Form **990**

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax**

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

► Do not enter social security numbers on this form as it may be made public.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Α	For th	ne 2021 calen	dar year, or tax year begin	ning 7/01	, 2021, and end	ding 6/	′30	,	20 2022
В	Check i	if applicable:	С				D Employ	er identi	fication number
	Ac	ddress change	Houston Arboretu	m & Nature Cen	ter		74-1	1587	380
	Na	ame change	4501 Woodway Dr				E Telepho		
	Ini	itial return	Houston, TX 7702	4-7708			7136	6818	433
		nal return/terminated						0020	
		nended return					G Gross re	eceints \$	3,709,695.
		oplication pending	F Name and address of principa	ol officer: D - 1- 1- 1 - M -	-1	H(a) Is this	a group return		
		phication pending	Same As C Above	Debbie Ma	гкеу	` ,	II subordinates ," attach a list.		
_	Tay	exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or 527	If "No	," attach a list.	See ins	tructions.
<u>'</u>		· ·	w.houstonarboret	·	4347(a)(1) 01 327	III/-> Croun	exemption nu		
K			II		Lv	1.7			
		of organization:		Association Other ►	L Year of form	mation: 196) / IVI S	tate of le	egal domicile: TX
Pa	rt I	Summar Briefly deseri	y ibo the ergenization's miss	ion or most significant	ootivitioo. Mb a _ mil a a		+ - II		7
	1		be the organization's miss						
<u>s</u>			Center is to prove and to protect a						
nar			plants and animals		E ALDOLECUM as	<u>a nave</u>	ii aiiu s	ancı	uary ror
Ver	2		ox ► if the organization		ations or disposed of	more than 2	25% of its	net as	
ဗ			oting members of the gover					3	38
•გ			dependent voting members					4	37
ţ <u>i</u>			r of individuals employed ir					5	30
Activities & Governance			r of volunteers (estimate if					6	250
Ą			ed business revenue from					7a	0.
	b	Net unrelated	d business taxable income	from Form 990-T, Part	I, line 11			7b	0.
	_			***			Prior Year		Current Year
<u>•</u>			and grants (Part VIII, line				2,333,7		2,425,306.
en		-	vice revenue (Part VIII, line				253,5		623,732.
Revenue			ncome (Part VIII, column (A	-			665,8		-462,424.
-			ie (Part VIII, column (A), lir e – add lines 8 through 11				661,1		907,440.
			imilar amounts paid (Part				3,914,2	50.	3,494,054.
			I to or for members (Part I)				1 400 1	7.0	1 000 400
Se	15		er compensation, employed		1,488,1	76.	1,908,492.		
ŠUŠ	16a		fundraising fees (Part IX, o						
Expenses	b		sing expenses (Part IX, col	_	206,086				
ш	17		ses (Part IX, column (A), li	•			861,6		1,035,612.
			es. Add lines 13-17 (must				2,349,8		2,944,104.
		Revenue less	s expenses. Subtract line 1	8 from line 12			1,564,4	02.	549,950.
, e							ing of Curren		End of Year
Net Assets of Fund Balance	20		(Part X, line 16)				8 , 779 , 5		7,211,255.
t Ass	21	Total liabilitie	es (Part X, line 26)				2,040,9	22.	1,393,055.
₽Ē	22		r fund balances. Subtract li	ine 21 from line 20			6,738,6	65.	5,818,200.
Pa	rt II	Signatur	re Block						
Unde	er penal	ties of perjury, I de	eclare that I have examined this retu arer (other than officer) is based on	urn, including accompanying so	chedules and statements, and	to the best of r	my knowledge	and beli	ef, it is true, correct, and
COIII	JICIC. DI	I.	arer (other than officer) is based on	an information of which prepa	ci ilas arīj kriowicage.				
٠.		Signatu	ure of officer			D	ate		
Siç He	jn								
пе	re		bie Markey r print name and title			Exec	utive I	orec	ctor
		, ,	preparer's name	Preparer's signature	Date		Chast. K	ζ if	PTIN
_			•	1,000	Date		_		
Pa		-	nn Kroon	<u> Lee Ann Kroon</u>			self-employe	eu .	P01690657
Uc	epare e On	I					Firm's EIN	•	
- 3	J J 11	Firm's addre							.010_1100
		1	Spring, TX 7	1300			Phone no.	113-	-818-1180

May the IRS discuss this return with the preparer shown above? See instructions

No

Par	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		· · ·
•	The mission of te Houston Arboretum & Nature Center is to provide education al	2011	the
	natural environment to people of all ages and to protect and enhance the Arbo:		
	a haven and sanctuary for native plants and animals.	<u> </u>	
2	Did the organization undertake any significant program services during the year which were not listed on the prior		
	Form 990 or 990-EZ?	X	No
	f "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes f "Yes," describe these changes on Schedule O.	s X	No
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	, avnan	CAC
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	expens	es,
	and revenue, if any, for each program service reported.		
1.	(Code) VEyponees \$ 2.255,204 including grapts of \$	00 70	
4 a	(Code:) (Expenses \$2,355,284. including grants of \$) (Revenue \$6 Educational programs for people of all ages on a variety of topics, singly and	23,73	<u>3Z.</u>)
	series, during school breaks and on week-ends. Through advanced adult education		
	Houston Arboretum also offers educational programs for related fields, profess		
	groups and area naturalists and conservationists. These programs serve as a ga		
	agent for professional organizations for education meetings, seminars and world		
			. — — -
1 h	(Code:) (Expenses \$ including grants of \$) (Revenue \$		
4 D	(Code) (Expenses γ including grants of γ) (Revenue γ		
			. _
			· — — -
	(Onder) (Figure 2)		
4 C	(Code:) (Expenses \$ including grants of \$) (Revenue \$)		
	· 		
			· — — -
			· — — -
۷ ۸	Other program services (Describe on Schedule O.)		
4 a	Expenses \$ including grants of \$) (Revenue \$)	
4 e	Total program service expenses ► 2.355.284.	,	

			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	Χ	
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? <i>If 'Yes,' complete Schedule C, Part II</i>	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? <i>If 'Yes,' complete Schedule D, Part II</i>	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 donor-restricted endowments or in 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, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	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	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	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
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)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.	12a	X	
t	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		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		X
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	Х	
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 (2021) Houston Arboretum & Nature Center 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 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
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	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
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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 l</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. 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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		.03	110
	b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
ВΛ	TFFA0104I 09/22/21	F	oon /	2021

Form 990 (2021) Houston Arboretum & Nature Center

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

			Yes	No
28	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 2a 30			
ı	of fat least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ı	b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule O</i>	3 b		
4 8	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
	o 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		X
	b 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		
	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
	a 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).	0.0		
	• • • • • • • • • • • • • • • • • • • •			
Č	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
(c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7 c		X
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Figure 2 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ı	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 g 7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	<i>,</i>		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
i	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ı	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
ä	a Initiation fees and capital contributions included on Part VIII, line 12			
ı	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
ä	a Gross income from members or shareholders			
ı	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ı	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
č	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		v
	excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		Х
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If 'Yes,' complete Form 6069.			

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 on 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..... 38 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 37 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, 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 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, Χ stockholders, or persons other than the governing body?..... 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8 2 **b** Each committee with authority to act on behalf of the governing body?..... 8 b 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 on Schedule O..... 9 Χ 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?..... 10 a Χ 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? 10 b 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 on Schedule O the process, if any, used by the organization to review this Form 990. 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 on 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? X a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0....... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process on 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?..... 16 a X **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... 16b 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 Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O 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

Debbie Markey 4501 Woodway Dr Houston TX 77024-7708 713 681-8433

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

Director

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

(C)

Position (do not check more than one box, unless person is both an officer and a director/trustee)

Average hours per week

| (B)
| Average hours per week | Position (do not check more than one box, unless person is both an officer and a director/trustee)
| (C)
| Reportable compensation from the organization (W-2/1099- (W-2/109

	ber		hours director/trustee)							of other
	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/1099-NEC)	relatéd organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Debbie Markey Executive Dir.	<u>40</u> 0			Х				130,436.	0.	0.
(2) August Bering	1							200, 200.		
Vice President	0	Χ						0.	0.	0.
(3) Leslie Fertitta	1									
Director	0	Χ						0.	0.	0.
(4) Cullen Geiselman Muse	1									
President	0	Χ		Χ				0.	0.	0.
(5) Jeff Geuther	11									
Director	0	Χ						0.	0.	0.
_(6) Daniel David Hu	1									
Secretary	0	Χ		Χ				0.	0.	0.
_(7)_Ernest_Pekmezaris	11									
Vice President	0	Χ		Χ				0.	0.	0.
(8) Sam Pyne	1							_		_
Treasurer	0	Χ		Χ				0.	0.	0.
_(9) Allen Rustay	1							_		_
Vice President	0	Χ		Χ				0.	0.	0.
(10) Andrew Abendshein	1							_		
Vice President	0	Χ		Χ				0.	0.	0.
(11) Catherine Elkins	1							_		_
Vice President	0	Χ		Χ				0.	0.	0.
(12) Ruth Flournoy	1							_		
Vice President	0	Χ		Χ				0.	0.	0.
(13) Crystal Hadnott	1									•
Director	0	Χ	-					0.	0.	0.
(14) Frank Hauser	1	37						0	0	0

BAA TEEA0107L 09/22/21 Form **990** (2021)

Part V	/II Section A. Officers, Directors, Tru		Key	Lm			es,	and	d Highest Com	pensated Emp	oyees	5 (conti	nued)
		(B)			(0	•							
	(A) Name and title	Average hours per week	box	, unle	ess pe	erson direct	than is both or/trus	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related organizations	Estim	(F) ated amo	ount
		(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/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compe the c an	ensation organizat d related anization	tion d
	ndrew Hull ice President	10	Х		Х				0.	0.			0.
(16) G	reg Meece irector	1	X		21				0.	0.			0.
(17) M	osby Perrow irector	1	X						0.	0.			0.
(18) P	eter Tropoli irector	1	X						0.	0.			
(19) J	anna Charlton Webber	0 - 1 - 0			37								0.
(20) T	ice President ensie Axton	0 1	X		Х				0.	0.			0.
(21) E	irector thel Hutcheson	0 1	X						0.	0.	0.		
(22) R	irector eese Henningsen	1	X						0.	0.	0.		
(23) E	irector lisa Stude Pye	1	X						0.	0.			0.
(24) A	irector my_Woolf	1	X		•				0.	0.			0.
(25) D	ice President avid Andrew	1	X		X				0.	0.	0.		0.
1 b Sı	irector ubtotal	0	X					>	130,436.	0.	0.		
d To	otal from continuation sheets to Part VII, Section otal (add lines 1b and 1c)							>	0. 130,436.	0.			0.
	otal number of individuals (including but not limited orm the organization \(^{\begin{subarray}{c} \ 1 \end{subarray}}\)	to those I	isted	abov	ve) \	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	ก 	
3 Di	d the organization list any former officer, direct line 1a? <i>If 'Yes.' complete Schedule J for suc</i> l	tor, truste	e, ke	ey er	mple	oyee	e, or	high	nest compensated	employee	3	Yes	No X
4 Fo	or any individual listed on line 1a, is the sum of e organization and related organizations greate alch individual	reportab r than \$1	le co 50,0	mpe 00?	ensa If '\	ition ⁄es,'	and com	oth <i>ple</i>	er compensation te Schedule J for	from			X
5 Di	d any person listed on line 1a receive or accruer services rendered to the organization? If 'Yes	e compen	satio	n fr	om	anv	unre	late	ed organization or	individual			X
	n B. Independent Contractors												
1 Co	omplete this table for your five highest compensimpensation from the organization. Report compensitions	sation for	epen the c	dent alen	t cor dar j	ntrad year	ctors endi	tha ng v	t received more the truth or within the or	han \$100,000 of ganization's tax year			
	(A) Name and business address (B) Description of services C							Compe	C) ensatio	n			
	otal number of independent contractors (including b 00,000 of compensation from the organization		ited to	o tho	se I	isted	d abo	ve)	I who received more	than			

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

Houston Arboretum & Nature Center 74-1587880

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

Name and title	0. 0. 0.	Estimated amount of other compensation from the organization and related organizations
Michael Jhin 1 0 X 0. Harry Kirk 1 0 X 0. Director 0 X 0. James Melchers 1 0 X Director 0 X 0. Tim Neuhaus 1 0 X Director 0 X 0. Steve Newton 1 0 X	0.	0.
Harry Kirk 1 Director 0 X 0. James Melchers 1 0 X 0. Director 0 X 0. 0. Tim Neuhaus 1 0 0. 0. Steve Newton 1 0. 0. 0.	0.	0.
James Melchers 1 Director 0 X Tim Neuhaus 1 Director 0 X Steve Newton 1	0.	
Tim Neuhaus 1 Director 0 X 0. Steve Newton 1 0 0		
		0.
	0.	0.
Chris Odell 1 0 X 0.	0.	0
Louis_Weisberg 1 0 X 0.	0.	0
Debbie Yee 1 0 X 0.	0.	0
Jason_Beauvais10 X 0.	0.	0
<u>Jason_Burt1</u> <u>Director</u> 0 X 0.	0.	0
<u>Nigel_Curlet</u>	0.	0
Jason Kinzel 1 Director 0 X 0.	0.	0
Andrea White 1 0 X 0.	0.	0

Form 990 (2021) Houston Arboretum & Nature Center 74-1587880 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII. (B) Related or (A) Total revenue (D) Unrelated Revenue excluded from tax exempt business under sections 512-514 function revenue revenue 1 a Federated campaigns 1 a Gifts, Grants, ilar Amounts **b** Membership dues..... 1 b 98,669 c Fundraising events..... 1 c d Related organizations 1 d e Government grants (contributions) 460,990 Contributions, f All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 1,865,647 **q** Noncash contributions included in 351,496 h Total. Add lines 1a-1f..... • 2,425,306 Business Code Program Service Revenue 2a Educational programs 611710 623,732 623,732 **f** All other program service revenue. . . g Total. Add lines 2a-2f 623,732 Investment income (including dividends, interest, and -462,<u>424</u> -462,424 Income from investment of tax-exempt bond proceeds Royalties.... (i) Real (ii) Personal 6 a Gross rents 6a 244,139 **b** Less: rental expenses 6b 77,378 c Rental income or (loss) | 6c 166,761 d Net rental income or (loss) 166,761 166,761 (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 7b and sales expenses c Gain or (loss)..... 7с **d** Net gain or (loss)..... 8 a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c). 8a 481,414 Other **b** Less: direct expenses..... 8b 107,525 c Net income or (loss) from fundraising events 373,889 **9 a** Gross income from gaming activities. See Part IV, line 19. 9a 9b **b** Less: direct expenses..... c Net income or (loss) from gaming activities..... **10 a** Gross sales of inventory, less..... returns and allowances. I0a 65,599 10b **b** Less: cost of goods sold.... 30,738 c Net income or (loss) from sales of inventory..... 34,861 34,861 **Business Code** Miscellaneous l**1a** <u>Miscellaneous</u> 331,929 331,929 Revenue

929

694,859

0

494,054

d All other revenue . . e Total. Add lines 11a-11d ...

Total revenue. See instructions.....

Form 990 (2021) Houston Arboretum & Nature Center 74
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re	sponse or note to any			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3	μ
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	130,436.	104,349.	16,957.	9,130.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,347,494.	1,077,995.	175,174.	94,325.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,341,434.	1,011,555.	173,174.	74,323.
9	Other employee benefits	317,500.	254,000.	41,275.	22,225.
10	Payroll taxes	113,062.	90,450.	14,698.	7,914.
11	Fees for services (nonemployees):	,			· , ·
á	Management				
	Legal				
	: Accounting	32,505.	26,004.	4,226.	2,275.
	Lobbying	027000.	20,0011	1,2201	2,2,0,
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
10	(A), amount, list line 11g expenses on Schedule O.)	27 772	20.016	4 010	0 644
	Advertising and promotion.	37,770.	30,216.	4,910.	2,644.
13	Office expenses	29,594.	23,675.	3,847.	2,072.
14	Information technology	29,133.	23,306.	3,788.	2,039.
15	Royalties	100.070	444 446	10.105	
16	Occupancy	139,270.	111,416.	18,105.	9,749.
17	Travel	12,078.	9,662.	1,570.	846.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	93,672.	74,938.	12,177.	6,557.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	97,375.	77,900.	12,659.	6,816.
23	Insurance	36,532.	29,226.	4,749.	2,557.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
á	Program & Educational Expense	362,835.	290,268.	47,169.	25,398.
	Paid Parking Expense	61,651.	49,321.	8,015.	4,315.
	Other	43,246.	34,597.	5,622.	3,027.
(Printing and Publications	35,724.	28,579.	4,644.	2,501.
•	All other expenses	24,227.	19,382.	3,149.	1,696.
25	Total functional expenses. Add lines 1 through 24e	2,944,104.	2,355,284.	382,734.	206,086.
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	o any line	e in this Part X	<u></u>	<u></u>	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			856,898.	1	948,249.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			2,045,000.	3	1,674,130.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	ner office I contribu	r, director, utor, or 35%		E	
	•			-		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section			6		
	7	Notes and loans receivable, net				7	
ts	8	Inventories for sale or use			15,649.	8	19,633.
Assets	9	Prepaid expenses and deferred charges				9	
Ä	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	1,951,394.			
		Less: accumulated depreciation		766,694.	2,649,563.	10 c	1,184,700.
	11	Investments – publicly traded securities	vestments – publicly traded securities.				
	12	Investments – other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			3,212,477.	15	3,384,543.
	16	Total assets. Add lines 1 through 15 (must equal line	33)		8,779,587.	16	7,211,255.
	17	Accounts payable and accrued expenses		34,074.	17	30,452.	
	18	Grants payable			,	18	•
	19	Deferred revenue			80,465.	19	258,720.
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete Part		_		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	ficer, dire utor, or 3	ector, trustee, 5%		22	
コ	23	Secured mortgages and notes payable to unrelated the				23	
	24	Unsecured notes and loans payable to unrelated third	•	<u> </u>	1,926,383.	24	1,103,883.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com			1, 720, 303.	25	1,100,000.
	26	Total liabilities. Add lines 17 through 25			2,040,922.	26	1,393,055.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		X	2,010,322.		1,030,000.
an	27	Net assets without donor restrictions			4,353,241.	27	4,807,327.
Bal	28	Net assets with donor restrictions		<u> </u>	2,385,424.	28	1,010,873.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.			2,303,424.		1,010,075.
or l	29	Capital stock or trust principal, or current funds	H		29		
ts	30	Paid-in or capital surplus, or land, building, or equipm				30	
se	31	Retained earnings, endowment, accumulated income				31	
t As	32	Total net assets or fund balances			6,738,665.	32	5,818,200.
Nei	33	Total liabilities and net assets/fund balances		<u> </u>	8,779,587.	33	7,211,255.
BA				L 09/22/21	0,110,001.		Form 990 (2021)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,4	94,0	54.
2	Total expenses (must equal Part IX, column (A), line 25).	2	2	2,9	44,1	04.
3	Revenue less expenses. Subtract line 2 from line 1	3				50.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	(38,6	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O). See Schedule O	9	-1	1.4	70,4	15.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	į	5,8	18,2	200.
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 on Schedule O.					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a				
	b Were the organization's financial statements audited by an independent accountant?			2 b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	ite				
	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	Х	
_	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3 b		
BAA	TEEA0112L 09/22/21		F	orm	990 ((2021)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

		e organization					Employer ide			er	
		on Arboretum & Natu					74-158				
		Reason for Public Cha		~			<u> </u>	truc	tions.		
The o	orga	anization is not a private found	· ·			•	•				
1		A church, convention of church				b)(1)(A)(i).				
2		A school described in section	n 170(b)(1)(A)(ii). (Att	tach Schedule E (Form	990).)						
3		A hospital or a cooperative h					• • •				
4		A medical research organiza	tion operated in conj	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(i	i) . Er	nter the	hospital's	
		name, city, and state:									
5		An organization operated for section 170(b)(1)(A)(iv). (Co		ege or university owned	or oper	ated by	a governmental ur	it de	scribed	in	
6		A federal, state, or local gove	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).				
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	1.)						
9		An agricultural research organi			•	oniunctio	on with a land-grant	colle	ae		
•		or university or a non-land-gran									
		university:									
10		An organization that normall from activities related to its investment income and unre June 30, 1975. See section 5	y receives (1) more t exempt functions, sub lated business taxabl	han 33-1/3% of its suppoject to certain exception e income (less section	ort from	contrib (2) no r	nore than 33-1/3%	of its	s suppoi	rt from gross	
11											
12											
	or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.										
а		Type I. A supporting organization organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervise	d. or controlled by its sur	ported o	rganizat	ion(s), typically by o	ivina	the supp on. You n	oorted ust	
b	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or										
_		management of the supporting must complete Part IV, Section	organization vested in	the same persons that c	ontrol or	manage	the supported orga	nizatio	on(s). Yo	ontrol of ou	
С		Type III functionally integrated organization(s) (see instruction)	A supporting organiza	tion operated in connectio	n w <u>i</u> th, ai	nd <u>f</u> unctio	onally integrated with	i, its s	supported	I	
d											
u		Type III non-functionally integrated. The constructions). You must com	organization generally	must satisfy a distribu	tion req	uiremen	t and an attentiver	on(s) less i	requiren	nent (see	
е		Check this box if the organiz integrated, or Type III non-fu	ation received a writt	en determination from t	the IRS	that it is	a Type I, Type II,	Туре	e III func	tionally	
f	Eı	nter the number of supported							[
g	Pi	rovide the following information	n about the supporte	d organization(s).					L		
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed loverning ment?	(v) Amount of monet support (see instruction			Amount of other (see instructions)	
					Yes	No					
(A)											
(B)											
(C)											
(D)											
(D)											
(E)											
<u>· · · </u>											
T-4-1											

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.)

Section A. Public Support								
Cale: begii	ndar year (or fiscal year nning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	7,015,523.	2,183,307.	2,151,984.	2,156,529.	2,523,975.	16,031,318.	
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.	
	Total. 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)	7,015,523.	2,183,307.	2,151,984.	2,156,529.	2,523,975.		
6	Public support. Subtract line 5 from line 4						16,031,318.	
Sec	tion B. Total Support						<u> </u>	
Cale: begi	ndar year (or fiscal year nning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
7	Amounts from line 4	7,015,523.	2,183,307.	2,151,984.	2,156,529.	2,523,975.	16,031,318.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	135,634.	248,296.	103,630.	665,813.	66,725.	1,220,098.	
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						17,251,416.	
12	Gross receipts from related activ	rities, etc. (see ins	structions)			12	0.	
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶ □	
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage			Γ		
	Public support percentage for 20 Public support percentage from 3						92.93 % 93.15 %	
	33-1/3% support test—2021. If t	he organization di	id not check the b	oox on line 13, an	d line 14 is 33-1/3	3% or more, check	k this box	
b	and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test—2020. 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 I	box and stop here	e. Explain in Part	VI how	
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances to	nd-circumstances est. The organiza	s test, check this l tion qualifies as a	box and stop here publicly supporte	Explain in Part do organization.	VI how the ►	
18	Private foundation. If the organize	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in:	structions ►	

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 te	ooto notou bolow,	produce comprete	,				
Sec	tion A. Public Support							
	ar year (or fiscal year beginning in) >	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021		(f) Total
1	Gifts, grants, contributions, and membership fees							
	received. (Do not include							
•	any 'unusual grants.')							
2	Gross receipts from admissions, merchandise sold or services							
	performed, or facilities							
	furnished in any activity that is related to the organization's							
	tax-exempt purpose							
3	Gross receipts from activities							
	that are not an unrelated trade							
4	or business under section 513. Tax revenues levied for the							
4	organization's benefit and							
	either paid to or expended on							
_	its behalf The value of services or							
5	facilities furnished by a							
	governmental unit to the							
_	organization without charge							
	Total. Add lines 1 through 5							
/a	Amounts included on lines 1, 2, and 3 received from							
	disqualified persons							
b	Amounts included on lines 2							
	and 3 received from other than disqualified persons that							
	exceed the greater of \$5,000 or							
	1% of the amount on line 13							
	for the year							
	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support							_
		4		(-) 0010	(d) 2020	(~) 2021		(f) Total
Calen	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(i) i otai
	dar year (or fiscal year beginning in) Amounts from line 6	(a) 201/	(b) 2018	(c) 2019	(d) 2020	(e) 2021		(i) rotar
9		(a) 201/	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(i) Total
9	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021		(i) Total
9	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Folds)
9 10a	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Folds
9 10a	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Folds
9 10a	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Folds
9 10a b	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Fotor
9 10a b	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Fotor
9 10a b	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Fotor
9 10a b	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(6) 2021		(ly Fotol
9 10a b c 11	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Fotol
9 10a b c 11	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(6) 2021		(ly Fotor
9 10a b c 11	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(6) 2021		(ly Fotor
9 10a b c 11	Amounts from line 6	(a) 2017	(b) 2018	(c) 2019	(u) 2020	(e) 2021		(ly Fotor
9 10a b c 11	Amounts from line 6							(ly Fotor
9 10a b c 11	Amounts from line 6	for the organizati	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c		
9 10a b c 11 12	Amounts from line 6	for the organizati	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c		
9 10a b c 11 12 13 14 Sec	Amounts from line 6	for the organizati stop hereblic Support F	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c		
9 10a b c 11 12 13 14 Sec 15	Amounts from line 6	for the organizati stop here blic Support F	on's first, second, Percentage n (f), divided by li	third, fourth, or f	ifth tax year as a	section 501(c	15	
9 10a b c 11 12 13 14 Sec 15 16	Amounts from line 6	for the organizati stop here blic Support F 121 (line 8, colum 2020 Schedule A	on's first, second, Percentage n (f), divided by li, Part III, line 15.	third, fourth, or f	ifth tax year as a	section 501(c		
9 10a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6	for the organizati stop here blic Support F 121 (line 8, colum 2020 Schedule A estment Incol	on's first, second, Percentage n (f), divided by li , Part III, line 15 me Percentage	third, fourth, or f	ifth tax year as a	section 501(c	15 16	
9 10a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6	for the organizati stop hereblic Support F 121 (line 8, colum 2020 Schedule A restment Incolor or 2021 (line 10c	on's first, second, Percentage n (f), divided by li , Part III, line 15 me Percentage , column (f), divided	third, fourth, or f	ifth tax year as a	section 501(c	15 16	
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9 10a b c 11 12 13 14 Sec 17 18 19a	Amounts from line 6	for the organizati stop here	on's first, second, Percentage n (f), divided by li , Part III, line 15 me Percentage , column (f), divided le A, Part III, line lid not check the leter. The organish ont check a bo	third, fourth, or f	ifth tax year as a	section 501(c	15 16 17 18 6, and I ation	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 Part VI 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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	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 Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was			
	accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If 'Yes,' complete Part I of Schedule L (Form 990).	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))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer line 10b below.	10a		
b	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.)	1 0 b		

11. Has the organization accepted a gift or contribution from any of the following persons? a A person who directly in ridinately controls, either alone or together with persons described on lines 11h and 11c below, the governing body of a supported organization. b A family member of a person described on line 11a above? c A 35% carolite miting of a person described on line 11a above? c A 35% carolite miting of a person described on line 11a above? c A 35% carolite miting of a person described on line 10 above? c A 35% carolite miting of a person described on line 10 above? 1 Did the governing body, members of the giverning body, officers acting in their official capacity, or membership of or or more supported organizations have the power to require y appoint or erical at least a majority of the organization of granizations have the power to requirely appoint or erical at least a majority of the organization of organizations have the power or fore supported organizations (s) effectively operated, supervised, or controlled the approaches in Part VI how the supported organizations (s) effectively operated, supervised, or controlled the approaches of the supported organizations or restrictions, if any, applied to such powers during the tax year. 2 Did the organization provide organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 3 Like a majority of the organization supported organizations of lives, explain in Part VI how providing such benefit carried out the purposes of the supported organizations of lives, explain in Part VI how providing such benefit carried out the purposes of the supported organizations and the supported organizations are supported organizations and appropriate organizations was vested in the same persons that controlled or managed the supported organizations (s) that supported organizations was vested in the same persons that controlled or managed the supported organizations (s) to describe organizations and variety of the organizati	Part	t IV	Supporting Organizations (continued)			
a A person and othersty or indirectly controls, either alone or together with persons discribed on lines 11th and 11c below, the governing body of a supported organizations. b A family member of a person described on line 11a above? c A 30% controlled with of a person described on line 11a above? 1 Did the governing body, members of the governing body, efficiers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's efficiers, directors, or furtaines at all times during that say year? Web, describe in Part VI how the powers power allocated among the supported organization in the powers to appoint and/or remove officers, directors, or furtaines at all times during that say year? Web, describe in Part VI how providing such benefit carried out the purposes of the supported organizations and what controlled or remove officers, directors, or furtaines where allocated among the supported organizations and what controlled or remove officers, directors, or furtaines where allocated among the supported organizations and what controlled or supported organizations. 2 Did the organization operate for the benefit of any supported organization of their than the supported organizations. 2 Did the organization operate for the benefit of any supported organization of the than the supported organizations. 1 Were a majority of the organization of organizations. 1 Were a majority of the organization of organizations of the supported organizations of the supported organizations of the supported organizations. 1 Were any of the organization of organizations of the date of notification, and (ii) copies of the supported organizations of supported organizations of the organization of the organi	11	Lloc t	the expenientian accepted a gift or contribution from any of the following persons?		Yes	No
the governing body of a supported organization? A Site and the properties of a person described on line 11a above? A Site and the properties of the governing body officers acting in their official capacity, or membership of one or more supported organizations bave the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the law year? If 'No, describe in Part VI now the supported organizations officers, directors, or trustees at all times during the law year? If 'No, describe in Part VI now the supported organization's officers, directors, or trustees at all times during the law year? If 'No, describe in Part VI now the supported organization's officers, directors, or trustees are allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the fax year. 2 bid the organization operate for the benefit of any supported organization of the the purposes of the supported organizations? If 'No, describe in Part VI now providing such benefit carried out the purposes of the supported organizations? If 'No, describe in Part VI now providing such benefit carried out the purposes of the supported organizations? If 'No, described in Part VI now providing such benefit carried out the purposes of the supported organizations? If 'No, described in Part VI now the organization was vested in the same persons that controlled or managed the supported organization of the supporting organization was vested in the same persons that controlled or managed the supported organization of the supporting organization was vested in the same persons that controlled or managed the supported organization of the supporting organization was vested in the same persons that controlled or managed the supported organization of the organization in the supported organiz						
C A 35% controlled entity of a person described on line 11a or 11b above? If Yer's to line 11a, 11b, or 11b, provide debut in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations of effects, threateds, or instense at all at times during the tax year? If Yes's describes in Part VI have the supported organization of effects, threated, supervised, or controlled the supported organization of the threated and more than one supported organization, describe how the powers to appoint and/or remove officers, 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 Did the organization operate for the benefit of any supported organization of If Yes's, explain in Part VI have providing such benefit carried out the purposes of the supported organization? If Yes's, explain of Part VI have control or menagement of the supported organization was vested in the same persons that controlled or managed the supported organization(s). 1 Were a majority of the organization or trustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or managed the supported organization(s). 1 Did the organization was vested in the same persons that controlled or managed the supported organization(s). 1 Did the organization was vested in the same persons that controlled or managed the supported organization(s). 2 Were any of the organization of softicers, directors, or trustees either (i) appointed or elected by the supported? 2 Were any of the organization of softicers, directors, or trustees either (i) appointed organizations and organizations in effect on the date of notification, to the certain the restriction				11a		
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Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least an anjority of the organization's officers, directors, or trustees at all times during the tax year? "No, describe in Part VI how the supported organization's defectively operated, supervised, or controlled the organization activities. If the organization had more twen velocities, describe how the power is objected and organization of the power is objected and organization of the power is objected organization and more twen velocities, and the power is objected and organization of the power is objected organization and what controlled the organization and organization and what controlled the supporting organization. Did the organization of the benefit of any supported organizations or restrictions, if any, applied to such powers all the opporting organization. Section C. Type II Supporting Organizations Were a majority of the organizations' 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 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, (i) a organization was received in the provided organization organization and the provided organization and the provided organization and the provided organization and the provided organization management of allowing and the province organization management of allowing and the province organization organization management of allowing and province organization organizations in the organization was responsive of the organizat				11c		
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Sche	edule A (Form 990) 2021 Houston Arboretum & Nature Cent	er	74-15	87880 Page
Pai	₹ V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	on N	ov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.
Section A — Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
Ł	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
C	I Total (add lines 1a, 1b, and 1c)	1d		
6	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 0.015 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 0.035.	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 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). BAA Schedule A (Form 990) 2021

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sec	tion D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes	1			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations,	2			

3 Administrative expenses paid to accomplish exempt purposes of supported organizations
4 Amounts paid to acquire exempt-use assets
4

5 Qualified set-aside amounts (prior IRS approval required — provide details in **Part VI**) 5

6 Other distributions (describe in Part VI). See instructions.
 7 Total annual distributions. Add lines 1 through 6.
 7

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.

in **Part VI**). See instructions.

9 Distributable amount for 2021 from Section C, line 6

9 Line 8 amount divided by line 9 amount

10

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			
RAA		Schod	ule A (Form 990) 2021

BAA Schedule A (Form 990) 2021

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section 4, 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.)

BAA TEEA0408L 08/31/21 Schedule A (Form 990) 2021

SCHEDULE D (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

Houston Arboretum & Nature Center

Open to Public Inspection
Employer identification number

				74-1587880
Par	t Organizations Maintaining Dono	r Advised Funds or Other	Similar Funds or A	ccounts.
	Complete if the organization answ	vered 'Yes' on Form 990, F	Part IV, line 6.	
		(a) Donor advised fun	ds (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 don are the organization's property, subject to the organization's	or advisors in writing that the as organization's exclusive legal col	sets held in donor advisentrol?	ed funds
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing of the donor or donor advisor, or	that grant funds can be or for any other purpose c	used only onferring Yes No
Par	t II Conservation Easements.			
1	Complete if the organization answ			
1	Purpose(s) of conservation easements held by	the organization (check all that	apply).	
	Preservation of land for public use (for examp	le, recreation or education)		storically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contrib	ution in the form of a cons	ervation easement on the
	last day of the tax year.			Held at the End of the Tax Year
-	Total number of conservation easements		2a	Tield at the Liid of the Tax Teal
	Total acreage restricted by conservation easen			
	: Number of conservation easements on a certifi			
(Number of conservation easements included in structure listed in the National Register			
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished, or	terminated by the organiza	tion during the
4	Number of states where property subject to conser	vation easement is located >		
5	Does the organization have a written policy regard enforcement of the conservation easemen			
6	Staff and volunteer hours devoted to monitoring, in			<u> </u>
7	Amount of expenses incurred in monitoring, inspect ►\$	cting, handling of violations, and er	nforcing conservation ease	ments during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requi	rements of section 170(h	n)(4)(B)(i)
9	In Part XIII, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements.		'9	
Par		ctions of Art, Historical Tr	easures, or Other S	imilar Assets.
	Complete if the organization ansv	vered 'Yes' on Form 990, F	Part IV, line 8.	
1 a	If the organization elected, as permitted under historical treasures, or other similar assets hele Part XIII the text of the footnote to its financial	d for public exhibition, education	, or research in furtherar	nd balance sheet works of art, nce of public service, provide in
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held fo following amounts relating to these items:	r public exhibition, education, or re	search in furtherance of pu	ublic service, provide the
	(i) Revenue included on Form 990, Part VIII, I			
_	(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 FASB A	ASC 958 relating to these items:	assets for financial gain, p	
	Revenue included on Form 990 Part VIII line	1		►Ś

▶\$

Part III Organizations Maintaining Co	ollections of Art, Histo	ricai i reasures, or	Other Similar Ass	sets (continue	ea)			
3 Using the organization's acquisition, accession items (check all that apply):	n, and other records, check an	ny of the following that ma	ake significant use of its	collection				
a Public exhibition d Loan or exchange program								
b Scholarly research e Other								
c Preservation for future generations	c Preservation for future generations							
4 Provide a description of the organization's coll Part XIII.	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.							
5 During the year, did the organization solicit to be sold to raise funds rather than to be	maintained as part of the o	rganization's collection?)	Yes	No			
Part IV Escrow and Custodial Arrang line 9, or reported an amount	ements. Complete if to on Form 990, Part X,	he organization ans line 21.	swered 'Yes' on Fo	orm 990, Part	: IV,			
1 a Is the organization an agent, trustee, custo on Form 990, Part X?	dian or other intermediary	for contributions or othe	er assets not included	Yes	No			
b If 'Yes,' explain the arrangement in Part X	II and complete the following	ng table:			_			
				Amount				
c Beginning balance			1c					
d Additions during the year			1 d					
e Distributions during the year								
f Ending balance								
2 a Did the organization include an amount on					No			
b If 'Yes,' explain the arrangement in Part XI	II. Check here if the explan	nation has been provide	d on Part XIII					
Part V Endowment Funds. Complete								
	rent year (b) Prior year	(c) Two years back	(d) Three years back	(e) Four years	back			
1 a Beginning of year balance								
b Contributions								
c Net investment earnings, gains,								
and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage of the cu	•	e 1g, column (a)) held a	as:					
a Board designated or quasi-endowment ▶	%							
b Permanent endowment ►	00							
c Term endowment ► %								
The percentages on lines 2a, 2b, and 2c shou	ld equal 100%.							
3 a Are there endowment funds not in the possess	sion of the organization that a	re held and administered	for the	V				
organization by:				Yes	No			
(i) Unrelated organizations				3a(i)				
b If 'Yes' on line 3a(ii), are the related organ				3a(ii)				
4 Describe in Part XIII the intended uses of t	·			3b				
		int turius.						
Part VI Land, Buildings, and Equipme Complete if the organization a		n 990, Part IV, line	11a. See Form 99	90, Part X, Iir	ne 10.			
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	lue			
1 a Land								
b Buildings		282,100.			100.			
c Leasehold improvements		1,133,462.		1,133,	462.			
d Equipment					_			
e Other		535,832.	766,694.	-230,	862.			
Total. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part X, o	column (B), line 10c.)		1,184,				
RΔΔ			Schoo	tule D (Form 990)	1 2021			

	Investments — Other Securities. Complete if the organization answered	L'Yes' on Form 99	O Part IV line 11h See Form	990 Part X line 12
(a) Des	cription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	
	cial derivatives			,
` '	ly held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u>(l)</u>				
	ımı (b) must equal Form 990, Part X, column (B) line 12.) •		27.72	
Part VII	Investments — Program Related. Complete if the organization answered	L'Yes' on Form 99	N/A 0 Part IV line 11c See Form	990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	
(1)	(4)	(4) = 1011 101111	(5)	<u> </u>
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	ımn (b) must equal Form 990, Part X, column (B) line 13.) •			
Part IX	Other Assets.			
	Complete if the organization answered	L'Yes' on Form 99	0 Part IV line 11d See Form	990 Part X line 15
	Complete if the organization answered (a) De	l 'Yes' on Form 99 scription	0, Part IV, line 11d. See Form	990, Part X, line 15 (b) Book value
(1) Ass	·		0, Part IV, line 11d. See Form	(b) Book value
(2)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4) (5)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4) (5) (6)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4) (5) (6) (7)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4) (5) (6)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8)	(a) De		0, Part IV, line 11d. See Form	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) De set held for sale	scription		(b) Book value 321, 558.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	(a) De set held for sale Foliation (b) must equal Form 990, Part X, column (c) Other Liabilities.	Scription B) line 15.)		(b) Book value 321, 558. 3, 384, 543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Compared X	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Compart X)	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	Scription B) line 15.)		(b) Book value 321, 558. 3, 384, 543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Compart X) 1. (1) Fedo	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Compart X) 1. (1) Fedical (2)	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Compart X 1. (1) Fedical (2) (3)	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Compart X) 1. (1) Fedical (2)	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Ci Part X 1. (1) Fedd (2) (3) (4) (5) (6)	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Feddo(2) (3) (4) (5) (6) (7)	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colored Colored	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colored Colored	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colored Colored	(a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)		(b) Book value 321, 558. 3,384,543.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colored (Co	(a) Deset held for sale olumn (b) must equal Form 990, Part X, column (a) Other Liabilities. Complete if the organization answered 'Yes' on Feral income taxes	B) line 15.)	1e or 11f. See Form 990, Part X, line 2	(b) Book value 321, 558. 3, 384, 543. (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column ((a) Deset held for sale Folumn (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description	B) line 15.)	1e or 11f. See Form 990, Part X, line 2	(b) Book value 321, 558. 3,384,543. (b) Book value

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	3,494,054.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	3,494,054.
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		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	3,494,054.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Returr	1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	1	2,944,104.
	1	
1 Total expenses and losses per audited financial statements	1	
 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 	1	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a b Prior year adjustments 2b	1	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1 2 e	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities		
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2 e	2,944,104.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	2 e	2,944,104.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) 4 b Other (Describe in Part XIII.)	2e 3	2,944,104.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b	2e 3	2,944,104.
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) 4 b Other (Describe in Part XIII.)	2e 3	2,944,104.

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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2021

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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

2021

Open to Public Inspection

Name of the organization 74-1587880 Houston Arboretum & Nature Center **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. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key Yes X No **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 1 2 3 5 6 7 9 10 Total. 0. 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 G (Form 990) 2021 Houston Arboretum & Nature Center 74-1587880 Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (a) Event #1 **(b)** Event #2 (c) Other events (add column (a) Arbor Cup None Alfresco Gala through column (c) (event type) (event type) (total number) Revenue **1** Gross receipts..... 382,013. 99,401. 481,414. 2 Less: Contributions..... **3** Gross income (line 1 minus line 2)..... 382,013. 99,401. 481,414. Direct Expenses Rent/facility costs..... 7 Food and beverages **9** Other direct expenses..... 77,316. 30,209. 107,525. 10 Direct expense summary. Add lines 4 through 9 in column (d)..... 107,525. Net income summary. Subtract line 10 from line 3, column (d)..... 373,889. Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming Revenue (add column (a) through column (c)) (a) Bingo bingo/progressive bingo (c) Other gaming Gross revenue..... Direct Expenses **2** Cash prizes..... 4 Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d)..... **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If 'No,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

b If 'Yes,' explain:

Sch	edule G (Form 990) 2021 Houston Arboretum & Nature Center	74-158	7880	Page 3
11	Does the organization conduct gaming activities with nonmembers?		. Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
	Indicate the percentage of gaming activity conducted in:	1 1		
	a The organization's facility.			%
	b An outside facility.			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	15:		
	Name ►			
	Address ►			
ļ	a Does the organization have a contract with a third party from whom the organization receives gaming reverb If 'Yes,' enter the amount of gaming revenue received by the organization and of gaming revenue retained by the third party c If 'Yes,' enter name and address of the third party:	nue? the amou	<u> </u>	No
	Name ►			
	Address ►			!
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	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
- 1	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i	n the	_	
D	organization's own exempt activities during the tax year • \$. l :	(iii) a = = 1 (5.4.
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, c and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.	ny addi	tional	v);

 BAA
 TEEA3703L
 07/12/21
 Schedule G (Form 990) 2021

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

Houston Arboretum & Nature Center

Part I Types of Property

Employer identification number
74-1587880

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash o	(d) d of determi contribution a	ning amounts
1	Art — Works of art						
2	Art — Historical treasures						
3	Art — Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities — Partnership, LLC, or trust interests .						
12	Securities – Miscellaneous						
13	Qualified conservation contribution — Historic structures						
14	Qualified conservation contribution — Other						
15	Real estate – Residential	Х	1	321,558.	Market	value	
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						
	Archeological artifacts						
25	Other► (<u>Equipment</u>)		1	29,938.	Market	value	
26	Other ()						
27	Other ► ()						
28	Other► ()						
29	Number of Forms 8283 received by the organization d organization completed Form 8283, Part V, Dones				29		
	organization completed form 6265, fact v, bones	Ackilowied	igement		23	Yes	No
					Г	103	110
30a	Oa During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used						
	for exempt purposes for the entire holding period?					30 a	Х
b	If 'Yes,' describe the arrangement in Part II.						23
	Does the organization have a gift acceptance police	cy that requi	ires the review of any r	nonstandard contributio	ns?	31	Х
	Does the organization hire or use third parties or i	related orga	nizations to solicit, prod	cess, or sell noncash		32 a	
h	contributions?					32 a	X
	If the organization didn't report an amount in coludescribe in Part II.	mn (c) for a	type of property for wh	nich column (a) is chec	ked,		

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

Schedule M (Form 990) 2021

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 11/4/21 Schedule M (Form 990) 2021

SCHEDULE 0 (Form 990)

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 Form 990-EZ.

► 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

Employer identification number Name of the organization 74-1587880 Houston Arboretum & Nature Center

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

The organization completes the Federal Form 990 and associated schedules internally by paid provider responsible for monthy compilation of financial reports. The return is reviewed and signed by officer of the organization prior to submission to the Internal Revenue Service.

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

The organization makes all governing documents, the Conflict of Interest policy and Finanacial Reports available through written request of the organization.

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

As a part of the budget process all salaries are reviewed by the Board of Director in total as well as the managers and Directors. The Executive Director's salary is specifically determined at this time using comparible information from other similarly sized charitable organizations in the Houston area.

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

No other documents available to the public.

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Conveyance of Assets to City		-1,470,415.
Loss on retirement of property		
Total	Ś	-1.470.415.

Part XI line 8: Prior year adjustments

Part XI line 8: Prior year adjustments and other decreases to net assets relates to Construction in progress that represents capitalized costs under the Master Plan. Under the terms of the agreement with the City of Houston, Master Plan and all future capital improvement projects will transfer to the City at end of the project. On December 10, 2020, the Arboretum transferred ownership of completed Master Plan assets to the City of Houston with a total net book value of \$4,202,406, which

Name of the organization

Houston Arboretum & Nature Center

Employer identification number
74-1587880

included renovation of the 11,000 square foot Nature Center. Accordingly, a loss on retirement of property and equipment has been recorded in the statements of activities for the year ended June 30, 2021.