### PUBLIC INSPECTION COPY

Form **990** 

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

, 2018, and ending

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For the 2018 calendar year, or tax year beginning

► 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. Open to Public Inspection

2019

В	Check	if applicable:	С			D Employ	er identif	ication number	
	A	Address change	Houston Parks Bo			74-	18600	)46	
	1	Name change	300 N. Post Oak			E Telepho	ne numb	er	
		nitial return	Houston, TX 7702	4		713	-942-	-8500	
	П	inal return/terminated							
		Amended return				<b>G</b> Gross r	eceipts \$	49,315	808
		Application pending	F Name and address of principal	officer: Dath that	H(a	) Is this a group retur			
	Ш′	Application penaling	Same As C Above	Beth white	H(b	Are all subordinates If "No," attach a list	included		No
$\overline{}$	Tay	c-exempt status:	X 501(c)(3) 501(c) (	) <b>◄</b> (insert no.) 4947(a)(1) or	527	If "No," attach a list	. (see inst	tructions)	
<del>'</del>		•	w.houstonparksboa			:) Group exemption no	umbor 🕨		
K		m of organization:	X Corporation Trust		Year of formation:			gal domicile: TX	,
	art I	Summar		Association Other	real of formation.	1970 W	state of le	gar domiche. IA	
ГС	1	Briefly descri	<b>y</b> he the organization's missi	on or most significant activities:HPI	R acquire	c land to	ho 116	sed for n	ark
	'			nates the design/constr					
ည				educates the public a					
Activities & Governance				nages trust accounts fo					
Ķ	2	Check this bo		n discontinued its operations or disp					<u> </u>
တိ	3			ning body (Part VI, line 1a)			3		34
•ŏ	4	Number of in	dependent voting members	s of the governing body (Part VI, line	e 1b)		4		34
<u>ë</u>	5			calendar year 2018 (Part V, line 2a			5		30
Ę	6			necessary)			6		150
Ac				Part VIII, column (C), line 12			7a		0.
	k	Net unrelated	d business taxable income	from Form 990-T, line 38			7b		0.
						Prior Year		Current Y	
<u>a</u>	8			1h)		16,549,9		18,882	
Revenue	9	-	· ·	2g)		6,600,4		8,887	
ě	10			A), lines 3, 4, and 7d)		849,0			<u>,061.</u>
ш	11			nes 5, 6d, 8c, 9c, 10c, and 11e)		-53,9			<u>,350.</u>
	12			(must equal Part VIII, column (A), li		23,945,5		28,573	
	13			X, column (A), lines 1-3)	<u> </u>	10,220,1	.99.	10,228	<u>,140.</u>
	14	•	I to or for members (Part I)	<u> </u>					
ø	15		er compensation, employee	_	3,318,4	120.	3,601	<u>,165.</u>	
nse	16 a	a Professional	fundraising fees (Part IX, o	olumn (A), line 11e)		132,0	)53.	143	,000.
Expenses	ŀ	Total fundrais	sing expenses (Part IX, col	umn (D), line 25) ► 4(	02,043.				
ũ	17	Other expens	ses (Part IX, column (A), lir	nes 11a-11d, 11f-24e)		7,954,8	₹19.	6,602	. 523
	18			equal Part IX, column (A), line 25)	<u> </u>	21,625,4		20,574	
	19			8 from line 12		2,320,0		7,998	
s	_				+	Beginning of Currer		End of Ye	•
anc a	20	Total assets	(Part X. line 16)		F	73,670,0		82,730	
Ass	21					3,572,5		4,073	,564.
Net Asse Fund Bal	22	Net assets or	r fund halances. Subtract li	ne 21 from line 20		70,097,4		78,656	•
	art II	Signatur				10,051,5	104.	70,030	,473.
				rn, including accompanying schedules and state	ments and to the	hest of my knowledge	and belie	of it is true correct	t and
com	plete.	Declaration of preparation	arer (other than officer) is based on	all information of which preparer has any knowle	edge.	best of my knowledge	and bene	ii, it is true, correct	., and
		► Ele	ctronically File	d					
Sig	nc	Signatu	re of officer			Date			
He	re	Jer	i Nordbrock		(	CFO			
		Type or	print name and title				-		-
		Print/Type p	oreparer's name	Preparer's signature	Date	Check	if F	PTIN	
Pa	id	Barbai	ra Murphy	Barbara Murphy	03/18	/20 self-employ	ed J	201386215	,
	epar				, , 0				
	e O					Firm's EIN	▶ 76-	0269860	
		J S addin		77027-5132		Phone no.	(713		3.9
Mar	y the	IRS discuss th	<u> </u>	shown above? (see instructions)				X Yes	No
-·.				(					

Par	: 111	Statement of Program Service Accomplishments		<u> </u>
		Check if Schedule O contains a response or note to any line in this Part III		X
1	-	y describe the organization's mission:		
	The	purpose of the Houston Parks Board is to assist the City of Houston in	creati	ng,
	imp	roving, protecting and advocating for equitably distributed parkland in	the	
		ston area.		
		:::-:-::::		
2	Did the	e organization undertake any significant program services during the year which were not listed on the prior		
	Form	990 or 990-EZ?	Yes X	No
	If "Yes	s," describe these new services on Schedule O.		
		ne organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X	No
		s," describe these changes on Schedule O.	21	
		ribe the organization's program service accomplishments for each of its three largest program services, as measure	ed hy eyne	ncec
•	Section	on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported.	total expen	ises,
	and re	evenue, if any, for each program service reported.		
4 a	(Code	e: ) (Expenses \$ 11,338,260. including grants of \$ 9,207,964.) (Revenue \$	760,8	358.)
	In 2	2013, the Houston Parks Board, in partnership with Houston Parks Board I		
		e LGC), the City of Houston, Harris County Flood Control District and ot		<u> </u>
		ities started a 7 year project identified as the Bayou Greenways 2020 (		<del></del>
		gram which is focused on the expansion of the City's park system along H		
		e major bayous. Its purpose is to acquire land along the bayous within t		
				S COII
		y limits, design linear parks and construct multi-use trails along the k		
		goal is to improve the quality of life for Houstonians by increasing ed	<u>juitabi</u>	<u>e</u>
	<u>acce</u>	ess to parks and trails while helping to improve flood prevention.		
4 b	(Code	e: ) (Expenses \$ 6,524,835. including grants of \$ 830,264.) (Revenue \$	8,039,6	590.)
	Tn 2	2014, The Houston Parks Board entered into a 30-year agreement with the		
	H0119	ston to maintain existing BG2020 parkland, trails and green space. Unde	r this	
		eement, the City has agreed to provide an annual maintenance fee to HPB,		
		alates each year. The terms of the agreement provide that funds remain:		
		ntenance and conservation costs from year to year contribute to a Capita		<u> </u>
		lacement Reserve fund for replacement of damaged or depreciated trails a	<u> 1110</u>	
	amei	nities.		
4 c	(Code	e: ) (Expenses \$ 1,301,297. including grants of \$ 157,670.) (Revenue \$	78,9	18.)
	The	Houston Parks Board, in partnership with Houston Parks Board LGC, Inc.		GC),
		ston-area communities, the City of Houston, and other entities, works to		
		park land and to improve park spaces through renovation of existing par		
		struction of improvements to provide equitable distribution of park land		
		reation facilities for Houston's growing communities. The LGC is a Texas		
		al government corporation created by the City to provide support for the		
		k system. HPB has a management agreement with the LGC to acquire, manage		το <b>ρ,</b>
		improve park properties on behalf of the LGC and contract for the design		
	<u>aeve</u>	elopment, improvement, construction, and installation of parks and open	spaces	<u></u>
		program services (Describe in Schedule O.)  See Schedule O		
	(Expe		)	
4 e	Total	program service expenses ► 19,535,730.		-

# Form 990 (2018) Houston Parks Board Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, 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	Х	
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	Х	
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	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
k	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.	11 b		Х
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.	11 c		Х
C	I 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	11 d		Х
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
Ł	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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
Ł	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		Х
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		Х
	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
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	Х	
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	X	
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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
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	Х	

# Form 990 (2018) Houston Parks Board 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	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
ı	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
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):			
ä	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
	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	Х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Χ	
ı	a 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		Х
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O.	38	Х	
ra	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			.10
	<b>a</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
3AA	TEEA0104L 08/03/18	Form	990	(2018)

Form 990 (2018) Houston Parks Board

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

			Yes	No
2 a	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			
h	ments, filed for the calendar year ending with or within the year covered by this return 2a 30 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Χ	
~	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b	off 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
	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).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
_	services provided to the payor?	7 a	Χ	
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
-	If 'Yes,' indicate the number of Forms 8282 filed during the year	76		Λ
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand	1.6		V
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	of 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?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If 'Yes,' complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 34 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 ... 34 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ 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 ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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.. See . Schedule.. 0...... Χ 15 a 15 b X 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?.... Χ 16 a **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?.. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Houston TX 77024 713-942-8500

Jeri Nordbrock 300 N. Post Oak Lane

### 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

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

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

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

			(C)							
(A) Name and Title	(B) Average hours per	thar	one l both	box, an o	not check more x, unless person officer and a pr/trustee)			(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Thomas Bacon	3									
Chair	1	Х		Χ				0.	0.	0.
(2) Barron Wallace	3									
Vice Chair	1	Χ		Χ				0.	0.	0.
(3) Michael Skelly	3									
Secretary	0	Χ		Χ				0.	0.	0.
(4) David Kinder	3									
Treasurer	1	Χ		Χ				0.	0.	0.
(5) Roxanne Almaraz	1									
Board Member	0	Χ						0.	0.	0.
(6) Dina Alsowayel	1									
Board Member	0.1	Χ						0.	0.	0.
(7) Don Stephen Aron	1									
Board Member	0.1	Χ						0.	0.	0.
_(8) Marie Baldwin	1									
Board Member	0	Х						0.	0.	0.
(9) Margaret Warren Brown	1									
Board Member	0	Х						0.	0.	0.
(10) Beto Cardenas	1									
Board Member	0.1	Χ						0.	0.	0.
(11) Joe Dilg	1									
Board Member	0.1	Χ						0.	0.	0.
(12) Diana Espitia	1									
Board Member	0.1	Χ						0.	0.	0.
(13) David D. Fitch	1									
Board Member	0.1	Χ						0.	0.	0.
(14) Tom Flaherty	1									
Board Member	0.1	Χ						0.	0.	0.

Part \	VII Section A. Officers, Directors, Tr	ustees,	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	loyees	<b>c</b> ont	inued)
		(B)			•	C)							
	(A) Name and title	Average hours per	box	, unle	ess pe	erson direct	e than is bot or/trus	h an stee)	(D)  Reportable compensation from	<b>(E)</b> Reportable compensation from	E amo	(F) stimated unt of o	d ther
		week (list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	con f org ar	npensati rom the ganizatio d relate anizatio	ion on ed
	aren Garcia oard Member	$-\frac{1}{0.1}$	Х						0.	0.			0.
<b>(16)</b> C	ullen Geiselman oard Member	$-\frac{1}{0.1}$	X						0.	0.			0.
<b>(17)</b> S	teven J. Gibson oard Member	$-\frac{1}{0}$	X						0.	0.			0.
<b>(18)</b> J	im Green oard Member	$-\frac{1}{0}$	X						0.	0.			
(19) M	indy Hildebrand	$-\frac{1}{0.1}$	X										0.
<b>(20)</b> J	oard Member	$-\frac{1}{0.1}$	X						0.	0.			0.
<b>(21)</b> C	oard Member hris Knapp oard Member	1	X						0.	0.			0.
<b>(22)</b> A	nn Lents	$-\frac{1}{0.1}$	X						0.	0.			0.
<b>(23)</b> J	oard Member ackie Martin oard Member	$-\frac{1}{0}$	X						0.	0.			0.
<b>(24)</b> R	uthie Miller oard Member	-1-0	X						0.	0.			0.
<b>(25)</b> J	uan Sánchez Muñoz oard Member	$-\frac{1}{0}$	X						0.	0.			0.
1 b Sı	ub-total							<b>&gt;</b>	0.	0.			0.
d To	otal from continuation sheets to Part VII, Sectotal (add lines 1b and 1c).							<b>&gt;</b>	1,403,962. 1,403,962.	0.	1	40,2	238. 238.
	otal number of individuals (including but not limited on the organization $ ho$ 11	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
	d the organization list any <b>former</b> officer, direc											Yes	No
<b>4</b> Fo	n line 1a? <i>If 'Yes,' compléte Schedule J for suc</i> or any individual listed on line 1a, is the sum o	f reportab	le co	mpe	ensa	ation	and	oth	er compensation t		. 3	X	
SL	e organization and related organizations great							·			. 4	Х	
fo	d any person listed on line 1a receive or accru r services rendered to the organization? If 'Ye on B. Independent Contractors	ie comper s,' comple	isatio ite So	on tr chec	om dule	any J fo	unre er suc	elate ch p	ed organization or person	ındıvıdual	. 5		Х
<b>1</b> Co	omplete this table for your five highest comper impensation from the organization. Report comper	nsated indensation for	epen the c	den alen	t coi dar	ntra year	ctors endi	tha	at received more the	nan \$100,000 of ganization's tax year			
	(A) Name and business add	Iress							(B) Description of	of services	Compe	<b>C)</b> ensatio	on
Champions Hydro-Lawn LLC 13226 Kaltenbrun Rd Houston, TX 77086 Parkland maintenance							1,7	34,	926.				
Clark Condon Associates 10401 Stella Link Rd Houston, TX 77025 Design Services						1,351,955.							
						1,195,951.							
Yellowstone Landscape P.O. Box 205742 Dallas, TX 75320 Design services						815,647.							
	Associates P.O. Box 678316 Dallas, T		ited t	o the	اده ا	listo	d abo	۱۵۱۱	Design service		- 6	0Z,	011.
	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 ▶ 26												

#### Form 990

### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

Name of the Organization

Houston Parks Board

74-1860046

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated Employees												
(A)	(B)			(C	-	hat appl		(D)	(E)	(F)		
Name and Title	Average hours per week (list any hours for related organizations below dotted line)  Average hours per week (motividual trustee or director related organizations below dotted line)			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations						
Precious Owodunni	11											
Board Member	0.1	X						0.	0.	0.		
Chris Porter	11											
Board Member	0	X						0.	0.	0.		
Andrew Price	11											
Board Member	0.1	X						0.	0.	0.		
<u> Leslie Elkins Sasser</u>	1_1_											
Board Member	0	X						0.	0.	0.		
Laura Spanjian	1	<u> </u>						_	_			
Board Member	0	X						0.	0.	0.		
Herman L. Stude	1_1_											
Board Member	0.1	X						0.	0.	0.		
Phoebe_Tudor	11											
Board Member	0	Х						0.	0.	0.		
Don M. Woo	1	.,						•		•		
Board Member	0.1	Х						0.	0.	0.		
Nina Zilkha	1	.,,						0	0	0		
Board Member	0.1	Х						0.	0.	0.		
Beth White	_ 35	ļ		v				264 461	0	26 027		
President & CEO Jeri Nordbrock	5			X				264,461.	0.	36,827.		
CFO	<u>35</u>			Χ				147,105.	0.	24,631.		
Charles Place	40			Λ				147,103.	0.	24,031.		
Capital Proj Mg Dr	$-\frac{1}{10}$				Χ			185,775.	0.	7,073.		
Andrew Newman	40				Λ			105,775.	0.	7,075.		
Activation/Op Dir	0 -	<u> </u>				Х		177,231.	0.	19,531.		
Matthew Rondot	40					21		177,231.	0.	17,331.		
Conserv/Maint Dir	$-\frac{10}{0}$					Х		133,575.	0.	17,144.		
Richard McNamara	40							100/070	0.			
Sr Program Manager	0	<u> </u>				Х		116,220.	0.	20,288.		
Denise Garcia	35											
Controller	5					Χ		115,532.	0.	14,744.		
Adrin Biagas	35							,		,		
Sr Land Acq Mgr	5	İ				Χ		111,875.	0.	0.		
Doug Overman	40							·				
Chief Adv Offc to 4/15/19	0	Ī					Х	152,188.	0.	0.		
	J											
										Form <b>990</b> Cont 2018		

Form **990** Cont 2018

· ui		Check if Schedule O contains a response or note to any	y line in this Part V	III		
			(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns				
Contribu	g	similar amounts not included above 1f 10,965,866.  Noncash contributions included in lines 1a-1f: \$ 7,712,090.  Total. Add lines 1a-1f   Business Code	18,882,770.			
Program Service Revenue	2 a b c	Bayou Greenway maint. 713990	8,039,690. 847,520.	8,039,690. 847,520.		
Program Se		All other program service revenue	8,887,210.			
	3	Investment income (including dividends, interest and other similar amounts)	1,080,912.			1,080,912.
	5	Royalties	7,885.			7,885.
	b	Gross rents  Less: rental expenses  Rental income or (loss)  Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory  Less: cost or other basis  (i) Securities (ii) Other  20436031.				
	С	Less. Cost of other basis         and sales expenses       20648882         Gain or (loss)       −212,851         Net gain or (loss)       ►	-212,851.			-212,851.
Other Revenue		Gross income from fundraising events (not including \$ 730,141. of contributions reported on line 1c).  See Part IV, line 18				
Othe		Less: direct expenses	-72,235.			-72,235.
	9 a	Gross income from gaming activities. See Part IV, line 19 a	.=,====			.=,===
		Less: direct expenses				
	b	Gross sales of inventory, less returns and allowances				
	С	Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code				
	11 a					
	b					
		All other revenue				
		Total revenue See instructions	20 572 601	0.007.010	^	000 711
	12	<b>Total revenue.</b> See instructions▶	∠४,5/3,691.	8,887,210.	0.	803,711.

#### 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).

Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service	<b>(C)</b> Management and	<b>(D)</b> Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	10 105 909	expenses	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	10,195,898.	10,195,898.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	32,242.	32,242.		
4 5	Benefits paid to or for members	851,991.	717,824.	68,027.	66,140.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	08,027.	00,140.
7		2,237,805.	1,838,559.	285,319.	113,927.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	63,233.	51,930.	8,111.	3,192.
9	Other employee benefits	231,125.	190,447.	28,201.	12,477.
10	Payroll taxes	217,011.	179,472.	24,987.	12,552.
11	Fees for services (non-employees):	,	,	,	,
a	Management				
	Legal	58,829.	58,829.		
C	: Accounting	78,400.	6,223.	69,660.	2,517.
	<b>I</b> Lobbying				
	Professional fundraising services. See Part IV, line 17	143,000.			143,000.
	Investment management fees	51,473.		51,473.	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	806,713.	760,595.	33,463.	12,655.
12	Advertising and promotion	177,728.	153,688.	16,002.	8,038.
13	Office expenses	41,955.	15,213.	18,787.	7,955.
14	Information technology	44,460.	35,489.	5,971.	3,000.
15	Royalties				
16	Occupancy	114,177.	106,445.	5,147.	2,585.
17	Travel	48,310.	46,838.	980.	492.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	48,170.	46,116.	1,367.	687.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	53,887.	53,887.		
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).	115,157.	97,432.	11,798.	5,927.
a	Park & bayou maintenance	4,225,846.	4,225,846.		
	Construction and design	329,440.	329,440.		
	Program supplies and equip	318,874.	318,874.		
	Graphics and Printing	80,967.	70,057.	7,262.	3,648.
	All other expenses	8,137.	4,386.	500.	3,251.
	Total functional expenses. Add lines 1 through 24e	20,574,828.	19,535,730.	637,055.	402,043.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720).			·	

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing.	12,987,554.	1	18,833,077.
	2	Savings and temporary cash investments	23,957,894.	2	17,344,110.
	3	Pledges and grants receivable, net		3	16,836,960.
	4	Accounts receivable, net	748,385.	4	793,412.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		3	
		beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net.		7	
Assets	8	Inventories for sale or use.		8	
As	9	Prepaid expenses and deferred charges	36,065.	9	42,380.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	·		,
				10 -	14 040 750
	11	Less: accumulated depreciation		10 c	14,248,752.
	12	Investments — publicly traued securities.  Investments — other securities. See Part IV, line 11	12,881,703.	12	13,638,465.
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11.		15	992,881.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	/	16	82,730,037.
	17	Accounts payable and accrued expenses	713,047.	17	1,059,706.
	18	Grants payable	715,047.	18	1,033,700.
	19	Deferred revenue	1,799,950.	19	2,194,260.
	20	Tax-exempt bond liabilities	, ,	20	, , , , , , , , , , , , , , , , , , , ,
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D	96,357.	21	96,357.
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	·	22	, ,
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	963,200.	25	723,241.
	26	<b>Total liabilities.</b> Add lines 17 through 25.	3,572,554.	26	4,073,564.
es		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
au au	27	Unrestricted net assets.	10,625,347.	27	11,923,239.
ğağı	28	Temporarily restricted net assets	56,917,668.	28	58,678,802.
d E	29	Permanently restricted net assets	2,554,469.	29	8,054,432.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
fet	33	Total net assets or fund balances	70,097,484.	33	78,656,473.
_	34	Total liabilities and net assets/fund balances	73,670,038.	34	82,730,037.

Pa	rt XI Reconciliation of Net Assets					
	Check 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	28,	573,	691.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,	574,	828.	
3	Revenue less expenses. Subtract line 2 from line 1	3		998,		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		097,		
5	Net unrealized gains (losses) on investments	5	•	560,	126.	
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,					
D -	column (B))	10	78,	656,	<u>473.</u>	
Pa	rt XII Financial Statements and Reporting				_	
	Check 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: Cash X Accrual Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.						
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	d on a				
1	<b>b</b> Were the organization's financial statements audited by an independent accountant?		2	b X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te				
	Separate basis X Consolidated basis Both consolidated and separate basis					
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	c X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3	<b>a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3	a X		
	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	b X		
BAA	TEEA0112L 08/03/18		For	m <b>990</b>	(2018)	

#### **SCHEDULE A** (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2018

Open to Public Inspection Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

Hou	Houston Parks Board 74-1860046							
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.							
The o	rga	anization is not a private found	,	•		•	•	
1								
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 h	ospital service organi	ization described in <b>sec</b>	ction 170	0(b)(1)( <i>A</i>	A)(iii).	
4		A medical research organizat	tion operated in conju	unction with a hospital o	describe	d in <b>sec</b>	tion 170(b)(1)(A)(iii). E	Inter the hospital's
		name, city, and state:						
5		An organization operated for section 170(b)(1)(A)(iv). (Co.	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governmental unit de	escribed in
6 7		A federal, state, or local gove	J					
,	X	An organization that normally ruin section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pu	blic described
8		A community trust described	in section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9		An agricultural research organiz	zation described in <b>sec</b>	tion 170(b)(1)(A)(ix) opera	ated in c	onjunctio	on with a land-grant colle	ege
		or university or a non-land-grar	nt college of agriculture	(see instructions). Enter	the nan	ne, city,	and state of the college	or
		university:						
10		An organization that normally refrom activities related to its einvestment income and unrel June 30, 1975. See section 5	exempt functions—sub lated business taxable	oject to certain exception in the community of the commun	ons, and	(2) no	more than 33-1/3% of i	its support from gross
11		An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(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 <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b> . See <b>section 509(a)(3)</b> . Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.							
а	L	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	gularly appoint or elect	d, or controlled by its sup a majority of the director	ported o	rganizat stees of t	ion(s), typically by giving the supporting organizati	g the supported on. <b>You must</b>
b	L	Type II. A supporting organiz management of the supporting must complete Part IV, Secti	organization vested in ons A and C.	the same persons that co	ontrol or	manage	the supported organizat	ion(s). <b>You</b>
С	L	Type III functionally integrated. organization(s) (see instruction	A supporting organizatons). <b>You must comp</b>	ion operated in connection olete Part IV, Sections A	n with, aı <b>A, D, an</b>	nd function <b>d E.</b>	onally integrated with, its	supported
d	L	Type III non-functionally integrated. The of instructions). You must comp	organization generally	must satisfy a distribu	nnection tion req	with its s uiremen	supported organization(s t and an attentiveness	) that is not requirement (see
е		Check this box if the organization integrated, or Type III non-ful	ation received a writte	en determination from t	the IRS	that it is	a Type I, Type II, Typ	e III functionally
f	Fı	nter the number of supported of						
_		rovide the following information	. 3					
		lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the tion listed loverning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)	(D)							
(C)								
(D)								
(E)								
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 fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	18117476.	31059339.	13166783.	16549907.	18882770.	97,776,275.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
	<b>Total.</b> Add lines 1 through 3 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)	18117476.	31059339.	13166783.	16549907.	18882770.	97,776,275.	
6	Public support. Subtract line 5 from line 4						47,911,927.	
Sec	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total	
7	Amounts from line 4	18117476.	31059339.	13166783.	16549907.	18882770.	97,776,275.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	437,826.	469,406.	573,088.	776,986.	1,088,797.	3,346,103.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	,	,	,	0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.	
	Total support. Add lines 7 through 10						101122378.	
12	Gross receipts from related activ	ities, etc. (see ins	tructions)			12	33,819,918.	
	<b>First five years.</b> If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth t	ax year as a section	on 501(c)(3)	▶ □	
Sec	Section C. Computation of Public Support Percentage  14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))							
							47.38 %	
	Ga 33-1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box							
b	and stop here. The organization qualifies as a publicly supported organization.  b 33-1/3% support test—2017. 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.							
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	nd-circumstances	s' test, check this	box and stop her	<b>e.</b> Explain in Par	t VI how	
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and Private foundation. If the organization	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	s' test, check this ation qualifies as	box and <b>stop her</b> a publicly support	<b>e.</b> Explain in Par ed organization.	t VI how the▶	

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.)

Calendar  1 Galendar  2 G m por fu rea ta  3 G th or ei ei ei	year (or fiscal year beginning in) > hifts, grants, contributions, and membership fees eceived. (Do not include ny 'unusual grants.')	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	<b>(e)</b> 2018	(f) Total	
1 Gan read read read read read read read read	sifts, grants, contributions, and membership fees eceived. (Do not include ny 'unusual grants.')	(a) 2014	(6) 2013	(0) 2010	(a) 2017	(6) 2010	(i) Total	
2 G m po fu re ta 3 G th on ei	aross receipts from admissions, nerchandise sold or services erformed, or facilities urnished in any activity that is elated to the organization's ax-exempt purpose							
th or <b>4</b> Ta or ei	nat are not an unrelated trade r business under section 513. ax revenues levied for the rganization's benefit and ither paid to or expended on s behalfhe value of services or acilities furnished by a overnmental unit to the							
or ei	rganization's benefit and ither paid to or expended on s behalf							
	acilities furnished by a overnmental unit to the							
fa go								
<b>7a</b> A 2,	otal. Add lines 1 through 5 mounts included on lines 1, , and 3 received from isqualified persons.							
ai di ex 1°	mounts included on lines 2 nd 3 received from other than isqualified persons that xceed the greater of \$5,000 or % of the amount on line 13 or the year.							
c A	dd lines 7a and 7b							
70	tublic support. (Subtract line c from line 6.)							
	on B. Total Support				1 40			
	r year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total	
<b>10a</b> Gr pa re	mounts from line 6  ross income from interest, dividends, ayments received on securities loans, ents, royalties, and income from milar sources							
in ta ad	Inrelated business taxable acome (less section 511 axes) from businesses cquired after June 30, 1975							
11 Ne	dd lines 10a and 10bet income from unrelated business citivities not included in line 10b, hether or not the business is gularly carried on							
ga ca	other income. Do not include ain or loss from the sale of apital assets (Explain in Part VI.)							
10	<b>otal support.</b> (Add lines 9, 0c, 11, and 12.)							
10	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.							
	on C. Computation of Pul			no 12!: "	<u> </u>	1 1	0	
	Public support percentage for 20	•			-		<u> </u>	
	ublic support percentage from 2					16	%	
	on D. Computation of Inv				(0)		0	
	nvestment income percentage for	•	• •	-	* * * *		00	
	nvestment income percentage fr					<u> </u>	%	
is	3-1/3% support tests—2018. If to not more than 33-1/3%, check 3-1/3% support tests—2017. If to	this box and stop	<b>here.</b> The organ	ization qualifies	as a publicly supp	orted organization		
lir	<b>33-1/3% support tests—2017.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization <b>Private foundation.</b> 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 in line 12 on 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? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	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)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was			
3а	described in section 509(a)(1) or (2).  Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	2 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)? If 'Yes,' describe in <b>Part VI</b> when and how the organization			
С	made the determination.  Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3b 3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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)? If 'Yes,' explain in <b>Part VI</b> 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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	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		
С	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		7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	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))?			
b	If 'Yes,' provide detail in <b>Part VI</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? If 'Yes' provide detail in <b>Part VI</b> .	9a		
С	supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI</i> .  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> .	9b 9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,'			
b	answer 10b below.  Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10a 10b		

BAA

Pa	art IV   Supporting Organizations (continued)		
-1-1	1. Les the experiention eccented a gift or contribution from any of the following necessary	Yes	No
11	<ul> <li>Has the organization accepted a gift or contribution from any of the following persons?</li> <li>a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the</li> </ul>		
	governing body of a supported organization?		
	<b>b</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? If 'Yes' to a, b, or c, provide detail in Part VI.		
Se	ection B. Type I Supporting Organizations	1	
	71 11 3 3	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? If 'No,' describe in <b>Part VI</b> 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.		
2	applied to such powers during the tax year.  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? 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.		
Se	ection 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)? If 'No,' describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
Se	ection 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? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
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? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
Se	ection E. Type III Functionally Integrated Supporting Organizations		
1	1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
	a The organization satisfied the Activities Test. Complete line 2 below.		
		<i></i> .	
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	ctions)	
2	2 Activities Test. Answer (a) and (b) below.	Yes	No
	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? If 'Yes,' then in <b>Part VI identify those supported organizations and explain</b> 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.		
	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? 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.		
3	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> 3b		

BAA

SCITE	edule A (Form 990 of 990-E2) 2018 Houston Parks Board		74-18	60046 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization	ıst on No ions mus	ov. 20, 1970 (explain in t complete Sections A	Part VI). <b>See</b> through E.
Sec	ction 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		
Sec	ction 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 shor tax year or assets held for part of year):	t		
- 7	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	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		
Sec	tion 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 2018	Houston Parks	Board	74-1	1
Part V	Type III Non-Function	ally Integrated 509	(a)(3) Supporting	<b>Organizations</b> (continued)	

. u	Type in their tunedentially integrated electrical capper in general continues	
Sec	tion 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 <b>Part VI</b> ). See instructions.	
9	Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
<b>b</b> Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
PAA		Schodulo A (Fo	rm 990 or 990 E7) 2019

BAA

Schedule A (Form 990 or 990-EZ) 2018

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.)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### PUBLIC DISCLOSURE COPY

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

Houston Parks Board		74-1860046
Organization type (check one):		·
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter r	iumber) organization
	4947(a)(1) nonexempt	charitable trust <b>not</b> treated as a private foundation
	527 political organization	on
Form 990-PF	501(c)(3) exempt priva	te foundation
1 0/11/1 330 1 1		charitable trust treated as a private foundation
		'
	501(c)(3) taxable priva	e foundation
Check if your organization is covered by the	e General Rule or a Special Rule.	
Note: Only a section 501(c)(7), (8), or	(10) organization can check boxes for	or both the General Rule and a Special Rule. See instructions.
General Rule		
For an organization filing Form 990 property) from any one contributor	D, 990-EZ, or 990-PF that received, d . Complete Parts I and II. See instru	during the year, contributions totaling \$5,000 or more (in money or ctions for determining a contributor's total contributions.
Special Rules		
X For an organization described in sunder sections 509(a)(1) and 170(b)(received from any one contributor, Form 990, Part VIII, line 1h; or (ii)	ection 501(c)(3) filing Form 990 or 99 1)(A)(vi), that checked Schedule A (Ford during the year, total contributions of Form 990-EZ, line 1. Complete Parts	90-EZ that met the 33-1/3% support test of the regulations m 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that of the greater of (1) \$5,000; or (2) 2% of the amount on (i) is I and II.
For an organization described in suduring the year, total contributions purposes, or for the prevention of contributor name and address), II,	cruelty to children or animals. Compl	rm 990 or 990-EZ that received from any one contributor, religious, charitable, scientific, literary, or educational ete Parts I (entering 'N/A' in column (b) instead of the
during the year, contributions <i>excl.</i> \$1,000. If this box is checked, entecharitable, etc., purpose. Don't con	usively for religious, charitable, etc., er here the total contributions that we implete any of the parts unless the <b>Go</b>	rm 990 or 990-EZ that received from any one contributor, purposes, but no such contributions totaled more than ere received during the year for an <i>exclusively</i> religious, eneral Rule applies to this organization because ng \$5,000 or more during the year
<b>Caution:</b> An organization that isn't cov 990-PF), but it <b>must</b> answer 'No' on P Part I, line 2, to certify that it doesn't i	art IV. line 2. of its Form 990: or che	Special Rules doesn't file Schedule B (Form 990, 990-EZ, or ck the box on line H of its Form 990-EZ or on its Form 990-PF, tule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

1

Houston Parks Board

Employer identification number

74	_1	Q	61	٦n	1	6
14	- 1	റ	nι	,,,	4	n

Part I	Contributors (see instructions).	Use duplicate copies of Part	I if additional space is needed.
--------	----------------------------------	------------------------------	----------------------------------

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$5,499,963.	Person X  Payroll  Noncash   (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$7 <u>,158,533.</u>	Person X  Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$850,000.	Person X  Payroll  Noncash   (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$800,000.	Person X  Payroll  Noncash   (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Employer identification number

Houston Parks Board

74-1860046

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is n	eeded.
---	--------

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if addition	nal space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	Securities - Publicly traded		
2	<u> </u>		
		\$7,133,533.	8/22/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		·	
	<u></u>	: \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>	. – – –	
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		· <del></del> -	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u></u>	· — — - · — — - o	
	<u> </u>	. – –   - – – – –	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>	· <del> </del> · <del> </del>	
		2	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 4 Name of organization Employer identification number Houston Parks Board 74-1860046 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000** or less for the year. (Enter this information once. See instructions.)..... Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (b) Purpose of gift (a) No. from (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (b) Purpose of gift (a) No. from (c) Use of gift Part I (e) Transfer of gift

	<b> </b>						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
				l			
		(e) Transfer of gift					
		I ranster of dift					

Transferee's name, address, and ZIP + 4

Transferee's name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Relationship of transferor to transferee

Relationship of transferor to transferee

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

	Houston Parks Board			74-1860046
Par	Organizations Maintaining Donor Complete if the organization answ	r <b>Advised Funds or Oth</b> vered 'Yes' on Form 990	<b>er Similar Funds</b> ), Part IV, line 6.	or Accounts.
		(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year	•		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor are the organization's property, subject to the organization	or advisors in writing that the organization's exclusive legal	assets held in donor control?	r advised funds
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writi of the donor or donor advisor	ng that grant funds o	can be used only rpose conferring Yes No
Par				
Гаг	Complete if the organization answ	vered 'Yes' on Form 990	) Part IV line 7	
1	Purpose(s) of conservation easements held by			
٠	Preservation of land for public use (e.g., re	- '		historically important land area
	Protection of natural habitat	creation of education)		certified historic structure
	Preservation of open space		LI. 16361 Valion of a	columba historie structure
2	Complete lines 2a through 2d if the organization he	ald a qualified conservation con	tribution in the form of	f a conservation easement on the
_	last day of the tax year.	siu a quaimeu conservation con		a conservation easement on the
	•			Held at the End of the Tax Year
ā	Total number of conservation easements			2a
ŀ	Total acreage restricted by conservation easem	nents		2 b
(	: Number of conservation easements on a certifi	ed historic structure included	in (a)	2 c
C	Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, a	nd not on a historic	2 d
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished,	or terminated by the c	organization during the
4	Number of states where property subject to conser	vation easement is located >		
5	Does the organization have a written policy reg	arding the periodic monitorin	g, inspection, handli	ng of violations,
	and enforcement of the conservation easement	ts it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, in	specting, handling of violations	s, and enforcing conse	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspect ►\$	cting, handling of violations, and	d enforcing conservation	on easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the re	equirements of sectio	n 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.			
Par		ctions of Art, Historical vered 'Yes' on Form 990	Treasures, or Ot	ther Similar Assets.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets hel in Part XIII, the text of the footnote to its finance	d for public exhibition, education	n, or research in furth	statement and balance sheet works of erance of public service, provide,
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	SFAS 116 (ASC 958), to repropublic exhibition, education, o	ort in its revenue sta r research in furtheran	tement and balance sheet works of art, ce of public service, provide the
	(i) Revenue included on Form 990, Part VIII, I	ine 1		
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, hi amounts required to be reported under SFAS 1			·
	Revenue included on Form 990, Part VIII, line			
	Assets included in Form 990 Part X			►\$

Part III Organizations Mainta	ining Collection	is of Art, Histor	rical Treasu	ires, or C	ther Simila	r Asset	<b>S</b> (CO	ntınu	ed)
3 Using the organization's acquisition items (check all that apply):	, accession, and oth	er records, check an	y of the following	ng that are a	a significant us	e of its col	llection	1	
a Public exhibition		<b>d</b> Loan o	r exchange pr	ograms					
<b>b</b> Scholarly research		e Other							
c Preservation for future gener	rations		•						
4 Provide a description of the organize Part XIII.	zation's collections ar	nd explain how they	further the orga	anization's e	xempt purpose	in			
5 During the year, did the organiza to be sold to raise funds rather the	ation solicit or receive han to be maintaine	ve donations of art	historical trea ganization's c	asures, or collection?	other similar a	ssets	Yes		No
Part IV Escrow and Custodia line 9, or reported an	l Arrangements amount on Forn	. Complete if the 1990, Part X, I	ne organizat ine 21.	tion answ	ered 'Yes'	on Form	1 990	, Part	t IV,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodian or o	ther intermediary f	or contribution	s or other	assets not inc	luded	Yes	<u> </u>	X No
<b>b</b> If 'Yes,' explain the arrangement							J	<u> </u>	
,		•				Ar	nount		
<b>c</b> Beginning balance					1 c				
<b>d</b> Additions during the year					1 d				
e Distributions during the year									
f Ending balance					1 f				0.
2a Did the organization include an a					count liability	? X	Yes		No No
<b>b</b> If 'Yes,' explain the arrangement					-		1	X	
2 - 11, 1 p 1 1 1 1 1 3 1 1 1		ee Part XII						<u> </u>	1
Part V Endowment Funds. C				' on Forn	n 990. Part	IV. line	10.		
	(a) Current year	(b) Prior year		years back	(d) Three yea			our years	s back
<b>1 a</b> Beginning of year balance	6,001,014			71,277.	5,407				837.
<b>b</b> Contributions	0,001,011	. 3,333,00	1,5	, _ , _ , , ,		,508.		0007	<del></del>
-					10	, 500.			
c Net investment earnings, gains, and losses	320,881	. 446,50	)8. 6	41,269.	-190	,712.		59,	435.
<b>d</b> Grants or scholarships									
e Other expenditures for facilities and programs					+	,216.			835.
f Administrative expenses	34,400			<u> 24,477.</u>		,737.			003.
<b>g</b> End of year balance	- / /			88,069.		,277.	5,	407,	434.
2 Provide the estimated percentag	-	r end balance (line	: 1g, column (	a)) held as	•				
a Board designated or quasi-endowm		<u> </u>							
<b>b</b> Permanent endowment ►	49.02 %								
c Temporarily restricted endowmer	nt ► <u>50.</u>	98 <sup>%</sup>							
The percentages on lines 2a, 2b, a	nd 2c should equal 1	00%.							
3a Are there endowment funds not in t	the possession of the	organization that ar	e held and adn	ninistered fo	r the		_	1	
organization by:						F-		Yes	No
(i) unrelated organizations						<u> </u>	3a(i)		X
(ii) related organizations						<u> </u>	Ba(ii)	Х	<del> </del>
<b>b</b> If 'Yes' on line 3a(ii), are the rela	-	•					3b	X	
4 Describe in Part XIII the intended		zation's endowme	nt funds. Se	e Part	XIII				
Part VI Land, Buildings, and Complete if the organi		d 'Yes' on Form	n 990, Part	IV, line 1	1a. See Fo	rm 990,	Part	X, lir	ne 10.
Description of property		st or other basis investment)	(b) Cost or o		(c) Accumula depreciatio	ted n	<b>(d)</b> B	look va	lue
<b>1 a</b> Land		24,342.	14,026	· ·			14.	050.	572.
<b>b</b> Buildings		, -		,817.	50,5	500.			317.
c Leasehold improvements									
<b>d</b> Equipment			241	,125.	99,3	304		141	,821.
<b>e</b> Other				,405.	18,3				,042.
Total. Add lines 1a through 1e. (Colum		orm 990. Part X o					1 /		752.
BAA	(a)ast oqual i	223, 1 41171, 01	(5), 1110			Schedule			

Part VII Investments — Other Securities.		N/A	
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)▶  Part VIII Investments — Program Related.		N/A	
Complete if the organization answered	'Yes' on Form 990	), Part IV, line 11c. See Form	990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> (7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶			
Part IX Other Assets. Complete if the organization answered	N/A 'Yes' on Form 990	) Part IV line 11d See Form	990 Part X line 15
	scription	,, rait iv, into ira. Gee i diffi	(b) Book value
(1)			
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (E	R) line 15 )		<u> </u>
Part X Other Liabilities.	<i>y mic 10.y</i>		
Complete if the organization answered 'Yes' on Fo		le or 11f. See Form 990, Part X, line 25	5.
(a) Description of liability	(b) Book value		
(1) Federal income taxes	722.24	1	
(2) Construction contracts payable (3)	723,24	<del>1 •</del>	
(4)			
(5)			
(6)			
(7)			
(8)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	<b>▶</b> 723,24	1.	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo	tnote to the organization's fir	nancial statements that reports the organization'	
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote h	nas been provided in Part XIII		

Part XI Reconciliation of Revenue per Audited Financial State	ements With R	evenue per Re	turn.	
Complete if the organization answered 'Yes' on Form 9	90, Part IV, Iir	ne 12a.		
1 Total revenue, gains, and other support per audited financial statements.			1	29,423,514.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a	560,126.		
<b>b</b> Donated services and use of facilities	2b	44,670.		
c Recoveries of prior year grants d Other (Describe in Part XIII.) See Part XIII	2c			
		293,550.		
e Add lines 2a through 2d.			2 e	898,346.
3 Subtract line 2e from line 1			3	28,525,168.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	48,523.		
<b>b</b> Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b.		Į.	4 c	48,523.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	28,573,691.
Part XII Reconciliation of Expenses per Audited Financial Sta		•	Retur	n.
Complete if the organization answered 'Yes' on Form 9	990, Part IV, Iir	ne 12a.		
1 Total expenses and losses per audited financial statements			1	20,575,892.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities		44,670.		
<b>b</b> Prior year adjustments	2b			
c Other losses.				
d Other (Describe in Part XIII.) See Part XIII		4,917.		
e Add lines 2a through 2d			2 e	49,587.
3 Subtract line 2e from line 1			3	20,526,305.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b		48,523.		
<b>b</b> Other (Describe in Part XIII.)			4 c	40 500
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I lin			5	48,523.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part IV, Line 2b - Explanation Of Escrow Account Liability

HBP is holding funds in the amount of \$96,357 on behalf of three park-related organizations which have little activity and no current need for the funds.

#### Part V, Line 4 - Intended Uses Of Endowment Fund

The majority of the endowed funds are held by the Houston Parks Board Foundation and are intended to support the operations of Houston Parks Board. Houston Parks Board also holds cash that is restricted for the development of permanent parks and green

space.

Schedule D (Form 990) 2018

Part XIII | Supplemental Information (continued)

Schedule D, Part XI, Line 2d	
Other Revenue Included In F/S But Not Included On Form 9	90

Income of related Foundation \$293,550 Total \$293,550

Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S

Expenses of related Foundation \$ 4,917.

Total \$ 4,917.

**BAA** TEEA3305L 10/10/18 **Schedule D (Form 990) 2018** 

#### **SCHEDULE G** (Form 990 or 990-EZ)

#### Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 74-1860046 Houston Parks Board **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events X In-person solicitations **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name and address of individual (iii) Did fundraiser (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No Sterling Assoc. 55 Waugh Dr. Major gift consulting Χ 9,551,035 143,000 9,408,035. Houston TX 77007 2 3 5 6 7 9 10 Total. 9,551,035. 9,408,035. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule	e G (Form 990 or 990-EZ) 2018 Houston	Parks Board		74-18	60046 Page <b>2</b>
Part II	Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts great the second	event contribution	nswered 'Yes' on Fo s and gross income	orm 990, Part IV, li e on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
R E		(a) Event #1  Annual Lunch (event type)	(b) Event #2 BG Day (event type)	(c) Other events  None (total number)	(d) Total events (add column (a) through column (c))

R			Annual Lunch (event type)	BG Day (event type)	None (total number)	(add column (a) through column (c))			
R E V E N U E	1	Gross receipts	648,781.	102,360.		751,141.			
Ě	2	Less: Contributions	627,781.	102,360.		730,141.			
	3	Gross income (line 1 minus line 2)	21,000.			21,000.			
	4	Cash prizes							
D	5	Noncash prizes							
D R E C T	6	Rent/facility costs	64,037.			64,037.			
	7	Food and beverages	27,468.			27,468.			
X	8	Entertainment							
EXPENSES	9	Other direct expenses	1,730.			1,730.			
S	10 11	Direct expense summary. Add lines 4 thr Net income summary. Subtract line 10 fro				93,235. -72,235.			
Par	t III	<b>Gaming.</b> Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes	s' on Form 990, Par	rt IV, line 19, or re	oorted more than			
R E V E N U E			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))			
U E	1	Gross revenue							
E	2	Cash prizes							
D X P R N C S T S	3	Noncash prizes							
C S T E S	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes%	Yes%	Yes 8				
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		▶				
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	nn (d)					
а	Is th	er the state(s) in which the organization content or organization licensed to conduct gaming lo,' explain:	g activities in each of th						
	IO a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?								

Sche	edule G (Form 990 or 990-EZ) 2018 Houston Parks Board 7.	4-1860	046	Page 3
	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
				Шио
	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility.			%
	a An outside facility.			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:		
	Name ►			- – – – .
	Address ►			
15:	a Does the organization have a contract with a third party from whom the organization receives gaming revenu	ie?	□Yes	No
	b If 'Yes,' enter the amount of gaming revenue received by the organization▶ \$ and the			□
	of gaming revenue retained by the third party ► \$			
(	c If 'Yes,' enter name and address of the third party:			
	Name ►			
	Address ►			
	Address			
16	Gaming manager information:			
	Name ►			
		- – – – –		
	Gaming manager compensation ► \$			
	Description of convices provided >			
	Description of services provided	. – – – –		
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ı	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the	<b>-</b> L	
	organization's own exempt activities during the tax year ► \$			
Pai	Trivial Supplemental Information. Provide the explanations required by Part I, line 2b, co	umns (	iii) and (	<b>v</b> );
	and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an information. See instructions.	y addition	onai	

## 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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number Houston Parks Board 74-1860046

Part I   General Information on G									
							X Yes No		
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  See Part IV									
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.									
1 (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) Houston Parks Board LGC, Inc.							Land funding /		
300 N Post Oak Lane							project		
Houston, TX 77024	26-3091027	170(c)(1)	5,062,294.	4,515,595.	Book	Land	conveyance		
(2) City of Houston									
901 Bagby									
Houston, TX 77002	74-6001164	170(c)(1)	606,722.	0.			Land funding		
(3) Friends of Mandell Park							Park		
P.O. Box 66551							Maintenance &		
Houston, TX 77266	30-0287080	501(c)(3)	8,312.	0.			Improvement		
(4)									
(5)									
(6)									
(7)									
(8)									
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table									
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>(b)</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 Scholarships	19	32,242.			
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.

#### Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

The Houston Parks Board (HPB) solicits gifts and bequests for park acquisitions, additions, and improvements within the City of Houston and the surrounding metropolitan area. From time to time, it transfers land to or purchases land for the City of Houston or the Houston Parks Board LGC, a local government corporation that was formed to hold the parkland and improvements managed by HPB for the City of Houston. HPB also acts as an agent for the City of Houston regarding certain funds that are maintained on behalf of the City. One such fund provides scholarships to students. The Houston Parks and Recreation Department's A.S.K. Group determines the ASK scholarship recipients and has HPB write a check directly to the school the student is attending. The ASK program monitors the initial and ongoing qualification

2018

## Schedule I, Part IV - Supplemental Information

Page 3

	Houston Parks Board	74-1860046
Part I, Line 2 - Procedures for Monito	ring Use of Grants Funds in U.S. (continued)	
of scholarship recipients, no	t HPB.	

## **SCHEDULE J** (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number Houston Parks Board 74-1860046

#### Part I **Questions Regarding Compensation** Yes No 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.... 1 b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?...... 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: **4** a Χ 4 b Χ c Participate in, or receive payment from, an equity-based compensation arrangement?..... 4 c Χ If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?..... 5 a Χ 5 h Χ If 'Yes' on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6 a a The organization?..... Χ **b** Any related organization? 6 b Χ If 'Yes' on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III. 7 Χ Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III..... Χ If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?.....

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

Schedule J (Form 990) 2018

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

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

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

	(B) Breakdown	of W-2 and/or 1099-MI	SC compensation	(C) Detirement	(D) Nantayahla	(E) Total of	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Beth White		0.	24,000.	10,500.	26,327.	301,288.	0.
1 President & CEO (i	0.	0.	0.	0.	0.	0.	0.
Jeri Nordbrock		0.	17,228.	5,947.	18,684.	171,736.	0.
2 CFO		0.	0.	0.	0.	0.	0.
Charles Place		0.	3,537.	7,073.	0.	192,848.	0.
3 Capital Proj Mg Dr (i		0.	0.	0.	0.	0.	0.
Andrew Newman		0.	0.	0.	19,531.	196,762.	0.
4 Activation/Op Dir		0.	0.	0.	0.	0.	0.
Matthew Rondot		0.	18,490.	5,025.	12,119.	150,719.	0.
5 Conserv/Maint Dir		0.	0.	0.	0.	0.	0.
Doug Overman		0.	0.	0.	0.	152,188.	0.
6 Chief Adv Offc to 4/15/19 (i		0.	0.	0.	0.	0.	0.
		1		L		L	
7 (i							
		<b>1</b>					
8 (i							
		<b>1</b>				L	
9 (i							
		<b>↓</b>		<b> </b>		<b> </b>	
10 (i							
		<b>↓</b>		<b> </b>		<b>_</b>	
11 (i							
		<b>↓</b>		<b> </b>		<b></b>	
12 (i							
		<b>↓</b>		<b> </b>		<b></b>	
13 (i							
		<b>↓</b>		<b> </b>		<b></b>	
14 (i							
		<b></b>		<b> </b>		<b> </b>	
15 (i							
		<b></b>		<b> </b>		<b> </b>	
16 (i	)	TEE 0/11021 10/20	2/10				I (Form 000) 2019

BAA

TEEA4102L 10/29/18

Schedule J (Form 990) 2018

Page 2

Schedule J (Form 990) 2018 Houston Parks Board 74-1860046 Page 3

# Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

BAA Schedule J (Form 990) 2018

# 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.

Attach to Form 9

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
Houston Parks Board
Part I Types of Property

Employer identification number
74-1860046

		(a) Check if applicable	(b)  Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Meth- noncash	od of o	<b>d)</b> determir bution a	ning mounts
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	Х	9	7,712,090.	FMV			
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 • ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► ( )							
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done				29			
			3				Yes	No
20	Domina the communication and the communication	la de la casa de la ca						
30a	During the year, did the organization receive by contri it must hold for at least three years from the date							
	for exempt purposes for the entire holding period					30 a		Х
b	If 'Yes,' describe the arrangement in Part II.							
	Does the organization have a gift acceptance police	cy that requi	res the review of any r	nonstandard contributio	ns?	31	Х	
	Does the organization hire or use third parties or							
	noncash contributions?					32 a		Х
b	If 'Yes,' describe in Part II.							
33	If the organization didn't report an amount in colu describe in Part II.	mn (c) for a	type of property for wh	hich column (a) is chec	ked,			

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

Schedule M (Form 990) 2018

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.

**BAA** TEEA4602L 10/22/18 **Schedule M (Form 990) 2018** 

## **SCHEDULE 0** (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2018

Open to Public Inspection

Name of the organization

Houston Parks Board

Department of the Treasury Internal Revenue Service

74-1860046

Employer identification number

## Form 990, Part III, Line 4d - Other Program Services Description

The Houston Parks Board assists with special projects to promote cultural activities and athletic events as well as managing trust accounts for City supported park and community programs.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is reviewed by HPB's CFO and President then distributed to the Board of Directors prior to filing with the IRS.

## Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Members of the HPB Board of Directors and Staff complete disclosure statements annually and update them when changes occur from the disclosure statement on file at HPB. If a conflict of interest is disclosed, the Governance & Nominating committee reviews the material facts associated with the potential conflict. If the committee determines a conflict exists, the member is separated from influencing all future board actions with respect to such conflict.

## Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

A subcommittee of the Executive Committee of HPB conducts an evaluation review for the top management official. The evaluation includes a performance review, an evaluation of compensation for comparable positions, and feedback from other board members. A written substantiation of the review and compensation decision is then prepared.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The President & CEO evaluates key employees on an annual basis. includes a written performance review and an evaluation of compensation for comparable positions.

Name of the organization	Employer identification number
Houston Parks Board	74-1860046

# Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents, the conflict of interest policy, and financial statements are available upon request.

## SCHEDULE R (Form 990)

**Related Organizations and Unrelated Partnerships** 

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

► 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.

2012

2018

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Houston Parks Board

Open to Public Inspection

Employer identification number

74-1860046

(a) Name, address, and EIN (if applicable) of disregarded e	ntity Primary	activity Legal do or foreign	Legal domicile (state or foreign country)		(d) Total income		(e) of-year assets	Direct contro entity		ling
<u>(1)</u>										
(2)	<u>-</u>									
<u>(3)</u>										
Part II Identification of Related Tax-Exempt On had one or more related tax-exempt org	rganizations. Compleanizations	te if the organizatio tax year.	n answered	l 'Yes'	on Form 990	0, Pari	t IV, line 34, b	oecause	it	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	e Exempt C section	Code n	(e) Public charity (if section 501)	status (c)(3))	(f) Direct controll entity	ling S	<b>(g)</b> lec 512(i ntrolled	b)(13) entity?
(1) Houston Parks Board LGC, Inc 300 N Post Oak Lane Houston, TX 77024 26-3091027	Provide support for the City's park system	TX	170(c)(1)		Government		City of Houstor	f	Yes	No X
(2) Houston Parks Board Foundation  300 N Post Oak Lane Houston, TX 77024 27-4576670	Provide support for Houston Parks Board	TX	501(c)		12a		Houston Pa Board	arks	Х	
(4)										
<u> </u>			1		I		1			

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 pa	rtnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	controlling (related, unrelated, income entity excluded from tax under sections		end-of-year		h) ropor- nate ations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	i) ral or aging ner?	(k) Percentage ownership
		country)		512-514)			Yes	No	1065)	Yes	No	
<u>(1)</u>												
(2)	  -											
	-											
	-											
-												
<u>(3)</u>	-											
	-											
	-											

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>(b)</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	Sec 512 controlled	) (b)(13) d entity?
		country)	entity	or trust)				Yes	No
(1)									
	Ī								
	Ī								
(2)									
	Ī								
	Ī								
(3)									
	Ī								
	İ								
	†								
	1			I		1		ı .	

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

Χ

Yes No

1 a

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

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

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?

<b>b</b> Gift, grant, or capital contribution to related organization(s)			1b	X	
c Gift, grant, or capital contribution from related organization(s)			1 с		Χ
d Loans or loan guarantees to or for related organization(s)			1 d		Χ
e Loans or loan guarantees by related organization(s)			1 e		Х
f Dividends from related organization(s)			1f		Х
g Sale of assets to related organization(s)			1g		Х
h Purchase of assets from related organization(s)			1h		Х
i Exchange of assets with related organization(s)			1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)			1j		Х
k Lease of facilities, equipment, or other assets from related organization(s)			1k		Х
I Performance of services or membership or fundraising solicitations for related organization(s)				Х	- 23
m Performance of services or membership or fundraising solicitations by related organization(s)				21	Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				X	71
Sharing of paid employees with related organization(s)				X	
• Charling of paid employees with relation organization(s)				Λ	
p Reimbursement paid to related organization(s) for expenses			1р		Х
q Reimbursement paid by related organization(s) for expenses.				Х	Λ
d Reimbursement paid by related organization(s) for expenses.			1q	Λ	
Other transfer of each as menosity to related expeniention(s)			1		3.7
r Other transfer of cash or property to related organization(s).			<u> </u>		X
s Other transfer of cash or property from related organization(s)			1s		X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including cover	·			I.	
<b>(a)</b> Name of related organization	<b>(b)</b> Transaction	(c) Amount involved	Method of	i) detern	ninina
	type (a-s)		amount	involv	ed
1) Houston Parks Board LGC, Inc	b	9,561,302.	Cash		
·		, ,			
2)					
<del>-</del> /					
2)					
3)					
4)					
5)					
6)					
AA TEEA5003L 06/07/18	1	I Schedu	le <b>R</b> (Forn	1 990)	2018
111		2011044		,	

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

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

(a) Name, address, and EIN of entity			(e) Are all partn section 501(c)(3)		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	tion	n) ropor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or aging ner?	(k) Percentage ownership
		sections 512-514)	Yes	No	•		Yes	No	<b></b>	Yes	No			
<u>(1)</u>														
<u>(2)</u>														
<u>(3)</u>	1													
	-													
<u>(4)</u>	-													
(5)	1													
	1													
<u>(6)</u>														
<u></u>														
(8)														

**BAA** TEEA5004L 06/07/18 Schedule **R** (Form 990) 2018

Provide additional information for responses to questions on Schedule R. See instructions.