	1422.465	1			OMB No. 1545-0047
Form	99	0	Return of Organization Exempt From Income Tax		2019
(Rev. J	anuary	2020)	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private fo	indations)	Open to Public
Departn	nent of th	he Treasury	Do not enter social security numbers on this form as it may be made public.		Inspection
		e Service	► Go to www.irs.gov/Form990 for instructions and the latest information.	0.9	31 , 20 20
-			ear, or tax year beginning 09-01 , 2019, and ending	-	or identification number
		pplicable:	C Name of organization PRIDE HOUSTON INC	- 2.2	76-0360374
	idress ci		Doing business as		
	ame chai	nge	Number and street (or PO, box if mail is not delivered to street address) Room/suite	E Telephor	ne number
	tial retur		PO BOX 541713	0.0000	
		n/terminated	City or town, state or province, country, and ZIP or foreign postal code	G Gross re	226,510
	mended		HOUSTON, TX 77254-1713	s	
LI A	oplication	n pending		is a group return for :	
		<b>v</b>		all subordinates	
		ot status: X 50			(see instructions)
	ebsite:		And	oup exemption n	
Par		ganization: X Co Summary	rporation Trust Association Other L Year of formation: 1991	A State of legal	domicile: <b>TX</b>
I ai	-				LCAME AND
		-	the organization's mission or most significant activities: PRIDE HOUSTON WILL SUP		
JCe		and the second se	E LGBTQIA+ COMMUNITY IN ORDER TO COMMENMORATE OUR HISTORY AND	AND AND A VIEW AND AND AND	
nar		and the second second second	T AND FUTURE GENERATIONS BY PRODUCING PRIDE EVENTS THAT REPR	ESENT OU	R DIVERSE
Activities & Governance	2	COMMUNITY.	If the approximation discontinued its approximations or discound of ware then 250/ of its part app	ata	
Go	10000		▶ if the organization discontinued its operations or disposed of more than 25% of its net as:	1 100	
00	202		g members of the governing body (Part VI, line 1a)	122	6
ties	4		bendent voting members of the governing body (Part VI, line 1b)	4	6
tivi	6		individuals employed in calendar year 2019 (Part V, line 2a)		1
Ac	1000		volunteers (estimate if necessary)		50
			business revenue from Part VIII, column (C), line 12	· · 7a	0
	d	Net unrelated bi	Jsiness taxable income from Form 990-T, line 39		0
	8	Cantributions	Prior Y	STATE CONDUCTOR	Current Year
e	10.500			11,683	101,062
nuə	9			17,244	125,436
Revenue	10		me (Part VIII, column (A), lines 3, 4, and 7d)	22	12
Ĕ	11 12	and the second second second second	Inue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         · · · · · · · · · · · · · · · · · · ·		
	12				226,510
	14		lar amounts paid (Part IX, column (A), lines 1-3)	9,500	5,000
	15		or for members (Part IX, column (A), line 4)		0
Se			compensation, employee benefits (Part IX, column (A), lines 5-10)		67,484
Expenses				-	9,593
dx	17			04 704	050 476
ш	18			84,794	259,476
	19		xpenses. Subtract line 18 from line 12	94,294	341,553
- S		1010100 1033 0		34,655	(115,043) End of Year
Net Assets or Fund Balances	20	Total assets (Pa	nt X, line 16)	65,879	218,620
Bal	21			55,985	23,769
und A	22			09,894	194,851
Par		Signature		09,094	194,001
			that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and	oelief it is	
			tion of preparer (other than officer) is based on all information of which preparer has any knowledge.	vener, it is	
		- Valla			
Sigr	1			Date	
100					
Here	•				
		Print/Type prepar	er's name Preparer's signature Date / Chu	eck X if P	TIN
Paid			1. 100 - 110 - 110/201	eck A if	P00540765
	arer	Teresa Co	When the contract of the second		100340703
	Only		Coleman Tax Service LLC Firm's EIN PO Box 18013 Phone no.		
036	Unity	Firm's address			
Mart	he IPC	discuss this rat	Houston TX 77206-8013		· · · X Yes No
iviay t	ine inco	uiscuss this ret	urn with the preparer shown above? (see instructions)		

Form	n 990 (2019) pride houston inc 76-0360374 F	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	PRIDE HOUSTON WILL SUPPORT, EDUCATE AND PROMOTE THE LGBTQIA+ COMMUNITY IN ORDER TO COMMENMOR	
	OUR HISTORY AND ADVOCATE OUR RIGHTS FOR CURRENT AND FUTURE GENERATIONS BY PRODUCING PRIDE EV	'ENTS
	THAT REPRESENT OUR DIVERSE COMMUNITY.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	)
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$249,702 including grants of \$5,000 ) (Revenue \$125,436         PRIDE HOUSTON FACILITATES THE HOUSTON GAY PRIDE FESTIVAL AND PARADE THAT COMMEMORATES THE 19	- '
	STONEWALL RIOTS IN NEW YORK CITY. JUNE 2020 PARADE & FESTIVAL AND PARADE PLANNED, BUT CANCELLED DU	
	COVID. FIFTY VOLUNTEERS WERE INVOLVED IN THE PLANNING STAGES.	<u>/E 10</u>
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	_)
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	<u> </u>
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	.)
	Other program cap (Describe on Schedule $\Omega$ )	
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses     249,702	
EEA	Form 990	(2019)

	n 990 (2019) PRIDE HOUSTON INC 76-0360	374	F	Page 3
Pa	Int IV Checklist of Required Schedules			1
			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	-	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2	x	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	. 3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	. 4		х
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,	_		
-	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	. 5		
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			
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	. 9		x
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		. 10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
c	complete Schedule D, Part VI.	. 11a	x	
ŀ	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	. 11a		
L	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	. 11b		x
	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			^
Ľ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	. 11c		x
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
Ľ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	. 11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	-		x
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	. 11f		x
12a				
	Schedule D, Parts XI and XII	. 12a		x
b				
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	. 12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.			x
14a	Did the organization maintain an office, employees, or agents outside of the United States?			x
b				
	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		x
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		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	. 19		x
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	. 20a		х
k	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		x

Form	990 (2019) PRIDE HOUSTON INC	76-03603	74	Р	age <b>4</b>
Pa	rt 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? If "Yes," complete Schedule J		23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	through 24d and complete Schedule K. If "No," go to line 25a		24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				
	to defease any tax-exempt bonds?		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	••••	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		05-		
	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?		25h		
26	If "Yes," complete Schedule L, Part L	••••	25b		х
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 or any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		26		v
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	• • • • • •	20		х
21	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part				<u> </u>
20	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				
u	"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 lines 28a or 28b? If				
•	"Yes," complete Schedule L, Part IV.		28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M		30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.		31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II.		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		х
34	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
35a	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)? If "Yes," complete Schedule R, Part V, line 2		35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable				
	related organization? If "Yes," complete Schedule R, Part V, line 2		36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and				
_	19? Note: All Form 990 filers are required to complete Schedule O.		38	х	
Par					
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>			
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0	-		
b		0	-		
С	5 I) I 5 I I)				
	reportable gaming (gambling) winnings to prize winners?	<u></u>	1c	х	

Form	990 (2019) PRIDE HOUSTON INC 76-0360	374	P	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			r
_			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
ь	Statements, filed for the calendar year ending with or within the year covered by this return	-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		x	
20	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a ⊾	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		x
b 4a	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	30		
4a	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country	-+a		
D	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		x
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		x
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		x
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		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		x
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	4		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	42-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<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	-		
C 14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		v
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14a 14b		x
b 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
15	excess parachute payment(s) during the year?	15		x
	If "Yes," see instructions and file Form 4720, Schedule N.	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			Λ

Form	1 990 (2019) PRIDE HOUSTON INC 76-03603	574	P	age <b>6</b>
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	a "No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruction	s.		
	Check if Schedule O contains a response or note to any line in this Part VI			. x
Sec	tion 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			
	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 in line 1a, above, who are independent 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
-	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		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	*	x
6	Did the organization have members or stockholders?	6		x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			л
1a	one or more members of the governing body?	7a		v
h		10		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	76		
•	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:	0.		
a	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
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		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
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	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13		х
14	Did the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	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			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed			
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
10				
	<ul> <li>(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.</li> <li>Own website</li> <li>Another's website</li> <li>Upon request</li> <li>Other (explain on Schedule O)</li> </ul>			
	X Own website Another's website X Upon request Other (explain on Schedule O)			

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

►

Form 990 (20	19) PRIDE HOUSTON INC	76-0360374	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest	Compensated Employee	s, and
	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete	this table for all persons required to be listed. Report compensation for the calendar year ending with	ith or within the	

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

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

organization's tax year.

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

				(C)			
(A)	(B)			sition	(D)	(E)	(F)
Name and title	Average			nore than one	Reportable	Reportable	Estimated amount
	hours			rson is both an rector/trustee)	compensation	compensation	of other
	per week				from the	from related	compensation
	(list any	약 교	<u>1</u> 0		organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	hours for	Individual trustee or director	Officer Institutional trustee	Former Highest compensated employee Key employee	(10-2/1099-10150)		related organizations
	related organizations	ual t ctor	iona	r yee nplo			
	below	ruste	tru	yee			
	dotted line)	e	stee	nsat			
				ed	· ·		
(1) RADU BARBUCEANU	15.00						
MEMBER AT LARGE 2019-2020		x			0	o	o
(2) KENDRA WALKER	15.00				•	v	
VP, SECRETARY, TREASURER 2020-21		x	x		0	o	o
(3) TATIANA HOLLAND	15.00						
MEMBER AT LARGE 2019-2020		x			0	0	0
(4) HUONG TRUONG	15.00						
MEMBER AT LARGE 2020-2021		X			0	0	0
(5) JOSHUA ALLBRIGHT	15.00						
MEMBER AT LARGE 2020-2021		X			0	0	0
(6) JASMINE YOUNG	15.00						
MEMBER AT LARGE 2020-2021		X			0	0	0
(7) LORIN MOTON-ROBERTS	30.00						
PRESIDENT 2019-2020			X		61,610	0	1,120
(8) JACOB SIEGEL	15.00						
TREASURER 2019-20			X		0	0	0
(9) THASIA MADISON	15.00						
SECRETARY 2019-2020 PRESIDENT 20-21			X		0	0	0
<u>(10)</u>							
<u>(11)</u>							
(10)							
<u>(12)</u>							
<u>(13)</u>							
(14)							
<u>''''</u>							
	1					I	<b>E 000</b> (0010)

	990 (2019) PRIDE HOUSTON INC									76-	-036037	4	Page 8
Part	VII Section A. Officers, Directors, Trustee	es, Key Emp	oloyee	s, an	nd H	igh	est Co	omp	ensated Employe	es (continue	əd)		
	(A) Name and title	(B) Average hours per week	box,	unles	Pos eck m is per	son i	han one s both ar /trustee)	n	(D) Reportable compensation from the organization	(E) Reportabl compensati from relate organizatio	on d	<b>(F)</b> Estimated of ot compen from t	amount her sation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MI	SC)	organizati elated orga	on and
(15)													
(16)													
(17)													
<u>(18)</u>													
<u>(19)</u>													
(20)													
(21)													
(22)													
(23)		+											
(24)													
(25)													
1b c	Subtotal	 ion A	•••		•••	•••	•••	• •					
d	Total (add lines 1b and 1c)					•••	· · ·	•	0		0		0
2	Total number of individuals (including but not limit reportable compensation from the organization	ed to those l						d mo	ore than \$100,000	of		Ye	c s No
3	Did the organization list any <b>former</b> officer, direc employee on line 1a? <i>If</i> "Yes," <i>complete Schedu</i>		-				-					3	x
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater th	eportable co	mpensa	ation	and	oth	er con	npen	sation from the				
5	individual			-			-					4	x
Sect	for services rendered to the organization? If "Yes ion B. Independent Contractors	s," complete	Schea	uie J	I TOP	suc	n pers	son			•••	5	x
1	Complete this table for your five highest compensa												
	compensation from the organization. Report comp (A)	ensation for	the cal	enda	ar ye	ar e	ending	with	or within the organ (B)	nization's tax	year.	(C)	
	Name and business addres	SS							Description of service	ces	Con	npensation	
2	Total number of independent contractors (includin	g but not lim	ited to	those	e list	ted	above	) wh	0				

received more than \$100,000 of compensation from the organizatio	n 🕨
-------------------------------------------------------------------	-----

	00 (2019) PRIDE HOUSTON INC				76-03603	874 Page 9
Part V	VIII Statement of Revenue					
	Check if Schedule O contains a response or note	e to any line in this	A Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	b	Business Code 12900	101,062	125,436		
Progran Rev	e	d 	125,436			12
Other Revenue	6a       Gross rents       6a         b       Less: rental expenses       6b         c       Rental income or (loss)       6c         d       Net rental income or (loss)       6c         d       Net rental income or (loss)       6c         7a       Gross amount from sales of assets other than inventory       (i) Securities         7a       Gain or (loss)       7a         7b       7b       7c         d       Net gain or (loss)       7c         8a       Gross income from fundraising events (not including \$       1	(ii) Other				
	of contributions reported on line 1c). See Part IV, line 18	· · · · · · •				
Miscellanous Revenue	retums and allowances	Business Code				
Misce Rev	c		226,510	125,436	0	12

PRIDE HOUSTON INC **Statement of Functional Expenses** 

Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all c	columns. All other orga	nizations must comple	te column (A).	
	Check if Schedule O contains a response or note to	any line in this Part IX			
Do n	not include amounts reported on lines 6b, 7b,	(A) Total avpanses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
8b, 9	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	5,000	5,000		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	61,610	61,610		
8	Pension plan accruals and contributions (include	01,010	01,010		
5	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,120	1 120		
9 10			1,120		
		4,754	4,754		
11	Fees for services (nonemployees):				
a L					
b				4 010	
C J		4,210		4,210	
d		0.503			0 500
e	Professional fundraising services. See Part IV, line 17 .	9,593			9,593
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	59,382	59,382		
13	Office expenses	26,117	3,484	22,633	
14	Information technology	20,017	19,879	138	
15	Royalties				
16	Occupancy	15,560		15,560	
17	Travel	31,681		31,681	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,822		7,822	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	823	609	214	
23		3,335	3,335		
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.)				
а	EQUIPMENT RENTAL	13,046	13,046		
b	EVENT EXPENSES	77,483	77,483		
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	341,553	249,702	82,258	9,593
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				
	following SOP 98-2 (ASC 958-720)				

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			<u></u>
			(A)		(B)
	-		Beginning of year		End of year
	1	Cash - non-interest-bearing	109,529	1	2,092
	2	Savings and temporary cash investments	46,452	2	26,461
	3	Pledges and grants receivable, net	192,650	3	183,672
	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	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	300	8	300
As	9	Prepaid expenses and deferred charges	10,030	9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D         10a         16,249			
	b	Less: accumulated depreciation         10b         14,114	2,958	10c	2,135
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,960	15	3,960
	16	Total assets. Add lines 1 through 15 (must equal line 33)	365,879	16	218,620
	17	Accounts payable and accrued expenses	55,985	17	5,769
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liał		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	18,000
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	55,985	26	23,769
		Organizations that follow FASB ASC 958, check here			
ses		and complete lines 27, 28, 32, and 33.			
Net Assets or Fund Balances	27	Net assets without donor restrictions		27	
	28	Net assets with donor restrictions		28	
pur		Organizations that do not follow FASB ASC 958, check here			
Ę		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds		29	
sset	30	Paid-in or capital surplus, or land, building, or equipment fund		30	101 0=-
ťΑ	31	Retained earnings, endowment, accumulated income, or other funds	309,894	31	194,851
Ne	32	Total net assets or fund balances	309,894		194,851
	33	Total liabilities and net assets/fund balances	365,879	33	218,620

EEA

Form 990 (2019)

PRIDE HOUSTON INC

Form **990** (2019)

76-0360374

Page 11

Form	990 (2019) PRIDE HOUSTON INC	76-03603	74	<u> </u>	age <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		226,	510
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		341,	553
3	Revenue less expenses. Subtract line 2 from line 1	. 3	(	115,	043)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4		309,	894
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)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10		194,	851
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 🛛 🕱 Accrual 🗌 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		х
	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	L	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		. 3a	<u> </u>	x
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		
EEA			Form	<b>990</b> (2	2019)

## d Public Support on or a section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

		OULE A	Public Charity Status and Public Complete if the organization is a section 501(c)(3) organization or a section 4
•		0 or 990-EZ)	► Attach to Form 990 or Form 990-EZ.
		of the Treasury enue Service	► Go to www.irs.gov/Form990 for instructions and
		e organization	
		HOUSTON IN	
Par			for Public Charity Status (All organizations must complete
	-		private foundation because it is: (For lines 1 through 12, check only one box
1	П		
•		-	vention of churches, or association of churches described in section 170(b
2	Ц		ribed in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990 or 990-EZ
3		A hospital or a	cooperative hospital service organization described in section 170(b)(1)(
4		A medical rese	earch organization operated in conjunction with a hospital described in sec
		hospital's nam	e, city, and state:
5		An organizatio	n operated for the benefit of a college or university owned or operated by a
			)(1)(A)(iv). (Complete Part II.)
6	$\square$	•	e, or local government or governmental unit described in section 170(b)(1)
7	x		n that normally receives a substantial part of its support from a governmenta
	21	0	
			ection 170(b)(1)(A)(vi). (Complete Part II.)
8		A community f	rust described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II.)
9		An agricultura	I research organization described in section 170(b)(1)(A)(ix) operated in c
		or university o	r a non-land-grant college of agriculture (see instructions). Enter the name, c
		university:	
0	$\square$	An organizatio	n that normally receives: (1) more than 33 1/3% of its support from contribut
		•	activities related to its everyt functions, subject to estrain everytions, and (

2019 Open to Public Inspection

Employer identification number
76-0360374

PRI		HOUSION INC					70-030037	
Pa	rt I	Reason for Public Charity	<b>y Status</b> (All or	ganizations must co	omplete	this part	<ol> <li>See instructions</li> </ol>	•
The	orga	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check onl	y one box.	)		
1		A church, convention of churches, or	association of chu	irches described in sect	ion 170(b)	(1)(A)(i).		
2		A school described in section 170(b	)(1)(A)(ii). (Attach	Schedule E (Form 990 c	or 990-EZ).	.)		
3		A hospital or a cooperative hospital s			,	,		
4	П	A medical research organization ope	•				(1)(A)(iii) Enter the	
-		•		n with a hospital describ	eu in Seci			
-		hospital's name, city, and state:	<i>с. с</i> и					
5		An organization operated for the bene	-	iniversity owned or opera	ated by a g	jovernmen	tal unit described in	
	_	section 170(b)(1)(A)(iv). (Complete	Part II.)					
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)	(A)(v).		
7	х	An organization that normally receive	s a substantial part	of its support from a gov	/ernmental	unit or from	m the general public	
		described in section 170(b)(1)(A)(vi	). (Complete Part I	l.)				
8		A community trust described in secti	on 170(b)(1)(A)(vi	i). (Complete Part II.)				
9		An agricultural research organization			rated in co	niunction	with a land-grant colled	ne
•		or university or a non-land-grant colle						<b>j</b> 0
		university:	ge of agriculture (e			iy, and oldi		
40		•	a. (1) mara than 22	1/20/ of its support from	a a a a tributi	ana mamb	archip face, and gross	
10		An organization that normally receive						
		receipts from activities related to its e	•	•				
		support from gross investment income					rom businesses	
	_	acquired by the organization after Ju	ne 30, 1975. See <b>s</b>	section 509(a)(2). (Com	plete Part	III.)		
11		An organization organized and operation	ated exclusively to	test for public safety. Se	e <b>section</b>	509(a)(4).		
12		An organization organized and operat	ted exclusively for t	he benefit of, to perform	the functio	ns of, or to	carry out the purposes	6
		of one or more publicly supported or	ganizations describ	bed in section 509(a)(1)	or section	n 509(a)(2)	). See section 509(a)(	3).
		Check the box in lines 12a through 12	2d that describes th	e type of supporting orga	anization a	nd comple	te lines 12e, 12f, and 1	2g.
	а	<b>Type I.</b> A supporting organization						-
	u	the supported organization(s) the				-		'9
					ity of the c			
		supporting organization. You mu	-					
	b	<b>Type II.</b> A supporting organizatio				-		
		control or management of the sup			rsons that (	control or r	nanage the supported	
		organization(s). You must comp	olete Part IV, Sect	ions A and C.				
	С	Type III functionally integrated	. A supporting orga	anization operated in cor	nnection w	ith, and fu	nctionally integrated wi	th,
		its supported organization(s) (see	e instructions). You	u must complete Part I	V, Section	ns A, D, ar	nd E.	
	d	Type III non-functionally integr	ated. A supporting	organization operated i	n connecti	ion with its	supported organizatio	n(s)
		that is not functionally integrated.	The organization of	enerally must satisfy a d	istribution i	reauiremer	nt and an attentiveness	. ,
		requirement (see instructions). Y		• •				
	е	Check this box if the organization		•	•		Type II Type III	
	C	functionally integrated, or Type III	· · · · ·			sa rype i,	турсп, турсп	
				negrated supporting orga	anization.			
	f	Enter the number of supported organ		•••••	••••	••••		• • • •
	g	Provide the following information about	ut the supported or	ganization(s).	1			
	(i	) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	-	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))	listed in you docum	ir governing	support (see instructions)	other support (see instructions)
					Yes	No		
(A)								
(B)								

(C)

(D)

(E)

	dule A (Form 990 or 990-EZ) 2019 PRIDE HOU Int II Support Schedule for Organiza		bed in Secti	ons 170(b)(1	)(A)(iv) and	76-0360374 170(b)(1)(A)(v	
	(Complete only if you checked th	ne box on line	5, 7, or 8 of I	Part I or if the	organization	failed to qualif	y under
	Part III. If the organization fails to	o qualify unde	r the tests list	ted below, ple	ease complete	e Part III.)	
See	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)►	(a) 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	183,492	51,215	2,852	411,682	101,062	750,303
2	Tax revenues levied for the					_	
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	183,492	51,215	2,852	411,682	101,062	750,303
5	The portion of total contributions by						
•	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						173,429
6	Public support. Subtract line 5 from line 4						576,874
_	ction B. Total Support						5/0,0/4
_	endar year (or fiscal year beginning in) ►	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4		(b) 2010 51,215				
8	Gross income from interest, dividends,	183,492	51,215	2,852	411,004	101,062	750,303
0							
	payments received on securities loans,						
	rents, royalties and income from				·		10
•		12	12	12		12	48
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
	Total support. Add lines 7 through 10						750,351
	Gross receipts from related activities, etc. (s						
13	First five years. If the Form 990 is for the or						
_	organization, check this box and stop here		••••				· · · · ► 🗌
See	ction C. Computation of Public Support						
14	Public support percentage for 2019 (line 6, c		•	( ) )	ł	14	76.88 %
	Public support percentage from 2018 Sched					15	46.05 %
16a	33 1/3% support test - 2019. If the organization						
	box and stop here. The organization qualified						
k	33 1/3% support test - 2018. If the organization						
	this box and <b>stop here.</b> The organization qu						
17a	10%-facts-and-circumstances test - 2019.	If the organiza	tion did not ch	eck a box on lir	ne 13, 16a, or	16b, and line 14	is
	10% or more, and if the organization meets	the "facts-and-c	ircumstances"	test, check thi	is box and <b>sto</b>	<b>o here.</b> Explain i	n
	Part VI how the organization meets the "fact	s-and-circumsta	ances" test. Th	e organization	qualifies as a	publicly supporte	ed
	organization						🕨 🗌
k	0 10%-facts-and-circumstances test - 2018.	If the organiza	tion did not ch	eck a box on lir	ne 13, 16a, 16l	b, or 17a, and lir	ne
	15 is 10% or more, and if the organization m	-					
	Explain in Part VI how the organization meet					-	ly
	supported organization						-
18	Private foundation. If the organization did r						_
	instructions	<u></u>	••••••••••••••••••••••••••••••••••••••	<u></u>	<u> </u>	<u></u> .	<u></u> ► □
_							

Schedule A (Form 990 or 990-EZ) 2019

Sche	dule A (Form 990 or 990-EZ) 2019 <b>PRIDE HOU</b>	STON INC				76-03	360374 Page 3
	rt III Support Schedule for Organiz	ations Desc	ribed in Sec	tion 509(a)(2	)		0
	(Complete only if you checked the					to qualit	fy under Part II.
	If the organization fails to qualify						,
Sec	ction A. Public Support			<i>.</i>	I	/	
	endar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 201	9 (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						
Ŭ	unrelated trade or business under section 513.						
4	Tax revenues levied for the						
-	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
74	received from disqualified persons						
h	Amounts included on lines 2 and 3						
Ň	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
r	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
U	line 6.)						
Sec	ction B. Total Support						
	endar year (or fiscal year beginning in)►	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 201	9 (f) Total
9	Amounts from line 6	(a) 2010	(6) 2010	(0) 2017	(0) 2010	(6) 201	
-	Gross income from interest, dividends,						
104	payments received on securities loans, rents,						
	royalties, and income from similar sources						
h	Unrelated business taxable income (less		-				
D D	section 511 taxes) from businesses						
	acquired after June 30, 1975						
~	Add lines 10a and 10b						
	Net income from unrelated business						
••	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11,						
10	and 12.)						
14	<b>First five years.</b> If the Form 990 is for the or	anization's fir	st second thi	rd fourth or fift	th tax vear as a	section P	501(c)(3)
14	organization, check this box and <b>stop here</b>						
Sec	ction C. Computation of Public Suppor			· · · · · · · · ·	•••••		
	Public support percentage for 2019 (line 8, c			column (f))		15	%
	Public support percentage from 2018 Sched		•			16	%
_	ction D. Computation of Investment In						///
17	Investment income percentage for 2019 (line		-	ne 13. column	(f)).	17	%
18						18	%
-	<b>33 1/3% support tests - 2019.</b> If the organiz						
	17 is not more than 33 1/3%, check this box						
h	<b>33 1/3% support tests - 2018.</b> If the organiz	-	-	-			-
~	line 18 is not more than 33 1/3%, check this						
20	<b>Private foundation.</b> If the organization did n	-	-	-			-

Part				
	(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete			
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, co	•	Э	
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete F	art V.)		
ecti	on A. All Supporting Organizations			
_			Yes	N
	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported	2		
	organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2		
	(b) and (c) below.	3a		
	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	Ja		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the			
	organization made the determination.	3b		
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	50		
	purposes? If "Yes," explain in <b>Part VI</b> what controls the organizations was used exclusively for section 170(0)(2)(D)	3c		
	Was any supported organization not organized in the United States ("foreign supported organization")? If			
-	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
	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		
а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
	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		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	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? If "Yes," provide detail in <b>Part VI.</b>	6		
	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 "Yea" complete Bart L of Schedule L (Form 000 or 000 FZ)	7		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	1		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
	Was the organization controlled directly or indirectly at any time during the tax year by one or more	0		
	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 <b>Part VI</b> .	9a		
	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	Uu		
	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
	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.)	10b		

Sche	dule A (Form 990 or 990-EZ) 2019         PRIDE         HOUSTON         INC         76-0360374	Ł	F	Page 5
Pa	art IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
2	organization operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
500	ction C. Type II Supporting Organizations	<u> </u>		
000			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	
'	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
800	ction D. All Type III Supporting Organizations		<u> </u>	L
Jei	stion b. An Type in Supporting Organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	4		
~	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	-	
2	<b>j j i</b>			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
~	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	· · · · · · · · · · · · · · · · · · ·			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		-	
	supported organizations played in this regard.	3		
	ction E. Type III Functionally Integrated Supporting Organizations			
1		nstruc	tions	).
a				
	<b>b</b> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	, .		
C		(see ii		1 (
2			Yes	No
a				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			

- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the
- reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2a

2b

3a

Schedule A (Form 990 or 990-EZ) 2019 PRIDE HOUSTON INC		76-036	50374 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (			
1 🗌 Check here if the organization satisfied the Integral Part Test as a qualifying	-		-
instructions. All other Type III non-functionally integrated supporting orga	anizations	must complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount	t,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functiona	ally integra	ated Type III supporting	g organization (see
instructions).			

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Schedule A (Form 990 or 990-EZ) 2019

Schedu Par	A (Form 990 or 990-EZ) 2019 PRIDE HOUSTON INC	) Supporting Organi	76-036	0374 Page 7		
	Part V         Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)           Section D - Distributions         Current Year					
1	Amounts paid to supported organizations to accomplish exem	· · · ·				
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported				
	organizations, in excess of income from activity	· · · · · ·				
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizati	ions			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in <b>Part VI</b> ). See instructions.					
7	Total annual distributions. Add lines 1 through 6.		•			
8	Distributions to attentive supported organizations to which the	e organization is respons	live			
	(provide details in <b>Part VI</b> ). See instructions.					
9	Distributable amount for 2019 from Section C, line 6					
10	Line 8 amount divided by line 9 amount		(!!)	(!!!)		
	Postion C. Distribution Allocations (assingtructions)	(i)	(ii) Underdistributions	(iii) Diatributable		
3	ection E - Distribution Allocations (see instructions)	Excess Distributions		Distributable		
	Distributable array of the 0040 from Oration Or line O		Pre-2019	Amount for 2019		
	Distributable amount for 2019 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2019					
	(reasonable cause required - explain in <b>Part VI</b> ). See					
	instructions.					
	Excess distributions carryover, if any, to 2019					
	From 2014					
	From 2015					
	From 2016					
	From 2017					
	From 2018					
	Total of lines 3a through e					
	Applied to underdistributions of prior years					
	Applied to 2019 distributable amount					
<u> </u>	Carryover from 2014 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2019 from					
	Section D, line 7: \$					
	Applied to underdistributions of prior years					
-	Applied to 2019 distributable amount					
	Remainder. Subtract lines 4a and 4b from 4.					
Э	Remaining underdistributions for years prior to 2019, if					
	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.					
6						
O	Remaining underdistributions for 2019. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
7	Part VI. See instructions.					
7	Excess distributions carryover to 2020. Add lines 3j					
0	and 4c. Breakdown of line 7:					
	Evenes from 2015					
	Excess from 2015					
	Excess from 2016					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019		_ · · ·			
EEA			Sched	ule A (Form 990 or 990-EZ) 2019		

Schedule A (For	m 990 or 990-EZ) 2019 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D	Supplemen	tal Financial Statements		OMB No. 1545-0047
(Form 990)	<ul> <li>Complete if the organization answered "Yes" on Form 990,</li> </ul>		2019	
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			2013	
		Attach to Form 990.		Open to Public
Internal Revenue Service	► Go to www.irs.gov/Forms	990 for instructions and the latest inform	ation.	Inspection
Name of the organization Employer identificat				n number
PRIDE HOUSTON IN	1C		76-036037	4
Part I Organiza	tions Maintaining Donor Advised Fu	Inds or Other Similar Funds or Acco	ounts.	
Complete	e if the organization answered "Yes" on	Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) Funds a	and other accounts
1 Total number at er	nd of year			
2 Aggregate value of	of contributions to (during year)			
3 Aggregate value of	of grants from (during year)			
4 Aggregate value a	atend of year			
5 Did the organization	on inform all donors and donor advisors in w	riting that the assets held in donor advised		
funds are the orga	anization's property, subject to the organizati	on's exclusive legal control?		. 🗌 Yes 🗌 No
6 Did the organization	on inform all grantees, donors, and donor ad	visors in writing that grant funds can be used	Ł	
only for charitable	purposes and not for the benefit of the dono	r or donor advisor, or for any other purpose		
conferring imperm	issible private benefit?			. 🗌 Yes 🗌 No
Part II Conser	vation Easements.			
Complet	e if the organization answered "Yes" o	n Form 990, Part IV, line 7.		
1 Purpose(s) of con	servation easements held by the organizatio	n (check all that apply).		
Preservation of the second	of land for public use (e.g., recreation or edu	cation) Preservation c	of a historically impor	tant land area
Protection of r	natural habitat	Preservation c	of a certified historic s	structure
Preservation of	of open space			
2 Complete lines 2a t	hrough 2d if the organization held a qualified	conservation contribution in the form of a c	onservation	
easement on the la	ast day of the tax year.		Held at	the End of the Tax Year
a Total number of co	a Total number of conservation easements			
b Total acreage restricted by conservation easements				
c Number of conser	vation easements on a certified historic strue	cture included in (a)	2c	
d Number of conser	vation easements included in (c) acquired a	fter 7/25/06, and not on a		
historic structure lis	sted in the National Register		2d	
3 Number of conser	vation easements modified, transferred, rele	ased, extinguished, or terminated by the org	ganization during the	
tax year ►				
4 Number of states	where property subject to conservation ease	ement is located		
5 Does the organiza	tion have a written policy regarding the period	odic monitoring, inspection, handling of		
violations, and enf	orcement of the conservation easements it h	olds?		. 🗌 Yes 🗌 No
6 Staff and voluntee	r hours devoted to monitoring, inspecting, ha	ndling of violations, and enforcing conservation	tion easements durin	g the year
▶				
7 Amount of expens	es incurred in monitoring, inspecting, handlir	ng of violations, and enforcing conservation	easements during the	e year
►\$				
8 Does each conser	rvation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(	4)(B)(i)	
and section 170(h	)(4)(B)(ii)?			. 🗌 Yes 🗌 No
	be how the organization reports conservation	•		
balance sheet, and	d include, if applicable, the text of the footnot	e to the organization's financial statements t	hat describes the	
	ounting for conservation easements.			
	izations Maintaining Collections		Other Similar A	ssets.
Comple	te if the organization answered "Yes" o	on Form 990, Part IV, line 8.		
1a If the organization	elected, as permitted under FASB ASC 958	s, not to report in its revenue statement and l	balance sheet works	
of art, historical tre	easures, or other similar assets held for publi	c exhibition, education, or research in furthe	rance of public	
service, provide, ir	n Part XIII the text of the footnote to its finan	cial statements that describes these items.		
<b>b</b> If the organization	elected, as permitted under FASB ASC 958	, to report in its revenue statement and bala	nce sheet works of	
art, historical treas	sures, or other similar assets held for public e	exhibition, education, or research in furthera	nce of public service	,
provide the followi	ng amounts relating to these items:			
(i) Revenue inclu	Ided on Form 990, Part VIII, line 1		· · · · · ▶ \$_	
(ii) Assets include	ed in Form 990, Part X		· · · · · ▶ \$	

2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:
а	Revenue included on Form 990, Part VIII, line 1 ▶ \$
b	Assets included in Form 990, Part X S

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	Ile D (Form 990) 2019 PRIDE HOUSTON INC		· · · -		60374	Page 2
Pa	t III Organizations Maintaining Col				Assets (c	continued)
3	Using the organization's acquisition, accession, and	d other records, check any	of the following that ma	ake significant use of its		
	collection items (check all that apply):					
а	Public exhibition	d [	Loan or exchange	programs		
b	Scholarly research	e	Other			
с	Preservation for future generations					
4	Provide a description of the organization's collectio	ons and explain how they fu	urther the organization's	s exempt purpose in Par	t	
-	XIII.				-	
5	During the year, did the organization solicit or receiv	ve donations of art historic	sal treasures or other s	imilar		
3					🗌 Ye	es 🗌 No
Da	assets to be sold to raise funds rather than to be m		ganizations collection:	• • • • • • • • • • • • •	· · [] [6	
Γd	<b>t IV</b> Escrow and Custodial Arrange					
	Complete if the organization answ	vered "Yes" on Form	990, Part IV, line	9, or reported an ai	nount on	Form
	990, Part X, line 21.					
1a	Is the organization an agent, trustee, custodian or o				_	_
					Ye	es 🗌 No
b	If "Yes," explain the arrangement in Part XIII and co	omplete the following table	:			
					Amount	
с	Beginning balance			. 1c		
d	Additions during the year			. 1d		
е	Distributions during the year					
f	Ending balance			. 1f		
2a	Did the organization include an amount on Form 99				□ V(	es 🗌 No
	If "Yes," explain the arrangement in Part XIII. Chec					
b Pa	t V Endowment Funds.		as been provided on Fa	att Allf	••••	<u>• 🗆</u>
Га		warad "Vaa" on Earm	000 Dort IV line	10		
	Complete if the organization answ					
		) Current year (b) Price	or year (c) Two year	s back (d) Three years ba	ck (e) Fou	ur years back
1a	Beginning of year balance					
b	Contributions					
С	Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the current year	ar end balance (line 1 , co	lumn (a)) held as:		I	
a	Board designated or quasi-endowment	%				
h	Permanent endowment  %					
0	Term endowment  %					
С		val 1000/				
0-	The percentages on lines 2a, 2b, and 2c should equ		. In add, and a day in internet	l fam tha		
3a	Are there endowment funds not in the possession	of the organization that are	e neid and administered	for the		<u>.</u>
	organization by:					Yes No
	., .	• • • • • • • • • • • •			<u>3a(i)</u>	
	.,				3a(ii)	)
b	If "Yes" on line 3a(ii), are the related organizations	listed as required on Sche	dule R?		3b	
4	Describe in Part XIII the intended uses of the organ	nization's endowment fund	ls.			
Pa	t VI Land, Buildings, and Equipmen	nt.				
	Complete if the organization answ	vered "Yes" on Form	990, Part IV, line	11a. See Form 990	), Part X, I	ine 10.
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Bo	ok value
		(investment)	(other)	depreciation		
1a	Land					
b	Buildings				1	
c	Leasehold improvements				+	
		4 250	11 000	1 / 1 / 1	+	2 1 2 5
d	Equipment	4,259	11,990	14,114	+	2,135
e Tata	Other		(D) //ma (0-)		+	
	. Add lines 1a through 1e. (Column (d) must equal	ı ⊢orm 990, Part X, colum	n (B), line 10c.)	· · · · · · · · · · •	<u> </u>	2,135
EEA					Schedule D	(Form 990) 201

Schedule	D (Form	990) 2019	
ochedule		330) 2013	

Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
	1	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.). . . . . . ►

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

#### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEPOSIT FOR LEASE	1,778
(2) DEPOSIT FOR KEYS	725
(3)BUSPENSE	
(4) THER RECEIVABLES	
(5AIRLINE TIX	1,457
(6) UNDEPOSITED FUNDS	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).	3,960

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 2	25.). ►

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. . . . .

Sched	ule D (Form 990) 2019 PRIDE HOUSTON INC	76-0360374	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	1 1	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Pa	rt XIII Supplemental Information.		

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2019 Open to Public Inspection

Employer identification number

76-0360374

### PRIDE HOUSTON INC

#### 01. Organizational document changes (Part VI, line 4)

CREATED AN EXECUTIVE DIRECTOR PAID POSITION. PRIMARY JOB TO OVERSEE PROGRAMS & STRATEGIC

PLANS OF ORGANIZATION. EXECUTIVE DIRECTOR ALSO HAS DIRECT AUTHORITY OVER PRODUCTION TEAM.

TERMS FOR THE OFFICE OF EXECUTIVE DIRECTOR, WHEN PAID, IS OUTLINED IN EMPLOYEE CONTRACT FOR

POSITION.

THE BOARD OF DIRECTORS MUST APPROVE ANY CONTRACT WITH A FINANCIAL LIABILITY.

A BYLAW MAY BE SUSPENDED IF ALL VOTING BOARD OF DIRECTORS VOTE IN THE AFFIRMATIVE.

AN OFFICER MAY SERVE 3 CONSECUTIVE TERMS ONLY IF THERE ARE NO OTHER CANDIDATES QUALIFIED

TO FILL THE POSITION.

A DIRECTOR IS AN EX-OFFICIO MEMBER OF ALL COMMITTEES THAT REPORT TO THEM ACCORDING TO

ORGANIZATION CHART AT THAT TIME.

A NEW BOARD OF DIRECTOR MEMBER MAY BE ON-BOARDED AT ANY TIME DURING THE YR TO FILL VACANCY

DUE TO RESIGNATION.

02. Form 990 governing body review (Part VI, line 11)

FORM 990 EMAILED TO ALL BOARD MEMBERS PRIOR TO RETURN BEING SIGNED.

#### 03. Conflict of interest policy compliance (Part VI, line 12c)

BOARD MEMBERS MUST SIGN CONFLICT OF INTEREST STATEMENT EACH YEAR DETAILING ANY POSSIBLE

CONFLICT.

Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization PRIDE HOUSTON INC	Employer identification number 76-0360374
04. CEO, executive director, top management comp (Part VI, line 15a)	
THE BOARD, ALL INDEPENDENT MEMBERS, DRAFTED A JOB DESCRIPTON, PERFORMED A S	SALARY ANALYSTS
REVIEWED THE APPLICANTS AND HIRED MID-YEAR HOUSTON PRIDE'S BOARD PRESIDENT	
CREATED EXECUTIVE DIRECTOR POSITION. THE BYLAWS WERE SUCH THAT IF SHE RESI	IGNED THE ROLE
OF PRESIDENT, IT COULD NOT BE FILLED UNTIL THE ANNUAL ELECTION CYCLE. THE H	BOARD UPDATED
THE BYLAWS EFFECTIVE THE ANNUAL ELECTION CYCLE SO THAT THE EXECUTIVE DIRECT	FOR WOULD NOT BE
A BOARD MEMBER GOING FORWARD.	
05. Governing documents, etc, available to public (Part VI, line 19)	
PRIDE HOUSTON BY LAWS ARE MADE AVAILABLE TO THE PUBLIC ALONG WITH THE INFOR	RMATION 990
RETURN.	
	·

Form	4562
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# **Depreciation and Amortization** (Including Information on Listed Property)

1 On		(Includin	g Information on	Listed Pr	operty)			2019	
Depar	Department of the Treasury Attach to your tax return.					Attachment			
Interna	Internal Revenue Service (99) Go to www.irs.gov/Form4562 for instructions and the latest information.				mation.	Sequence No.179			
Name(s) shown on return E			Business or	ss or activity to which this form relates				Identifying number	
PRI	PRIDE HOUSTON INC FORM 990 - 1							-0360374	
Pa	rt I Election	n To Expense Certain Pro	perty Under Sect	ion 179					
	Note: If	you have any listed property, o	complete Part V befo	ore you com	plete Part I.				
1	Maximum amount (	Maximum amount (see instructions)							
2	Total cost of sectio	Total cost of section 179 property placed in service (see instructions).							
3	Threshold cost of s	section 179 property before reduct	ion in limitation (see inst	ructions)			3		
4	Reduction in limitat	4							
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If married filing								
		structions			•		5		
6		(a) Description of property		ousiness use onl		cted cost			
								-	
								-	
7	Listed property. En	nter the amount from line 29	I	7				-	
8		of section 179 property. Add amou					8		
9		on. Enter the <b>smaller</b> of line 5 or line	( ).				9		
10		lowed deduction from line 13 of you					10		
11		imitation. Enter the smaller of busir					11		
12		nse deduction. Add lines 9 and 10, I	,				12		
13		lowed deduction to 2020. Add lines			13		12		
	,	or Part III below for listed property	•		13				
		Depreciation Allowance		iation (D	on't include l	isted propert	V SO	e instructions )	
14		on allowance for qualified property					ly. 00		
14		r. See instructions					14		
15		$\sim$ section 168(f)(1) election $\ldots$					14		
15							16		
16 Po		n (including ACRS)				• • • • • •	10	823	
Га			Section A		10115.				
17	MACRS deduction	ns for assets placed in service in ta					17		
18		to group any assets placed in service in ta					17		
10	asset accounts, ch				0				
		n B - Assets Placed in Service					ion S	vstom	
	00000	(b) Month and year	(c) Basis for depreciation					ystem	
	(a) Classification of p		(business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g)	Depreciation deduction	
19a	3-year property			-					
b	5-year property								
C	7-year property								
d	10-year property								
£	15-year property								
f	20-year property			05		C/I			
<u>g</u>	25-year property			25 yrs.	5454	S/L			
n	Residential rental			27.5 yrs.	MM	S/L			
<u> </u>	property			27.5 yrs.	MM	S/L			
i	Nonresidential real	I		39 yrs.	MM	S/L			
-	property				MM	S/L			
		C - Assets Placed in Service	During 2019 Tax Ye	ear Using t	he Alternativ		tion S	System	
20a	Class life					S/L			
b	12-year			12 yrs.		S/L			
C	30-year			30 yrs.	MM	S/L			
	40-year			40 yrs.	MM	S/L			
		ary (See instructions.)				I	1		
21						21			
22		ts from line 12, lines 14 through 1		,					
		opropriate lines of your return. Parti			structions	22		823	
23	For assets shown a	above and placed in service during	g the current year, enter	the					
	portion of the basis	s attributable to section 263A costs		2	2				

OMB No. 1545-0172