## **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

Α	For the	e 2021 calend	dar year, or tax year beginning , 2021, and endir	ng	_	, 20			
В	Check if	f applicable:	C Name of organization Pease Park Conservancy		D Emplo	yer identification number			
	Address	s change	Doing business as			46-2388316			
П	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number				
	Initial re	turn	PO Box 50065			(512)777-1632			
$\overline{\sqcap}$	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code						
$\overline{\sqcap}$		ed return	Austin, TX, 78763		<b>G</b> Gross	receipts \$ 1,448,541			
$\overline{\sqcap}$		tion pending	F Name and address of principal officer: Heath Riddles	H(a) Is this a gr	oup return fo	r subordinates? Yes No			
	1-1		PO Box 50065, Austin, TX, 78763			es included? Yes No			
ī	Tax-exe	empt status:	<b>X</b> 501(c)(3)			st. See instructions.			
	Website	e: ► www.pe		H(c) Group e					
K		organization:			· ·	of legal domicile: Texas			
_	art I	Summa							
	1		cribe the organization's mission or most significant activities:						
Φ	'		k Conservancy works to restore, enhance and maintain Pease Park for the su	ıstainable use an	d eniovm	ent of all.			
Governance									
Ĕ	2	Chock this	box ▶ ☐ if the organization discontinued its operations or dispose	of more than	25% of	ite not accote			
ŏ	3		voting members of the governing body (Part VI, line 1a)	of filore triair.	3	25			
ر م	4		independent voting members of the governing body (Part VI, line 1).		4	25			
es 6	5		per of individuals employed in calendar year 2021 (Part V, line 2a)		5	17			
Ϋ́					6	900			
Activities &	6		per of volunteers (estimate if necessary)		-	0			
٩	7a		ated business revenue from Part VIII, column (C), line 12		7a	<del>-</del>			
_	b	ivet unreia	ted business taxable income from Form 990-T, Part I, line 17	Prior Year	7b	0			
		0	and avents (Deat VIII line 4b)			Current Year			
ne	8		ons and grants (Part VIII, line 1h)	1,0	064,443	1,075,378			
Revenue	9	-	ervice revenue (Part VIII, line 2g)		0 107	0.012			
æ	10		t income (Part VIII, column (A), lines 3, 4, and 7d)		39,467	9,013			
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		148,928	231,549			
	12	-	nue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,2	252,838	1,315,940			
	13		d similar amounts paid (Part IX, column (A), lines 1–3)		0	0			
	14		aid to or for members (Part IX, column (A), line 4)		0	704.000			
es	15		ther compensation, employee benefits (Part IX, column (A), lines 5–10)		500,370	721,282			
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)			0			
ă	b		raising expenses (Part IX, column (D), line 25) ► 356,496						
ш	17	•	enses (Part IX, column (A), lines 11a-11d, 11f-24e)		054,211	3,848,899 4,570,181			
	18		nses. Add lines 13-17 (must equal Part IX, column (A), line 25) .						
	19	Revenue le	ess expenses. Subtract line 18 from line 12	-4,3	301,743	-3,254,241			
Net Assets or Fund Balances				Beginning of Curr		End of Year			
set	20		ts (Part X, line 16)		387,199	3,299,549			
A As	21		ties (Part X, line 26)		921,197	72,788			
			or fund balances. Subtract line 21 from line 20	6,4	166,002	3,226,761			
P	art II	Signatu	re Block						
			, I declare that I have examined this return, including accompanying schedules and sta			my knowledge and belief, it is			
tru	e, correc	et, and complet	e. Declaration of preparer (other than officer) is based on all information of which prepar	rer nas any knowled	age.				
Si		Signati	ure of officer	Date					
He	ere	<b>                                     </b>							
		Type o	or print name and title						
Pa	hid	Print/Type	e preparer's name Preparer's signature I	Date	Check [				
	epare	Sean Be	nder		self-emp	P01768418			
	e On		me ► MONTEMAYOR BRITTON BENDER PC	Firm's	s EIN ▶	74-2902112			
		Firm's add	dress ► 2110 B Boca Raton Suite B 102 Austin TX 78747	Phone	e no.	(512) 442-0380			
Ма	y the II	RS discuss	this return with the preparer shown above? See instructions			. 🛛 Yes 🗌 No			

4d Other program services (Describe on Schedule O.)
(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4e Total program service expenses ▶ 4,004,017

Form 990 (2021)

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Form 99	0 (2021)		1	Page
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
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		×
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		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, as applicable.	10		,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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>	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 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		×
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		×
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		×
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		×
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	×	
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		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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 . . . . .

20b

Part	Checklist of Required Schedules (Continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
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			
24a	employees? If "Yes," complete Schedule J	23		×
<b>2</b> -10	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
h	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		×
c	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>			
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	26		×
00	persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	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		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
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		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
Part		- 50		
	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   10		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		×
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	-		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	<b>Note:</b> 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			
_	the organization is licensed to issue qualified health plans			
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 70		
	excess parachute payment(s) during the year?	15		×
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		×
	If "Yes," complete Form 4720, Schedule O.			
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			

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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. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year. . . 1a 25 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. 1b Enter the number of voting members included on line 1a, above, who are independent ... 25 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with . . . . . . . . . . . . . . . . . . . any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 x X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 X 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? . . . . . . . . . . . . . . . . X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . . . . . . . X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: The governing body? . . . . . . . . . . . . . . 8a × 8b the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 13 Did the organization have a written document retention and destruction policy? x 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official . . . 15a 15b 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 16a 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ 18 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. ▼ Own website ☐ Another's website ▼ 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, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records PO Box 50065, Austin, TX, 78763 Heath Riddles

Form 990 (202 <sup>-</sup>	1)		Page
Part VII	Compensation of Officers, Director	rs, Trustees, Key Employees,	, Highest Compensated Employees, and
	Indopendent Contractors		

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . .

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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.

☐ Check this box if neither the organization nor	any relate	d org	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	b office or director	ot ch unles	Pos eck s pe	more rson	e than of is both or/trust Highest compensated employee	an tee)	(D)  Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SEE Part VII ,Section A. Officers, Directors, Trust	ŕ	Φ	tee			sated				
(2)										
(3)										
(4)	O									
(5)										
(6)		_								
(7)										
(8)										
(9)										
<u>(10)</u>										
(11)		-								
(12)										
<u>(13)</u>										
(14)										

Part \	Section A. Officers, Directors, 7	rustees,	Key l	Em	plo	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (d	contin	ued)
					(4	C)								
	(A)	(B)	(.1.			sition			(D)	(E)	)	(F)		
	Name and title	Average	,				e than d i is both		Reportable	Report	able		ted am	ount
		hours	office	er an			tor/trust		compensation from the	compen		_	f other	
		per week (list any	Individual trustee or director	ns	유	₹ e	em Hig	Fo	organization (W-2/	from re organizatio			pensation	וזכ
		hours for	livid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/	1099-M	IISC/		ization a	
		related organizations	ctor	ion		l plc	t co		1099-NEC)	1099-1	NEC)	related of	organiza	ations
		below	trus	al tra		yee	mpe							
		dotted line)	tee	ste			esne							
				Φ			ted							
(15)														
(16)														
(17)														
(18)														
(19)														
(20)								'	XV					
(21)							4							
(22)														
(23)			-		• 1		ו							
(0.4)							1							
(24)														
(OE)			V		P									
(25)			X											
1b :	Subtotal					ļ			107.000		0		1,	5,006
	Total from continuation sheets to Part	VII Section	 n A	•	•	•			107,000		0		- 1	,,000
	Fotal (add lines 1b and 1c)	VII, OCCIO	''' A	•	•	•		•	107,000		0		1!	5,006
	Total number of individuals (including but	not limited	to th	nose	· e list	ted	above	<u>=) w</u>	,	e than \$1	-	of		,,,,,,,
	reportable compensation from the organi				-			,		•	,			
		<u> </u>											Yes	No
3	Did the organization list any former o	officer, dire	ector.	tru	ste	e. k	kev e	lam	lovee, or highes	t compe	ensated			
	employee on line 1a? If "Yes," complete s											3		×
4	For any individual listed on line 1a, is the	sum of re	portal	ble	con	npe	nsatio	n a	and other comper	nsation fr	om the			
	organization and related organizations													
i	ndividual											4		×
5 I	Did any person listed on line 1a receive o	r accrue co	ompe	nsa	tion	fro	m any	un un	related organizat	ion or inc	dividual			
1	or services rendered to the organization	? If "Yes," c	compl	lete	Sch	hedi	ule J f	or s	such person .			5		×
Sectio	n B. Independent Contractors													
	Complete this table for your five high	est comp	ensat	ed	inde	epe	ndent	CC	ontractors that r	eceived	more t	:han \$	100,00	00 of
(	compensation from the organization. Rep	ort compen	satio	n fo	r the	e ca	lenda	r ye	ear ending with or	within th	e organ	ization'	s tax	year.
	(A)								(B)			(C)		
	Name and business add	ress							Description of serv	ices	(	Compens	ation	
Ten Eye	k Landscape Architects 1214 W Sixth Street S	Suite 100, Au	ıstin, T	X, 7	870	3		Pro	oject Design				10	4,184
Harvey	Cleary Builders 9020 N Capital of TX Hwy 2 S	te 300, Austi	n, TX,	787	'59			Pro	oject Construction				3,25	7,372

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization ▶

		Check if Schedule O contains a respon	nse or note to an	y line in this Pa	rt VIII		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a	19,047				
Grants	b	Membership dues 1b					
	С	Fundraising events 1c	60,406				
fts,	d	Related organizations 1d					
Contributions, Gifts, Grants, and Other Similar Amounts	е	Government grants (contributions) 1e	355,154				
	f	All other contributions, gifts, grants,					
		and similar amounts not included above 1f	640,771				
	g	Noncash contributions included in					
ig g		lines 1a-1f 1g	\$				
ज ह	h	Total. Add lines 1a-1f	🕨	1,075,378			
_			Business Code				
Program Service Revenue	2a						
e S	b						
en S	С						
gram Ser Revenue	d						
go.	е						
₫	f	All other program service revenue					
	<u>g</u>	Total. Add lines 2a–2f		0			
	3	Investment income (including dividend other similar amounts)		- 0.013			0.012
	4	Income from investment of tax-exempt be		9,013			9,013
	5	Royalties					
	3	(i) Real	(ii) Personal				
	6a	Gross rents <b>6a</b> 36,671	<u> </u>				
	b	Less: rental expenses 6b					
	c	Rental income or (loss) <b>6c</b> 36,671	0				
	d	Net rental income or (loss)		36,671			36,671
	7a	Gross amount from (i) Securities	(ii) Other	, .			
		sales of assets					
		other than inventory 7a					
<u>o</u>	b	Less: cost or other basis					
Sevenue		and sales expenses . 7b					
ě	С	Gain or (loss) 7c	0				
	d	Net gain or (loss)	🕨	0			
Other	8a	Gross income from fundraising					
0		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 <b>8a</b>	327,479				
	b	Less: direct expenses 8b	132,601				
	С	Net income or (loss) from fundraising even	ents ▶	194,878			194,878
	9a	Gross income from gaming activities. See Part IV, line 19 . ga					
		Less: direct expenses <u>9b</u> Net income or (loss) from gaming activiti		0			
		Gross sales of inventory, less	es ▶	U			
	iva	returns and allowances 10a					
	h	Less: cost of goods sold 10b					
	b	Net income or (loss) from sales of invent		0			
<u></u>		The modifie of (1000) from Sales of invent	Business Code	0			
Miscellaneous Revenue	11a						
scellaneo Revenue	b						
ele ¥e	c						
isc R	d	All other revenue					
Σ	е	<b>Total.</b> Add lines 11a-11d	•	0			
	12	Total revenue. See instructions	<b>•</b>	1.315.940	0	0	240.562

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## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (C) Management and general expenses (D) Fundraising expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses 8b. 9b. and 10b of Part VIII. Grants and other assistance to domestic organizations

## Part X Balance Sheet Check if Schedule O contain

	art X	Check if Schedule O contains a response or note to any line in this Pal	rt X		🗆
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	368,733	1	309,611
	2	Savings and temporary cash investments	5,912,968	2	2,571,982
	3	Pledges and grants receivable, net	1,097,856	3	370,111
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		6	
Ø	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	3,343	9	18,048
	10a	Land, buildings, and equipment: cost or other	-,		
		basis. Complete Part VI of Schedule D   10a   47,919			
	b	Less: accumulated depreciation	4,299	10c	29,797
	11	Investments—publicly traded securities	1,200	11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11	. (/)	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,387,199	16	3,299,549
	17	Accounts payable and accrued expenses	854,097	17	72,788
	18	Grants payable	004,001	18	72,700
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<b>,</b>	22	Loans and other payables to any current or former officer, director,		21	
Ë	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
₩		controlled entity or family member of any of these persons		22	
Liabilities	00			23	
_	23 24		67,100	24	
	2 <del>4</del> 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third	07,100	24	
	23	parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26		921,197	26	72,788
	20	Total liabilities. Add lines 17 through 25	921,197	20	12,100
ĕ		and complete lines 27, 28, 32, and 33.			
aŭ	07	And the state of t	843,837	27	2,576,005
Bal	27	h in the second of the second			
둳	28	Net assets with donor restrictions	5,622,165	28	650,756
ΞĒ		and complete lines 29 through 33.			
Net Assets or Fund Balances	20	-		20	
ţ	29	Capital stock or trust principal, or current funds		29 30	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund			
¥	31	Retained earnings, endowment, accumulated income, or other funds	0.400.000	31	0.000.704
let	32	Total net assets or fund balances	6,466,002	32	3,226,761
_	33	Total liabilities and net assets/fund balances	7,387,199	33	3,299,549

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Part	XI Reconciliation of Net Assets		•	
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		1,315	5,940
2	Total expenses (must equal Part IX, column (A), line 25)		4,570	0,181
3	Revenue less expenses. Subtract line 2 from line 1		-3,254	4,241
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		6,466	6,002
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities		15	5,000
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		3,226	6,761
Part	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 Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	×	
	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:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	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?	2c	×	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
_	Schedule O.			
За	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?	3a		×
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.	3b		

Form **990** (2021)