990

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

2020

OMB No. 1545-0047

Open to Public Inspection

For the 2020 calendar year, or tax year beginning . 2020, and ending 08-31 , 2021 09-01 Check if applicable C Name of organizationPRIDE HOUSTON INC D Employer identification number Address change Doing business as 76-0360374 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Initial return PO BOX 541713 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return HOUSTON, TX 77254-1713 116,248 Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes SAME AS C ABOVE H(b) Are all subordinates included? X 501(c)(3) 527 501(c) () 4 (insert no.) 4947(a)(1) or Tax-exempt status If "No," attach a list. See instructions Website: WWW.PRIDEHOUSTON.ORG H(c) Group exemption number X Corporation Trust Association Form of organization: L Year of formation: 1991 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: PRIDE HOUSTON WILL SUPPORT, EDUCATE AND PROMOTE THE LGBTQIA+ COMMUNITY IN ORDER TO COMMENMORATE OUR HISTORY AND ADVOCATE OUR RIGHTS Activities & Governance FOR CURRENT AND FUTURE GENERATIONS BY PRODUCING PRIDE EVENTS THAT REPRESENT OUR DIVERSE COMMUNITY. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 8 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 1 Total number of volunteers (estimate if necessary) 6 30 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 101,062 75,746 Program service revenue (Part VIII, line 2g) 40,500 125,436 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 12 2 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 226,510 116,248 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,000 4,001 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 14,523 67,484 Expenses Professional fundraising fees (Part IX, column (A), line 11e) 9,593 0 Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 259,476 216,713 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 341,553 235,237 Revenue less expenses. Subtract line 18 from line 12 (118, 989)(115,043) **Beginning of Current Year** End of Year Net Assets or Fund Balances 20 Total assets (Part X, line 16) 218,620 114,619 21 Total liabilities (Part X, line 26) 23,769 38,757 22 Net assets or fund balances. Subtract line 21 from line 20 194,851 75,862 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inf y knowledge Sign Here Print/Type preparer's name X if Paid P00540765 Teresa Coleman Preparer Firm's EIN Coleman Tax Service LLC Firm's name **Use Only** PO Box 18013 Firm's address Houston TX 77206-8013 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

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

4e Total program service expenses ▶

) (Revenue \$

Part IV 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	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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
,	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	5		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i>			
	"Yes," complete Schedule D, Part I	6		х
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			Λ
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		41
	complete Schedule D, Part III	8		х
	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		x
	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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	X	
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		X
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
а	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	106		
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
a h	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		Х
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
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		Λ
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			Λ
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			45
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			41
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
а	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
_	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

Form 990 (2020) PRIDE HOUSTON INC 76-0360374 Page 4 Part IV **Checklist of Required Schedules** (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 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 23 X 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 24a X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?....... 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a X 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? 25b Х 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% 26 X 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 27 Х 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a X X A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c X 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N. Part I. 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 complete Schedule N, Part II X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X 35a X If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 35b X Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X 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 X Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 0 0

Did the organization comply with backup withholding rules for reportable payments to vendors and

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

			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note : 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		X
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		X
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		X
С	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		Х
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? • • • • •	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
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		X
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
b 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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see 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		x
	If "Yes," complete Form 4720, Schedule O.			

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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 in Schedule O. See instructions.

	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
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			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	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:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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 Q	9		X
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		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 2	11a	X	
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	X	
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	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
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?	15-	.,	
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
160				
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		v
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	iva		X
Ŋ	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
		16b		
Sec	organization's exempt status with respect to such arrangements?tion C. Disclosure	מטו		
360 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)			
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	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 (2020) PRIDE HOUSTON INC 76-0360374 Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

				((C)				
(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) LORIN ROBERTS	40.00								
EXECUTIVE DIRECTOR 2020-21				X			12,175	0	1,400
(2) JOSHUA ALLBRIGHT	5.00								
MEMBER AT LARGE 2020-2021		X					0	0	0
(3) HUONG TRUONG	15.00								
MEMBER AT LARGE 2020-2021		X					0	0	0
(4) COURTNEY MATTHEWS	5.00								
MEMBER AT LARGE 2020		X					0	0	0
(5) SOPHIA MEDINA	10.00								
MEMBER AT LARGE 2020-21		X					0	0	0
(6) GILLIAN THOMAS	15.00								
MEMBER AT LARGE 2020-21		X					0	0	0
(7) KAY CRAYTON	10.00								
MEMBER AT LARGE 2020-21		X					0	0	0
(8) KENDRA WALKER	20.00								
VP, SECRETARY, TREASURER 2020-21		X		X			0	0	0
(9) JASMINE YOUNG	15.00								
SECRETARY MEMBER AT LARGE 2021		X		X			0	0	0
(10)THASIA MADISON	30.00								
PRESIDENT 2020-2021				x			0	0	0
(11) JACOB SIEGEL	15.00								
TREASURER 2020-21				x			0	0	0
(12)									
<u>(13)</u>									
<u>(14)</u>									

rait	(A) Name and title		(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related		con	r	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizati (W-2/1099-N		orgai	rom the nization d organiz	
<u>(15)</u>														
(16)														
(17)														
<u>(18)</u>														
<u>(19)</u>														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b	Subtotal	• • • • •	• • •	• • •	• •			• •						
c d	Total from continuation sheets to Part VII, Sect Total (add lines 1b and 1c)		• • •	• • •	• •	• •	• • •	• •	12,175		0		1	400
2	Total number of individuals (including but not limit						ceive	d mo	•	of	•			100
	reportable compensation from the organization	<u> </u>											V	0
3	Did the organization list any former officer, direct	tor, trustee,	key en	nploy	ee, o	or hi	ighest	con	npensated				Yes	No
	employee on line 1a? If "Yes," complete Schedul											3		x
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater th													
	individual											4		x
5	Did any person listed on line 1a receive or accrue													
	for services rendered to the organization? If "Yes	s," complete	Sched	lule J	for	sucl	h pers	on				5		X
Secti 1	on B. Independent Contractors Complete this table for your five highest compensations.	tod indonona	dont oo	ntrac	torc	that	rocci	vod	more than \$100.00	ın of				
•	compensation from the organization. Report comp										x year.			
	(A)						J		(B)		,	(C)		
	Name and business addres	s							Description of service	es		Compens	ation	
2	Total number of independent contractors (including received more than \$100,000 of compensation fro	-			e list	ed a	above)) wh	0					

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or n	ote to any line in thi	s Part VIII			
					(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						function revenue	business revenue	from tax under sections 512–514
	1a	Federated campaigns	1a					
इ इ	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising events	1c					
s, G Amc	d	Related organizations	1d					
Gif lar∫	е	Government grants (contributions)	1e					
in.	f	All other contributions, gifts, grants,						
er S		and similar amounts not included above	1f	75,746				
흥동	g	Noncash contributions included in						
Son	_	lines 1a-1f	1g					
	h	Total. Add lines 1a-1f	• •		75,746			
	0-			Business Code	40.500	40.500		
8		PRIDE FESTIVAL N PARADE		812900	40,500	40,500		
e Š	b							
S en	C							
ES Se	d		_					
Program Service Revenue	e	All other program service revenue						
ъ.	1	Total. Add lines 2a-2f			40,500			
					40,300			
	3	Investment income (including dividends, inter- other similar amounts)			2			2
	4	Income from investment of tax-exempt bond						
	5	Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents 6a		() 1 0100114.				
		Less: rental expenses 6b						
		Rental income or (loss) 6c						
		Net rental income or (loss)						
		Gross amount from (i) Securities		(ii) Other				
	14	sales of assets		, ,				
		other than inventory 7a						
	b	Less: cost or other basis						
ē		and sales expenses 7b						
Ģ.	С	Gain or (loss) 7c						
æ	d	Net gain or (loss)		.				
Other Revenue	8a	Gross income from fundraising						
₹		events (not including \$						
		of contributions reported on line						
		1c). See Part IV, line 18	8a					
	1	Less: direct expenses	8b					
	1	Net income or (loss) from fundraising events	•	▶				
	9a	Gross income from gaming						
		activities, See Part IV, line 19	9a					
	1	Less: direct expenses	9b					
	С	Net income or (loss) from gaming activities	• •	· · · · · · •				
	10a	Gross sales of inventory, less						
		returns and allowances	10a					
	1	Less: cost of goods sold	10b					
	С	Net income or (loss) from sales of inventory	• •					
	11-			Business Code				
ous ie	11a							
lan enu	1							
Scel Seve	C	All other revenue						
Miscellanous Revenue	1	Total. Add lines 11a-11d						
		Total revenue. See instructions			116.248	40.500	0	2

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 (A) Total expenses (B) (D) Do not include amounts reported on lines 6b. 7b. Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 4,001 4,001 Grants and other assistance to domestic 2 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, 5 trustees, and key employees 12,175 12,175 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 1,400 1,400 10 948 948 11 Fees for services (nonemployees): b Legal..... 32,050 32,050 3,473 3,473 Professional fundraising services. See Part IV, line 17 . f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 12 2,345 2,345 13 2,652 (168) 2,820 14 6,191 6,191 15 16 17,486 17,486 17 49 49 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 713 609 104 23 2,048 3,181 1,133 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.) a EQUIPMENT RENTAL 8,520 8,520 **EVENT EXPENSES** 39,435 39,435 C PY PLEDGES WRITTEN OFF 92,485 92,485 d FRAUDULENT CHARGES 8,133 8,133 All other expenses е Total functional expenses. Add lines 1 through 24e. . 25 235,237 163,798 71,439 0 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)

Form 990 (2020) PRIDE HOUSTON INC 76-0360374 Page 11

Part X Balance Sheet

ı uı		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	2,092	1	2,378
	2	Savings and temporary cash investments	26,461	2	12,873
	3	Pledges and grants receivable, net	183,672	3	92,300
	4	Accounts receivable, net		4	1,000
	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	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	300	8	300
Ass	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 16,249			
	b	Less: accumulated depreciation 10b 14,827	2,135	10c	1,422
	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	4,346
	16	Total assets. Add lines 1 through 15 (must equal line 33)	218,620	16	114,619
	17	Accounts payable and accrued expenses	5,769	17	20,757
	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	
w	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abil		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	18,000	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	23,769	26	38,757
		Organizations that follow FASB ASC 958, check here	·		·
"		and complete lines 27, 28, 32, and 33.			
čě	27	Net assets without donor restrictions		27	
alan	28	Net assets with donor restrictions		28	
Ã		Organizations that do not follow FASB ASC 958, check here			
nuc		and complete lines 29 through 33.			
ŗ.	29	Capital stock or trust principal, or current funds		29	
ts c	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSe	31	Retained earnings, endowment, accumulated income, or other funds	194,851	31	75,862
Net Assets or Fund Balances	32	Total net assets or fund balances	194,851	32	75,862
ž	33	Total liabilities and net assets/fund balances	218,620		114,619
			220,020		Form 990 (2020)

EEA Form **990** (2020)

orm	1990 (2020) PRIDE HOUSTON INC	76-036	<u> 50374</u>		Pa	age 12
Pai	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			116,	248
2	Total expenses (must equal Part IX, column (A), line 25)	. 2			235,	237
3	Revenue less expenses. Subtract line 2 from line 1	. 3		(118,	989)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4			194,	851
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			75,	862
Pai	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		x
	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		X
	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		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

3b | Form **990** (2020)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Employer identification number Name of the organization PRIDE HOUSTON INC 76-0360374 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

Schedule A (Form 990 or 990-EZ) 2020 PRIDE HOUSTON INC 76-0360374 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2016 **(b)** 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 51,215 2,852 411,682 101,062 75,746 642,557 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 **Total.** Add lines 1 through 3 51,215 2,852 411,682 101,062 75,746 642,557 **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) 170,907 Public support. Subtract line 5 from line 4 471,650 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2016 **(b)** 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total 2,852 7 Amounts from line 4..... 51,215 411,682 101,062 75,746 642,557 **8** Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 12 12 12 38 **9** Net income from unrelated business activities, whether or not the business **10** Other income. Do not include gain or loss from the sale of capital assets 11 Total support. Add lines 7 through 10... 642,595 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) 14 73.40 % 76.88 % 16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this X b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

76-0360374

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

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

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
_	line 6.)						
	ction B. Total Support	1		T	I		
	endar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
10	or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,		1				
	and 12.)						
14	First 5 years. If the Form 990 is for the orga	nization's firet	second third	fourth or fifth	⊥ tax vear as a s	section 501(c)(3	3)
	organization, check this box and stop here				-		•
Sec	ction C. Computation of Public Suppo				•••••	•••••	· · · · · · _
	Public support percentage for 2020 (line 8, c			column (f)) .		15	%
	Public support percentage from 2019 Sched		-			16	%
	ction D. Computation of Investment In					- 1	,,
	Investment income percentage for 2020 (line			ine 13, column	n (f))	17	%
	Investment income percentage from 2019 S		•			18	%
	33 1/3% support tests - 2020. If the organiz						
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2019. If the organiz	=	-	-		• •	
	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did r	-	_	-	=		_

Schedule A (Form 990 or 990-EZ) 2020 PRIDE HOUSTON INC 76-0360374 Page 4

Part IV Suppo

Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	_		
	1		
	2		
	3a		
	- Gu		
	3b		
	3с		
	4a		
	4b		
	40		
	4c		
	5a		
	5b 5c		
	30		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
Δ (Fo		or 990-F	Z) 2020

Sched	tule A (Form 990 or 990-EZ) 2020 PRIDE HOUSTON INC 76-0360374	<u>l</u>	Р	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations		.	N
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	2		
500	supported organizations played in this regard.	3		
<u>Sec</u>	ction E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	netrus	tions)	
		istruct	uons)	
a b				
C		(spa ir	etruct	ione)
2	Activities Test. <i>Answer lines 2a and 2b below.</i>	(355 11)	Yes	
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
а	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	these supported organizations and explain how those activities directly furthered their exempt purposes			

those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

b Did the activities described in line 2a, above, 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 lines 3a and 3b 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? If "Yes" or "No," 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.

(see instructions).

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	rganiza	ntions	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 <i>(expla</i>	in in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organi	izations	must complete Section	ns A through E.
Sec	ction A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ction B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ction C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	/ integra	ted Type III supporting	organization

EEA Schedule A (Form 990 or 990-EZ) 2020

	Typo in troit i unotionally integrated coc(a)(c) capper	g C. ga	Lations (continuou)	
Sec	ction D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	s	1	
2	2 Amounts paid to perform activity that directly furthers exempt purposes of supported			
	organizations, in excess of income from activity			
3	3 Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required) - provide deta	ils in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8 Distributions to attentive supported organizations to which the organization is responsive				
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2020 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
			(::)	/!!!\

10	Line 8 amount divided by line 9 amount		10	
Sec	etion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2020			
а	From 2015			
b	From 2016			
C	From 2017			
d	From 2018			
е	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i	Carryover from 2015 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
e	Excess from 2020			
			0-1	/=

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 3; Part IV, Section E, lines 1, 2a, 2b
	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 (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Employer identification number

2020

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

PRI	DE HOUSTON INC		76-0360374
Pa	rt I Organizations Maintaining Donor Advised Funds or Other S	imilar Funds or Acco	unts.
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 6.	
		nor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the asse	ts held in donor advised	
Ŭ	funds are the organization's property, subject to the organization's exclusive legal		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing the		
U	only for charitable purposes and not for the benefit of the donor or donor advisor,		
			∏ Yes ☐ No
Da	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	
Га		+ IV/ line 7	
	Complete if the organization answered "Yes" on Form 990, Par		
1	Purpose(s) of conservation easements held by the organization (check all that ap		
	Preservation of land for public use (e.g., recreation or education)		a historically important land area
	Protection of natural habitat	☐ Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation con-	ribution in the form of a co	nservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easements		. 2b
С	Number of conservation easements on a certified historic structure included in (a)	. 2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and n	ot on a	
	historic structure listed in the National Register		. 2d
3	Number of conservation easements modified, transferred, released, extinguished	d, or terminated by the orga	anization during the
	tax year ▶		
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, ins	spection, handling of	
	violations, and enforcement of the conservation easements it holds?	• • • • • • • • • • •	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations	, and enforcing conservation	on easements during the year
	•		
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, an	d enforcing conservation e	asements during the year
	▶ \$	Ū	ů .
8	Does each conservation easement reported on line 2(d) above satisfy the require	ements of section 170(h)(4	-)(B)(i)
	and section 170(h)(4)(B)(ii)?		п., п.,
9	In Part XIII, describe how the organization reports conservation easements in its		
-	balance sheet, and include, if applicable, the text of the footnote to the organization		
	organization's accounting for conservation easements.		a. 3550.1550 tilb
Pa	rt III Organizations Maintaining Collections of Art, Histor	ical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Pa		
1a	If the organization elected, as permitted under FASB ASC 958, not to report in it		alance sheet works
·u	of art, historical treasures, or other similar assets held for public exhibition, educa		
	service, provide, in Part XIII the text of the footnote to its financial statements that		ance of public
h			and about works of
b	If the organization elected, as permitted under FASB ASC 958, to report in its re		
	art, historical treasures, or other similar assets held for public exhibition, education	n, or research in furtherand	ce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or other sim		n, provide the
	following amounts required to be reported under FASB ASC 958 relating to these		
а	Revenue included on Form 990, Part VIII, line 1		· —
b	Assets included in Form 990, Part X		•••• \$

Sched	edule D (Form 990) 2020 PRIDE HOUSTON INC					76-0360	374	Page 2
	art III Organizations Maintaining Coll	ections of Art,	Histor	ical Tre	easures, or			
3	Using the organization's acquisition, accession, and						,	
	collection items (check all that apply):							
а	Public exhibition		d 🗌	Loan or e	exchange progr	ams		
b	Scholarly research		е 🗌	Other				
С	Preservation for future generations							
4	Provide a description of the organization's collection	s and explain how th	ney furth	er the org	anization's exer	mpt purpose in Part		
	XIII.							
5	During the year, did the organization solicit or receive							
	assets to be sold to raise funds rather than to be ma		he orgar	nization's o	collection?		Yes	∐ No
Pa	art IV Escrow and Custodial Arrangen		0.0		n			
	Complete if the organization answ	ered "Yes" on F	orm 99	90, Part	IV, line 9, or	r reported an amo	unt on Fo	orm
	990, Part X, line 21.							
1a	· · · · · ·						□ v	
_				• • • •		• • • • • • • • • •	∐ Yes	∐ No
b	o If "Yes," explain the arrangement in Part XIII and co	implete the following	table:		Г	Δm	ount	
С	Beginning balance				-	1c	Junt	
d					· · · · · · · · · ·	1d		
e						1e		
f						1f		
2a					_		Yes	No
b						-		
Pa	art V Endowment Funds.	-						
	Complete if the organization answ	ered "Yes" on F	orm 99	90, Part	IV, line 10.			
	(a)	Current year (b) Prior ye	ear (c) Two years back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year balance							
b								
С	Net investment earnings, gains, and							
	losses							
d								
е								
	programs							
1	Administrative expenses							
g 2	Provide the estimated percentage of the current year	r and halance (line 1	a colum	n (a)) hal	d ac:			
a		%	g, coluii	111 (a)) 1161	u as.			
b								
c								
-	The percentages on lines 2a, 2b, and 2c should equa	al 100%.						
За			at are he	eld and ad	ministered for th	ne		
	organization by:	<u> </u>					\ \ \	Yes No
	(i) Unrelated organizations						3a(i)	
	(ii) Related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizations li	sted as required on	Schedul	e R?			3b	

Part VI Land, Buildings, and Equipment.

Describe in Part XIII the intended uses of the organization's endowment funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10,

	Complete if the organization answ	ered tes on Form	1990, Part IV, line	i ia. See Foilli 990	, rait A, lille 10.
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
		(investment)	(other)	depreciation	
1a	Land				
b	Buildings				
С	Leasehold improvements				
d	Equipment	4,259	11,990	14,827	1,422
е	Other				
Tota	I. Add lines 1a through 1e. (Column (d) must equal	Form 990, Part X, colum	n (B), line 10c.)		1,422

Schedule D (Form 990) 202	PRIDE HOUSTON INC	76-0360374	Page 3

(1) Financial deriv (2) Closely-held e (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	(a) Description of security or category (including name of security) vatives equity interests b) must equal Form 990, Part X, col. (B) line 12.). nvestments - Program Related. Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Cost or er	Method of valuation: nd-of-year market value
(2) Closely-held e (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	(including name of security) vatives equity interests b) must equal Form 990, Part X, col. (B) line 12.) nvestments - Program Related. Complete if the organization answered "Yes" of	on Form 990, Part IV, li	Cost or er	nd-of-year market value
(2) Closely-held e (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	equity interests	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	o) must equal Form 990, Part X, col. (B) line 12.)	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(B) (C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(C) (D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(D) (E) (F) (G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(E) (F) (G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(F) (G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(G) (H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
(H) Total. (Column (b) Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
Total. (Column (b) Part VIII Ir C	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
Part VIII Ir	nvestments - Program Related. Complete if the organization answered "Yes" o	on Form 990, Part IV, li	ne 11c. See Form 9	200 Part V line 13
C	Complete if the organization answered "Yes" of		ne 11c. See Form 9	000 Part V line 13
(1)				
	(a) Description of investment	(b) Book value		30, I all A, IIIIe 13.
			` '	Method of valuation: nd-of-year market value
			0031 01 61	id-oi-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	o) must equal Form 990, Part X, col. (B) line 13.)	. •		
	Other Assets.	• 7		
	Complete if the organization answered "Yes" of	n Form 990. Part IV. li	ne 11d. See Form 9	990. Part X. line 15.
	(a) Description	,		(b) Book value
(1)DEPOSIT F	FOR LEASE			1,77
(2)EPOSIT F	FOR KEYS			72
(3)SUSPENSE				
(4)UNDEPOSIT	TED FUNDS			38
(5)AIRLINE T	XIX			1,45
(6)				
(7)				
(8)				
(9)				
Total. (Column (b	o) must equal Form 990, Part X, col. (B) line 15.)			4,34
Part X C	Other Liabilities.			
	Complete if the organization answered "Yes" on the complete if the organization answered "Yes" of the complete if the complete in the complete is the complete in the complete in the complete is the complete in the complete	on Form 990, Part IV, li	ne 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability (b) Book value		
(1) Federal inco	ome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 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.

Schedule D (Form 990) 2020 PRIDE HOUSTON INC 76-0360374 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: 2a 2b 2c 2d 3 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4c Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2b C 2c **d** Other (Describe in Part XIII.) 2d e Add lines 2a through 2d 2e Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)...... Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

EEA Schedule D (Form 990) 2020

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Attachment

Department of the Treasury Sequence No. 179 ▶ Go to www.irs.gov/Form4562 for instructions and the latest information. Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number PRIDE HOUSTON INC FORM 990 - 1 76-0360374 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 2 2 3 3 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) 7 8 8 9 9 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . . 11 12 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 713 MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (business/investment use (a) Classification of property placed in (e) Convention (f) Method (g) Depreciation deduction service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property 25-year property 25 yrs. h Residential rental S/I 27.5 yrs. MM property 27.5 yrs. MM S/I 39 yrs. MM S/L Nonresidential real MM property Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L 30-year 30 yrs. MM S/L С d 40-year MM Part IV Summary (See instructions.) Listed property. Enter amount from line 28

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

here and on the appropriate lines of your return. Partnerships and S corporations - see instructions

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713