR PROGRESS OF THE TEXAS GULF COAST 6565 ROOKIN ST HOUSTON, TX 770745013	74-1590387	501(C)(3)	25,000				SOCIAL JUSTICE FUND - 8 MILLION STORIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
YMCA OF GREATER HOUSTON PO BOX 3007 HOUSTON, TX 772533007	74-7109737	501(C)(3)	50,000				SOCIAL JUSTICE INITIATIVE
RESTORING JUSTICE PO BOX 2813 HOUSTON, TX 77252	81-3279488	501(C)(3)	25,000				SOCIAL JUSTICE FUND.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
YMCA OF GREATER HOUSTON PO BOX 3007 HOUSTON, TX 772533007	74-7109737	501(C)(3)	109,712				HOUSTON TEXANS YMCA BETTER US 2019
HOUSTON METHODIST HOSPITAL 1707 SUNSET HOUSTON, TX 77005	76-0094743	501(C)(3)	25,000				CERTIFIED ATHLETIC TRAINER GRANT.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
KIDS TRIATHLON INC 8740 HAMPSHIRE GLEN DR JACKSONVILLE, FL 32256	27-1125911	501(C)(3)	390				BUDDY PROGRAM SPONSORSHIP OF 6 YOUTH.
YMCA OF GREATER HOUSTON PO BOX 3007 HOUSTON, TX 772533007	74-7109737	501(C)(3)	5,000				HOUSTON TEXANS YMCA BETTER US 2019

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
PRO-VISION INC 4590 WILMINGTON STREET HOUSTON, TX 77051	76-0336711	501(C)(3)	10,000				INSPIRE HOPE AND PURPOSE INTO YOUNG PEOPLE, FAMILIES & COMMUNITIES, THROUGH ACCESS TO ACADEMIC, ECONOMIC & SOCIAL ENRICHMENT OPPORTUNITIES.
ZOEY'S ANGELS INC 16107 KENSINGTON DRIVE PMB 427 SUGAR LAND, TX 77479	45-5412426	501(C)(3)	5,000				SUPPORTING FAMILIES WHO NEED A BRIGHT SPOT ALONG THEIR JOURNEY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
CY-HOPE INC 12715 TELGE RD CYPRESS, TX 77429	45-2346150	501(C)(3)	5,000				MAKE LIFE BETTER FOR ALL KIDS IN CY-FAIR; TO BRING HOPE TO ALL STUDENTS AND TO MAKE A LASTING & POSITIVE IMPACT TO THE COMMUNITY
EL PASO COMMUNITY FOUNDATION 333 N OREGON 2ND FL EL PASO, TX 79901	74-1839536	501(C)(3)	50,000				ASSISTANCE WITH NATURAL DISASTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
TRAUMA TO TRIUMPH AKA THE WAVE CAMPAIGN PO BOX 752 HOUSTON, TX 77001	46-1130048	501(C)(3)	5,000				SERVE, ADVOCATE AND EMPOWER THE WOMEN OF THE US ARMED FORCES
SOUTHERN INVITATIONAL SMOKE 1701 CALIFORNIA HOUSTON, TX 77006	81-2423050	501(C)(3)	5,000				PROVIDE SUPPORT & ASSISTANCE FOR THOSE IN THE FOOD AND BEVERAGE COMMUNITY AND THEIR SUPPLIERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
CAMP ALLEN 18800 FM 362 NAVASOTA, TX 77868	74-6016479	501(C)(3)	10,000				STARRY NIGHTS AND CAMPFIRE LIGHTS EVENT - TO BRIDGE THE FINANCIAL GAP FOR CAMPER FAMILIES AND STUDENTS.
HOUSTON ZOO 1513 CAMBRIDGE STREET HOUSTON, TX 77030	74-1590271	501(C)(3)	37,000				HOUSTON TEXANS ENRICHMENT ZONE; REFURBISHMENT OF THE BUTTERFLY STAGE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
BAKER RIPLEY PO BOX 271389 HOUSTON, TX 772771389	23-7062976	501(C)(3)	2,500				TRANSFORMING NEIGHBORHOODS THROUGH THEIR WORK IN IMMIGRATION, EDUCATION, WORKFORCE DEVELOPMENT, COMMUNITY ENGAGEMENT, AND HEALTH & WELLNESS PROGRAMS
HARRIS COUNTY PRECINCT ONE ST OLYMPICS 1001 PRESTON AVE STE 950 HOUSTON, TX 77002	76-0227692	501(C)(3)	15,000				STREET OLYMPICS IS A YEAR-ROUND PROGRAMMING FOCUSED ON STRENGTHENING THE MIND, BODY AND HEART OF YOUTH IN THE NEIGHBORHOODS ACROSS PRECINCT ONE.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON AREA WOMEN'S CENTER 1010 WAUGH DRIVE HOUSTON, TX 77019	74-2029166	501(C)(3)	20,000				TO END DOMESTIC AND SEXUAL VIOLENCE AND SUPPORTS BUILDING A SAFE AND HEALTHY LIFE THROUGH ADVOCACY, COUNSELING, EDUCATION, SHELTER AND SUPPORT SERVICES.
LATINOS FOR EDUCATION INC PO BOX 27 BELMONT, MA 02478	81-2883649	501(C)(3)	2,500				DEVELOPING AND PLACING LATINO TALENT IN THE EDUCATION SECTOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
SOUPER BOWL OF CARING PO BOX 23224 COLUMBIA, SC 29224	58-2323535	501(C)(3)	10,000				WORLD HUNGER RELIEF
TEXAS SPORTS HALL OF FAME 1108 SOUTH UNIVERSITY OAKS DR WACO, TX 76706	74-2603242	501(C)(3)	10,000				PRESERVES THE LEGACIES OF OUR INDUCTEES & THE HISTORY OF SPORTS IN TX IN ORDER TO EDUCATE & INSPIRE GUESTS OF ALL AGES.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON FOOD BANK 535 PORTWALL ST HOUSTON, TX 77029	74-2181456	501(C)(3)	100,000				PROVIDE FOOD AND NUTRITION EDUCATION
THE 100 CLUB INC 5555 SAN FELIPE ST STE 1750 HOUSTON, TX 770565527	74-1509204	501(C)(3)	10,000				FOR THE FALLEN HOUSTON FIRE FIGHTERS.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
UNITED WAY OF GREATER HOUSTON 50 WAUGH DRIVE HOUSTON, TX 77007	74-1167964	501(C)(3)	100,000				TO BUILD INFRASTRUCTURE NEEDED TO SUPPORT THE WORK OF SECOND CENTURY VISION
HOUSTON AREA WOMEN'S CENTER 1010 WAUGH DRIVE HOUSTON, TX 77019	74-2029166	501(C)(3)	5,000				2019 LEADERSHIP CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
FIREFIGHTERS HELPING FIREFIGHTERS PO BOX 773 HOUSTON, TX 77002	47-3641629	501(C)(3)	250				SUPPORT HOUSTON FIRE DEPARTMENT MEMBERS IN CRISIS
HARDIN-JEFFERSON INDEPENDENT SCHOOL DISTRICT PO BOX 2003 SOUR LAKE, TX 77659	74-6002329	GOVERNMENT ENTITY	5,000				ASSISTANCE WITH NATURAL DISASTER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
BOYS & GIRLS CLUBS OF GREATER HOUSTON 815 CROSY ST HOUSTON, TX 77019	76-0270942	501(C)(3)	20,000				SUPPORT COMMUNITY MARKET PANTRY
ALIEF ISD 4250 COOK ROAD HOUSTON, TX 77072	74-6000019	GOVERNMENT ENTITY	500				HONOR AND REWARD HOUSTON AND SURROUNDING AREA TEACHERS FOR THEIR OUTSTANDING WORK.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
CYPRESS FAIRBANKS ISD - POPE ELEMENTARY PO BOX 692003 HOUSTON, TX 77269	74-6000654	GOVERNMENT ENTITY	500				HONOR AND REWARD HOUSTON AND SURROUNDING AREA TEACHERS FOR THEIR OUTSTANDING WORK.
CYPRESS FAIRBANKS ISD - TRUITT MIDDLE SCHOOL PO BOX 692003 HOUSTON, TX 77269	74-6000654	GOVERNMENT ENTITY	500				HONOR AND REWARD HOUSTON AND SURROUNDING AREA TEACHERS FOR THEIR OUTSTANDING WORK.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON FOOD BANK 535 PORTWALL ST HOUSTON, TX 77029	74-2181456	501(C)(3)	10,000				SUPPORT COMMUNITY MARKET PANTRY
SPRING BRANCH ISD - BUFFALO CREEK ELEMENTARY 955 CAMPBELL RD HOUSTON, TX 77024	74-6001379	GOVERNMENT ENTITY	1,000				HONOR AND REWARD HOUSTON AND SURROUNDING AREA TEACHERS FOR THEIR OUTSTANDING WORK.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
SPRING BRANCH ISD - MEMORIAL HIGH SCHOOL 955 CAMPBELL RD HOUSTON, TX 77024	74-6001379	GOVERNMENT ENTITY	500				HONOR AND REWARD HOUSTON AND SURROUNDING AREA TEACHERS FOR THEIR OUTSTANDING WORK.
MCNEILL ELEMENTARY 3911 AVENUE I ROSENBERG, TX 77471	74-6002016	GOVERNMENT ENTITY	1,000				HONOR AND REWARD HOUSTON AND SURROUNDING AREA TEACHERS FOR THEIR OUTSTANDING WORK.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
AMERICA'S VETDOGS 371 EAST JERICHO TURNPIKE SMITHTOWN, NY 11787	20-8814368	501(C)(3)	6,000				TRAINING FOR A PUPPY-IN-TRAINING
NEXTOP INC 2929 MCKINNEY ST HOUSTON, TX 77003	47-1429344	501(C)(3)	25,000				STEP INTO ENERGY CAMPAIGN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
THE GOOD GANG USA 1023 PINEMONT DR HOUSTON, TX 77018	76-0538610	501(C)(3)	10,000				COMBAT JUVENILE DELINQUENCY
YMCA OF GREATER HOUSTON PO BOX 3007 HOUSTON, TX 772533007	74-7109737	501(C)(3)	100,000				HOUSTON TEXANS YMCA BETTER US 2019

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
GREATER HOUSTON COMMUNITY FOUNDATION PO BOX 27410 HOUSTON, TX 77027	23-7160400	501(C)(3)	20,000				ASSISTANCE WITH NATURAL DISASTER
YMCA OF GREATER HOUSTON PO BOX 3007 HOUSTON, TX 772533007	74-7109737	501(C)(3)	19,024				HOUSTON TEXANS YMCA BETTER US 2019

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
OPERATION FINALLY HOME 1659 STATE HWY 46 WEST NEW BRAUNFELS, TX 78132	20-8964096	501(C)(3)	20,000				HOME GIVE AWAY
THE METHODIST HOSPITAL FOUNDATION 1707 SUNSET HOUSTON, TX 77005	76-0094743	501(C)(3)	50,000				TELEMEDICINE PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
BOYS & GIRLS CLUBS OF GREATER HOUSTON 815 CROSY ST HOUSTON, TX 77019	76-0270942	501(C)(3)	10,000				TO FACILITATE THE GROWTH OF TODAY'S YOUTH.
ED BLOCK COURAGE 9727 GREENSIDE DR 201 COCKEYSVILLE, MD 21030	52-1465729	501(C)(3)	750				SUPPORT THE WELL-BEING OF ABUSED, NEGLECTED, AND AT-RISK CHILDREN.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
TEXAS STATE UNIVERSITY 601 UNIVERSITY DR SAN MARCOS, TX 78666	74-6002248	GOVERNMENT ENTITY	5,000				RELIANT SCHOLARSHIP - JASON WILLIAMS
THE UNIVERSITY OF TEXAS AT AUSTIN 100 WEST DEAN KEATON AUSTIN, TX 78712	74-6000203	GOVERNMENT ENTITY	5,000				RELIANT SCHOLARSHIP - PASCALINE CHUMA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
THE UNIVERSITY OF TEXAS AT AUSTIN 100 WEST DEAN KEATON AUSTIN, TX 78712	74-6000203	GOVERNMENT ENTITY	5,000				RELIANT SCHOLARSHIP - CHAD GRAHAM
MISSISSIPPI VALLEY STATE UNIVERSITY 1400 HIGHWAY 82 WEST 7265 ITTA BENNA, MS 38941	64-6001395	GOVERNMENT ENTITY	5,000				RELIANT SCHOLARSHIP - CHANELLE HOUSTON

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
LOUISIANA STATE UNIVERSITY EUNICE PO BOX 1129 EUNICE, LA 70535	72-6000848	GOVERNMENT ENTITY	5,000				RELIANT SCHOLARSHIP - JESUS INIGUEZ
TRINITY UNIVERSITY ONE TRINITY PLACE SAN ANTONIO, TX 78212	74-1109633	501(C)(3)	5,000				RELIANT SCHOLARSHIP - JARED CLARK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	5,000				RELIANT SCHOLARSHIP - HALEY SAMUELSON
XAVIER UNIVERSITY OF LOUISIANA 1 DREXEL DR NEW ORLEANS, LA 70125	72-0635884	501(C)(3)	5,000				RELIANT SCHOLARSHIP - YAA AGYEMAN-YEBOAH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
USA FOOTBALL INC 45 N PENNSYLVANIA ST INDIANAPOLIS, IN 46204	11-3667205	501(C)(3)	2,440				YOUTH FOOTBALL CERTIFICATES
USA FOOTBALL INC 45 N PENNSYLVANIA ST INDIANAPOLIS, IN 46204	11-3667205	501(C)(3)	2,970				YOUTH COACH TRAINING & OFFICIATING CERTIFICATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
HOUSTON FOOD BANK 535 PORTWALL STREET HOUSTON, TX 77026	74-2181456	501(C)(3)	135,920				LEADING THE FIGHT AGAINST HUNGER. THE HOUSTON FOOD BANK IS A SOLUTION TO BOTH HUNGER AND FOOD WASTE.
YMCA OF GREATER HOUSTON PO BOX 9007 HOUSTON, TX 772533007	74-7109737	501(C)(3)		190,598	FMV	HOUSTON TEXANS TICKETS, MERCHANDISE GIVE-AWAYS	CHEERING CHILDREN TICKET DONATION PROGRAM

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
HOUSTON TEXANS FOUNDATION

Employer identification number
01-0572814

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (GAME TICKETS)	X	245	190,261	FMV
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

No

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Cat. No. 51227J

Schedule M (Form 990) (2019)

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

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
HOUSTON TEXANS FOUNDATION

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.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

01-0572814

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THE MEMBERS OF THE BOARD OF DIRECTORS: JANICE S. MCNAIR, DANIEL C. MCNAIR, RUTH MCNAIR SMITH AND MELISSA MCNAIR, HAVE FAMILIAL RELATIONSHIP.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	REVIEWED BY MARILAN LOGAN, SVP, CFO & TREASURER, BEFORE THE RETURN IS FILED WITH THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINES 12, 13, 14	THE HOUSTON TEXANS FOUNDATION DO NOT HAVE EMPLOYEES. HOUSTON NFL HOLDINGS, LP, A RELATED ORGANIZATION, HAS THE FOLLOWING POLICIES: CONFLICT OF INTEREST POLICY, WHISTLE BLOWER POLICY AND DOCUMENT RETENTION & DESTRUCTION POLICY; WHICH APPLIES TO ALL INDIVIDUALS & OTHER ORGANIZATIONS PROVIDING SERVICES TO THE HOUSTON TEXANS FOUNDATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE HOUSTON TEXANS FOUNDATION GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
HOUSTON TEXANS FOUNDATION

Employer identification number
01-0572814

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

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)THE ROBERT AND JANICE MCNAIR FOUNDATION 109 N POST OAK LN STE 600 HOUSTON, TX 77024 76-6050185	PRIVATE GRANT MAKING FOUNDATION	TX	501(C)(3)	PF	N/A		No

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.

See Additional Data Table

(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	

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) HOUSTON NFL HOLDINGS GP LLC TWO NRG PARK HOUSTON, TX 77054 76-0569494	INVESTMENT IN PROFESSIONAL SPORTS TEAM	TX	N/A	S					No
(2) PALMETTO TRUST 109 N POST OAK STE 600 HOUSTON, TX 77024 83-6815028	INVESTMENT MANAGEMENT	TX	N/A	T					No
(3) RCM FAMILY EXEMPT TRUST 109 N POST OAK STE 600 HOUSTON, TX 77024 83-6780656	INVESTMENTS	TX	N/A	T					No

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.

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

Yes

1p

Yes

1q

No

1r

No

1s

No

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

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.

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 01-0572814

Name: HOUSTON TEXANS FOUNDATION

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(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) Disproporionate 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	
HOUSTON NFL HOLDINGS LP TWO NRG PARK HOUSTON, TX 77054 76-0577144	PROFESSIONAL SPORTS TEAM	TX	N/A	N/A				No			No	
RCM SPORTS & LEISURE LP TWO NRG PARK HOUSTON, TX 77054 76-0577137	INVESTMENT IN PROFESSIONAL SPORTS TEAM	TX	N/A	N/A				No			No	
HOUSTON LIMITED PARTNERS NFL HOLDINGS LP TWO NRG PARK HOUSTON, TX 77054 76-0622772	INVESTMENT IN PROFESSIONAL SPORTS TEAM	TX	N/A	N/A				No			No	
HOUSTON LIMITED PARTNERS NFL HOLDINGS GP LLC TWO NRG PARK HOUSTON, TX 77054 76-0622771	INVESTMENT IN PROFESSIONAL SPORTS TEAM	TX	N/A	N/A				No			No	
RCM ENTERTAINMENT LP TWO NRG PARK HOUSTON, TX 77054 30-0116097	PROMOTE ENTERTAINMENT EVENTS	TX	N/A	N/A				No			No	
MCNAIR INTERESTS LTD TWO NRG PARK HOUSTON, TX 77054 76-0424514	INVESTMENTS	TX	N/A	N/A				No			No	
COGENE BIOTECH VENTURES GP LLC TWO NRG PARK HOUSTON, TX 77054 76-0647365	INVESTMENTS	TX	N/A	N/A				No			No	
COGENE BIOTECH VENTURES II GP LLC TWO NRG PARK HOUSTON, TX 77054 20-1201932	INVESTMENTS	TX	N/A	N/A				No			No	
LA PORTE LOGISTICS LLC TWO NRG PARK HOUSTON, TX 77054 83-3422179	INVESTMENTS	TX	N/A	N/A				No			No	
MCNAIR REAL ESTATE DEVELOPMENT LLC TWO NRG PARK HOUSTON, TX 77054 84-4469740	INVESTMENTS	TX	N/A	N/A				No			No	
MI POB LLC TWO NRG PARK HOUSTON, TX 77054 47-1065264	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO BW GP LLC TWO NRG PARK HOUSTON, TX 77054 47-1953735	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO BW LP TWO NRG PARK HOUSTON, TX 77054 47-1935530	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO KIAWAH CAPITAL LLC TWO NRG PARK HOUSTON, TX 77054 38-4021661	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO KIAWAH RIVER LLC TWO NRG PARK HOUSTON, TX 77054 81-3296060	INVESTMENTS	TX	N/A	N/A				No			No	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(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	
PALMETTO PARTNERS 2011 LP TWO NRG PARK HOUSTON, TX 77054 45-4083764	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2012 LP TWO NRG PARK HOUSTON, TX 77054 45-4248115	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2013 LP TWO NRG PARK HOUSTON, TX 77054 46-2395714	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTERNS 2014 LP TWO NRG PARK HOUSTON, TX 77054 46-4678488	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2015 LP TWO NRG PARK HOUSTON, TX 77054 47-2770369	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2016 LP TWO NRG PARK HOUSTON, TX 77054 81-1853989	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2017 LP TWO NRG PARK HOUSTON, TX 77054 81-5333322	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2018 LP TWO NRG PARK HOUSTON, TX 77054 83-0822206	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS 2019 LP TWO NRG PARK HOUSTON, TX 77054 83-4573601	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS ARDMORE GP LLC TWO NRG PARK HOUSTON, TX 77054 81-2357596	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS ARDMORE LP TWO NRG PARK HOUSTON, TX 77054 38-4003568	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PARTNERS CAPITAL COMPANY LLC TWO NRG PARK HOUSTON, TX 77054 81-1643086	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PELICAN PARTNERS GP LLC TWO NRG PARK HOUSTON, TX 77054 80-0787727	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PELICAN PARTNERS LP TWO NRG PARK HOUSTON, TX 77054 45-4613419	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO SPV FB107 GP LLC TWO NRG PARK HOUSTON, TX 77054 47-3222301	INVESTMENTS	TX	N/A	N/A				No			No	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(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) Disproporionate 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	
PALMETTO SPV FB107 LP TWO NRG PARK HOUSTON, TX 77054 61-1756316	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO WYNDEN DEVELOPMENT LLC TWO NRG PARK HOUSTON, TX 77054 82-3128783	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO WYNDEN GP LLC TWO NRG PARK HOUSTON, TX 77054 61-1694490	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO WYNDEN LP TWO NRG PARK HOUSTON, TX 77054 35-2457019	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO-HTC LLC TWO NRG PARK HOUSTON, TX 77054 47-2687810	INVESTMENTS	TX	N/A	N/A				No			No	
POB DEVELOPERS LLC TWO NRG PARK HOUSTON, TX 77054 81-4953492	INVESTMENTS	TX	N/A	N/A				No			No	
MCNAIR INTERESTS GP LLC TWO NRG PARK HOUSTON, TX 77054 30-0720006	INVESTMENTS	TX	N/A	N/A				No			No	
CGC ROYALTY INVESTMENTS I LLC 3899 MAPLE AVE STE 100 DALLAS, TX 75219 27-4983239	INVESTMENTS	TX	N/A	N/A				No			No	
MISSION KURLAND INVESTORS LP 14825 SAINT MARYS LN STE 125 HOUSTON, TX 77079 32-0391880	INVESTMENTS	TX	N/A	N/A				No			No	
MISSON KURLAND ANNEX INVESTOR 14825 SAINT MARYS LN STE 125 HOUSTON, TX 77079 80-0871297	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO WYNDEN LP TWO NRG PARK HOUSTON, TX 77054 35-2457019	INVESTMENTS	TX	N/A	N/A				No			No	
CGC ROYALTY INVESTMENTS II LP 3899 MAPLE AVE STE 100 DALLAS, TX 75219 30-0810847	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO-CYPRESS MADWIRE LLC 3899 MAPLE AVE STE 100 DALLAS, TX 75219 32-0462920	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTOWIHA FB107 LP 750 BERING DR STE 130 HOUSTON, TX 77057 47-3200107	INVESTMENTS	TX	N/A	N/A				No			No	
PALMETTO PONTIKES LP 1885 SAINT JAMES PL STE 1100 HOUSTON, TX 77056 82-3069990	INVESTMENTS	TX	N/A	N/A				No			No	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(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) Disproporionate 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	
ABBY BAYTOWN HOLDINGS LLC 3333 WELBORN ST STE 300 DALLAS, TX 75219 83-1570711	INVESTMENTS	TX	N/A	N/A				No			No	
ABBY LAFAYETTE HOLDINGS LLC 3333 WELBORN ST STE 300 DALLAS, TX 75219 83-1578480	INVESTMENTS	TX	N/A	N/A				No			No	
ABBY ROGERS HOLDINGS LLC 3333 WELBORN ST STE 300 DALLAS, TX 75219 83-3442660	INVESTMENTS	TX	N/A	N/A				No			No	