Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

| A | For the | 2019 calend | dar year, or tax year beginning , 2019, and endi | ng | | | , 20 | 20,000 | |
|-------------------------|-------------|------------------|--|---------|---------------------------------------|----------------------------------|---------------------|--|--|
| - | | | C Name of organization Girls on the Run Greater Houston | | | D Employer identification number | | | |
| 3 | | applicable: | | | | | 41-2142328 | | |
| | Address | - | Doing business as Number and street (or P.O. box if mail is not delivered to street address) | Room/s | suite | E Telephe | one number | | |
| | Name ch | | 1 | | | | 832-628-448 | 0 | |
| | Initial ret | | 14359 Kellywood Lane City or town, state or province, country, and ZIP or foreign postal code | | | | | | |
| \Box | Final retu | rn/terminated | | | | G Gross | receipts \$ | 739,637 | |
| | Amended | d return | Houston, TX 77079 | ane I | (a) Is this a gro | | r subordinates? | Yes V No | |
| | Applicati | on pending | F Name and address of principal officer: Mary T Callahan, 14359 Kellywood La | | | | es included? | | |
| | | | Houston, TX 77079 □ 501(c)(3) | | | | st. (see instructio | | |
| 1 | | npt status: | ▼ 301(c)(3) □ 301(c)(1) / 1 (most max) □ 101(c)(7) | | H(c) Group e | | | , | |
| J | | | otrgreaterhouston.org | | 2004 | | of legal domicile | : TX | |
| K | | organization: 🗸 | Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form | nation: | 2004 | W State | or legal dornicile | . 17 | |
| P | art I | Summa | ry | | -1-1- As had | auful be | and co | nfident | |
| | 1 | Briefly des | cribe the organization's mission or most significant activities: We in | spire (| giris to be | oyrui, ne | earthy and co | illidelit | |
| Ce | | using a fur | , experience-based curriculum which creatively integrates running. We | envis | sion a work | d where | every girl kno | ows and | |
| Activities & Governance | | antivator h | or limitless potential and is free to holdly pursue her dreams. | | | | | | |
| ern | 2 | Check this | box > if the organization discontinued its operations or dispose | ed of n | nore than | 25% of | its net assets | s. | |
| Š | 3 | Number of | f voting members of the governing body (Part VI, line 1a) | | | 3 | | | |
| 8 | 4 | Number of | findependent voting members of the governing body (Part VI, line 1 | b) . | | 4 | | 10 | |
| es | 5 | Total num | ber of individuals employed in calendar year 2019 (Part V, line 2a) | | | 5 | | 8 | |
| Ž | 6 | Total num | ber of volunteers (estimate if necessary) | | | 6 | | 735 | |
| to | 7a | Total upre | lated business revenue from Part VIII, column (C), line 12 | | | 7a | | -0- | |
| _ | b | Not uprela | ted business taxable income from Form 990-T, line 39 | | | 7b | | | |
| | + - | 14GL GITTOID | according to the control of the cont | | Prior Yea | r | Current | Year | |
| | 8 | Contributi | ons and grants (Part VIII, line 1h) | | | 192,674 | | 595,204 | |
| 9 | 0 | | service revenue (Part VIII, line 2g) | | | 146,028 | | 156,882 | |
| Revenue | 9 | Inventmen | at income (Part VIII, column (A), lines 3, 4, and 7d) | | | | | | |
| Be | 10 | Other | enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | (16,936) | | (12,449) | |
| | 11 | Other reve | nue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 321,766 | | 739,637 | | |
| | 12 | Total reve | nue—add lines 8 through 11 (flust equal Fait VIII, column (4), lines 1-3) | +- | | 521,100 | | | |
| | 13 | Grants an | d similar amounts paid (Part IX, column (A), lines 1–3) | - | | | | ************************************** | |
| | 14 | Benefits p | paid to or for members (Part IX, column (A), line 4) | | | 143,268 | | 176,733 | |
| es | 15 | Salaries, c | ther compensation, employee benefits (Part IX, column (A), lines 5-10) | - | · · · · · · · · · · · · · · · · · · · | 140,200 | | 170,700 | |
| Expenses | 16a | Profession | nal fundraising fees (Part IX, column (A), line 11e) | | | | | | |
| ax | b | Total fund | Iraising expenses (Part IX, column (D), line 25) ▶ | | | 405 775 | | 184,469 | |
| ш | 17 | Other exp | enses (Part IX, column (A), lines 11a-11d, 11f-24e) | - | | 125,775 | | | |
| | 18 | Total expe | enses. Add lines 13-17 (must equal Part IX, column (A), line 25) | - | | 269,043 | | 361,202 378,435 | |
| | 19 | Revenue | less expenses. Subtract line 18 from line 12 | | | 52,723 | 1 | | |
| t Assets or | Ses | | | Beg | inning of Cur | | | | |
| sets | [20 | | ets (Part X, line 16) | | | 99,664 | | 486,058 | |
| t As | 21 | | lities (Part X, line 26) | - | | 12,618 | | 20,577 | |
| Ž, | 를 22 | Net asset | s or fund balances. Subtract line 21 from line 20 | | | 87,046 | 1 | 465,481 | |
| | Part II | Signat | ure Block | | | | | | |
| L | Inder pen | alties of perjur | y, I declare that I have examined this return, including accompanying schedules and s | tatemer | nts, and to th | e best of | my knowledge | and belief, it is | |
| tı | rue, corre | ct, and comple | y, I declare that I have examined this fector, including accompany to the pre- ete. Declaration of preparer (other than officer) is based on all information of which pre- | | 1 | | | | |
| | | 161 | any Collarer | | | | | | |
| S | ign | Signa | ature of officer | | Dat | •31 | 151 W | 1 | |
| H | ere | | 70 1 +000 CE | | | - | 10/1 | | |
| | | Type | or print name and title | | | , ' | - 1 | | |
| _ | | Print/Ty | pe preparer's name Preparer's signature | Date | | Check | | | |
| | aid | | | | | self-em | ibiolea | | |
| | repar | | ame • | | Firm | 's EIN ▶ | | | |
| | lse On | Firm's a | ddress ▶ | | Pho | ne no. | | | |
| N | lay the l | RS discuss | s this return with the preparer shown above? (see instructions) | | | <u> </u> | <u>\</u> Ye | es No | |

| Part | 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: Girls on the Run is a transformational physical activity based positive youth development program for girls in 3rd-8th grades. We |
| | teach life skills through dynamic, interactive lessons and running games. The program culminates with the girls being physically |
| | and emotionally prepared to complete a celebratory 5k running event. The goal of the program is to unleash confidence through |
| | accomplishment while estabilishing a lifetime appreciation of health and fitness. |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the |
| ~ | 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. |
| | (Code: 611630) (Expanses \$ 248,242 including grants of \$) (Revenue \$ 150,075) |
| 4a | (Code, 611020) (Expenses 4 240,242 moldang grants of 4 |
| | Girls on the Run Greater Houston held after-school programs serving 1,794 girls at 121 sites around the Greater Houston area (Harris, |
| | Ft. Bend, and Montgomery Counties). The program combines an interactive curriculum and running to inspire self-respect and |
| | healthy lifestyles in pre-teen and early teen girls from 3rd-8th grades. 1,723 3rd-5th graders participated in "Girls on the Run" |
| | programs at 116 sites and 71 6th-8th grade girls participated in the Heart & Sole program at 5 sites. Of the 121 sites, 93 are economically disadvantaged. 66% of the girls pay an average of \$29 for a program that costs \$203 per girl. GOTRGH gave over |
| | \$161,000 in scholarships to disadvantaged girls in 2019. With the help of our generous sponsors and donors, we are able to bring |
| | the Girls on the Run and Heart & Sole programs to schools, public, charter, and private, as well as community centers, YMCAs, parks, |
| | and a clinic specializing in obesity. 735 wonderful volunteers including 530 unpaid coaches donated their time and effort to |
| | Girls on the Run Greater Houston in 2019. There is no shortage of girls who would like to participate in our program, only a shortage |
| | of coaches who are selflessly willing to volunteer their after-school time on behalf of young girls across the Greater Houston area. |
| | COME JOIN US! |
| | |
| | |
| 4b | (Code: 611620) (Expenses \$ 60,023 including grants of \$) (Revenue \$ 29,580) |
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| Part I | V Checklist of Required Schedules | | | |
|--------|--|-----------|-----|------------|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | 1 | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | / | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | ✓ |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | √ |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | 1 |
| 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 | | 1 |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | 1 |
| 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 | | 1 |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| 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 | 1 | |
| 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 | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | 1 |
| 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 | | 1 |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | 1 | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | 1 |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 14a | - | 1 |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 144 | - | • |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. | 14b | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| 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 | 1 | |
| 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 | | 1 |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | 1 |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | 1 |

| Part | 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 | | ✓ |
| 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 | | ✓ |
| 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 | | √ |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | 1 |
| 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 | | 1 |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | 1 |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | ✓ |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | 1 |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | 1 |
| 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): | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV | 28a | | 1 |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | 1 |
| С | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If | 28c | | 1 |
| | "Yes," complete Schedule L, Part IV | 29 | | 1 |
| 29 30 | Did the organization receive more trial \$25,000 in horizontal treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | 1 |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| 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 | | 1 |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | ļ | 1 |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. | 35b | | |
| 36 | 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 | | 1 |
| 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 | - | 1 |
| 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 | 1 | |
| Part | Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | • • | Yes | No |
| 10 | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3 | 3 | | |
| 1a b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| • | reportable gaming (gambling) winnings to prize winners? | 1c | 1 | |

| art ' | Statements Regarding Other IRS Filings and Tax Compliance (continued) | T | Yes | No |
|--------|--|-----|---------------|-------------|
| | Town W. C. Transmitted of Word and Tax | | 162 | NO |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 8 | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | 1 | 12140192046 |
| b | Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| • | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | | 1 |
| 3a | 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 | | 1 |
| | | | | · |
| b | If "Yes," enter the name of the foreign country ► | | | |
| _ | See instructions for filling requirements for Finden Form 114, Report of Foreign Bank and Financial Accounts (Fibrary). | 5a | | 1 |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | 1 |
| | | 5c | | _ |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 30 | | |
| | 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 | | 1 |
| 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 | | 1 |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | |
| U | required to file Form 8282? | 7c | | 1 |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | 1 |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | 1 |
| g g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| 0 | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| а | Note: See the instructions for additional information the organization must report on Schedule O. | | | |
| _ | Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| b | 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 | | 1 |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. | 14b | | |
| | Is the organization subject to the section 4960 tax on payments; in No, provide an \$1,000,000 in remuneration or | | 1 | 1 |
| 15 | | 15 | | 1 |
| | excess parachute payment(s) during the year? | | | |
| 46 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | 1 |
| 16 | If "Yes," complete Form 4720, Schedule O. | | | |
| | ii 165, Complete Form 4720, Conedule C. | For | m 99 (|) (20 |
| | | | | |

| Part | Governance, Management, and Disclosure For each "Yes" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change | nroug s on S | in 76 below, Schedule O. S | and See in | struc | tions. | | |
|---------|--|--------------------------------|-------------------------------|---------------|-------------|----------|--|--|
| | Check if Schedule O contains a response or note to any line in this Part VI | <u></u> | | | | V | | |
| Section | on A. Governing Body and Management | | | | Yes | No | | |
| 10 | Enter the number of voting members of the governing body at the end of the tax year | 1a | . 11 | | | | | |
| ia | 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 | | | | | 5 | | |
| | committee, explain on Schedule O. | | | | | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent . | 1b | 10 | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business | relatio | nship with | | | | | |
| - | any other officer, director, trustee, or key employee? | | | 2 | ✓ | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or | unde | r the direct | | | | | |
| | supervision of officers, directors, trustees, or key employees to a management company or o | ther p | erson?. | 3 | | 1 | | |
| 4 | 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | | | | | | | |
| 6 | Did the organization have members or stockholders? | | | 6 | | V | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to | | or appoint | 7- | | , | | |
| | one or more members of the governing body? | | | 7a | | 1 | | |
| b | Are any governance decisions of the organization reserved to (or subject to approve | i by) | members, | 7b | | 1 | | |
| | stockholders, or persons other than the governing body? | | lean during | 70 | | V | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions un | iderta | ken during | | | | | |
| _ | the year by the following: | | | 8a | 1 | | | |
| a | The governing body? | | | 8b | 1 | | | |
| ь 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann | ot be | reached at | | · · · · · · | | | |
| 9 | the organization's mailing address? If "Yes," provide the names and addresses on Schedule | ο. | | 9 | | 1 | | |
| Secti | on B. Policies (This Section B requests information about policies not required by the | e Int | ernal Reven | ue C | ode.) | | | |
| | | | | | Yes | No | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | 10a | | 1 | | |
| b | If "Yes." did the organization have written policies and procedures governing the activities of | f suc | h chapters, | | | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exer | npt pu | irposes? | 10b | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body be | ore fili | ng the form? | 11a | 1 | | | |
| 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 | 1 | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could gi | ve rise | to connects? | 12b | V | ├ | | |
| C | Did the organization regularly and consistently monitor and enforce compliance with the | polic | // If Yes, | 12c | 1 | | | |
| | describe in Schedule O how this was done | | | 13 | 1 | \vdash | | |
| 13 | Did the organization have a written whistleblower policy? | | | 14 | 1 | † | | |
| 14 | Did the process for determining compensation of the following persons include a review | | | | • | | | |
| 15 | independent persons, comparability data, and contemporaneous substantiation of the deliberation | on an | d decision? | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | 1 | | | |
| b | Other officers or key employees of the organization | | | 15b | | | | |
| J | 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 sim | ilar a | rrangement | | | | | |
| | with a taxable entity during the year? | | | 16a | | 1 | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization | n to | evaluate its | | | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps | to sa | feguard the | | | | | |
| | organization's exempt status with respect to such arrangements? | | | 16b | | <u></u> | | |
| | on C. Disclosure | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed | ia) 0 | 000 and 000 | T /9^ | otion | 501/- | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicab (3)s only) available for public inspection. Indicate how you made these available. Check all the | i e j, 9: at apr | o, and 990- | 1 (380 | Juon | ع) ۱ دد | | |
| | (3)s only) available for public inspection, indicate now you made these available. Or leck all the Own website | ched | ule O) | | | | | |
| 40 | Describe on Schedule O whether (and if so, how) the organization made its governing doc | | | of inte | rest i | ooliev | | |
| 19 | and financial statements available to the public during the tax year. | J. 1101 | ito, commerc | | } | · · y | | |
| 20 | State the name, address, and telephone number of the person who possesses the organizat | on's | oooks and re | cords | | | | |
| | Many T Callaban, 1/250 Kallawood I n. Houston TY 77079 | | | | | | | |

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

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.

| ☐ Check this box if neither the organization nor | any related | d orga | aniz | atio | n c | ompe | nsa | ted any current of | officer, director, | or trustee. |
|--|---|--------------------------------|-----------------------|-----------------------|---------------|------------------------------|--------------|---|--|---|
| (A) Name and title | (B) Average hours | (do n | ot ch | Posi neck ss pe | ition more | than o | one nan | (D) Reportable compensation | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation |
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | | from the organization and related organizations |
| (1) Dave Lee | 2 | , | | | | | | | | |
| Chairman | | 1 | - | | ├ | | | | | |
| (2) Mary T Callahan | 40 | | | , | | | | | | 4,897 |
| CEO & Executive Director | | 1 | <u> </u> | 1 | <u> </u> | ├ | - | 77,551 | | 4,897 |
| (3) Frank Bilotti | 2 | | | | | | | | | |
| Director Treasurer | | 1 | <u> </u> | 1 | _ | ļ | _ | | | |
| (4) Centrell Reed | 2 | | | | | | | | | |
| Director | | 1 | _ | | <u> </u> | | <u> </u> | | | |
| (5) Jeanette Margel | 2 | | | | | | | | | |
| Director | | 1 | _ | _ | <u> </u> | | _ | | | |
| (6) Jamie Hons | 2 | | | | | | | | | |
| Director | | 1 | _ | | 1_ | | _ | | | |
| (7) Kirsten Thorp | 2 | | | | | | | | ************************************** | |
| Director | | 1 | <u> </u> | | | | _ | | | ļ |
| (8) Colleen Cockrum | 2 | | | | | | | | | |
| Director | | 1 | | | | | | | | |
| (9) Lynda Sasser | 2 | | | | | | | | | |
| Director | | 1 | | | L | | _ | | | |
| (10) Erin Laird | 2 | | | | | | | | | |
| Director | | 1 | <u></u> | | | | | | | |
| (11) Kimberly McHugh | 2 | | | | | | | | | |
| Director | | 1 | | | L | | | | | |
| (12) Jay Callahan | 10 | | | | | | | | | |
| Secretary | | | _ | 1 | | | _ | | | |
| (13) | | | | | | | | | | |
| (14) | | | T | | T | | I | | | |

| Part | VII Section A. Officers, Directors, 1 | rustees, | Key I | Ξmj | olo | yee | s, an | d H | lighest Compe | nsated Employ | rees (co | ntinued) |
|-------|--|---|--------------------------------|-----------------------|----------------------|--------------|------------------------------|--------------|---------------------------------------|--|-----------------------------------|--|
| | (A) Name and title | | box, | unles er and | Pos neck ss pe | rson | than of is both | an tee) | (D) Reportable compensation from the | (E) Reportable compensation from related | (F Estimated of or compe | d amount ther |
| | | per week (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) | organizations (W-2/1099-MISC) | from organiza | the |
| (15) | | | | | | | | | | | | |
| (16) | | | | | | | | | | | | |
| (17) | | | | | | | | | | | | |
| (18) | | | ļ — | | | | | | | | ugasemba eraban. Militari erb | |
| (19) | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | |
| (21) | | ļ | | | | | | | | | | |
| (22) | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | |
| | Subtotal | | | | | | | > | 77,551 | | | 4,897 -0- |
| d | Total (add lines 1b and 1c) | | | | | | | ▶ | 77,551 | | of | 4,897 |
| 2 | reportable compensation from the organ | | a to ti | 1086 | 9 IIS | ieu | abov | e) v | viio received moi | —————————————————————————————————————— | | |
| 3 | Did the organization list any former employee on line 1a? If "Yes," complete | officer, dir | ector, I for s | tru uch | uste ina | e, l | key e ual | mp | loyee, or highes | st compensated | | Yes No ✓ |
| 4 | For any individual listed on line 1a, is the organization and related organizations individual | sum of re | porta | ble | cor | npe | nsatio | on a | and other compe | nsation from the | 4 | |
| 5 | Did any person listed on line 1a receive of for services rendered to the organization | or accrue c | ompe | nsa lete | tior Sci | fro hed | m an | y ur for | nrelated organiza | tion or individua | | 1 |
| Secti | on B. Independent Contractors | | | | | | | | | | | |
| 1 | Complete this table for your five hig compensation from the organization. Rep | hest comport | ensat nsatio | ed n fo | ind or th | epe e ca | ndeni alenda | t ço arye | ontractors that ear ending with o | received more r within the organ | than \$10 nization's | 00,000 of tax year. |
| | (A) Name and business add | | | | | | | | (B) Description of ser | | (C) Compensa | |
| | | | | | | | | - | | | | To the second se |
| | | | | | ***** | | | ‡ | | | | |
| 2 | Total number of independent contract received more than \$100,000 of compens | ors (includi sation from | ing b the o | ut r rgar | not niza | limi tion | ted t | o ti | hose listed abov | ve) who | | |

| Part VIII | | Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII | | | | | | | | | | | | |
|--|--------|--|------------|-------------|----------|---------------|----------------------|--|--------------------------------------|---|--|--|--|--|
| | | CHECK II OCHECUIC C | 001 | tuno u ro | ороли | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 | | | | |
| 9 9 | 1a | Federated campaigns | | | 1a | | | | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues . | | | 1b | | | | | | | | | |
| ج ق | C | Fundraising events . | | | 1c | 101,075 | | | | | | | | |
| E A | d | Related organizations | | | 1d | | | | | | | | | |
| 2 5 | е | Government grants (c | | | 1e | 9,460 | | | | | | | | |
| Sir | f | All other contributions, | | | | | | | | | | | | |
| er i | | and similar amounts not i | inclu | ided above | 1f | 482,227 | | | | | | | | |
| 를 돌 | g | Noncash contribution | s in | cluded in | | | | | | | | | | |
| שלים | | lines 1a-1f | | | 1g | | | | | | | | | |
| 0 E | h | Total. Add lines 1a-11 | f <u>.</u> | <u> </u> | · · · | | 595,204 | | | | | | | |
| | | | | | | Business Code | | | | | | | | |
| 30 | 2a | | | | | 611620 | 134,945 | | | | | | | |
| Le e | b | 5k Race | | | | 611620 | 21,937 | 21,937 | | | | | | |
| n S | C | *************************************** | | | | | | | | | | | | |
| gram Ser Revenue | d | | | | | | | | | | | | | |
| Program Service Revenue | e | All other program serv | 100 | ravanua | | | | | | | | | | |
| • | f g | Total. Add lines 2a-2 | | | | • | 156,882 | | | | | | | |
| | 3 | Investment income (| | | | | 100,002 | | | | | | | |
| | Ŭ | other similar amounts | | | | | | | | | | | | |
| | 4 | Income from investme | | | | | | | | | | | | |
| | 5 | Royalties | | | | 🕨 | | | | | | | | |
| | | | | (i) Rea | ı | (ii) Personal | | | | | | | | |
| | 6a | Gross rents | ва | | | | | | | | | | | |
| | b | | 6b | | | | | | | | | | | |
| | С | , , <u></u> | 6c | | | | | | | | | | | |
| | d | Net rental income or (| loss | | <u> </u> | > | | | | | | | | |
| | 7a | Gross amount from | | (i) Securi | ties | (ii) Other | | | | | | | | |
| | | sales of assets other than inventory | 7a | | | | | | | e e | | | | |
| a) | b | Less; cost or other basis | 1 0 | | | - | | | | | | | | |
| her Revenue | D | Control of the Contro | 7b | | | | | | | | | | | |
| 9 | С | | 7c | | | | | | | | | | | |
| č | d | Net gain or (loss) . | | | | 🕨 | | | | | | | | |
| e l | 8a | Gross income from | fu | ndraising | | | | | | | | | | |
| ō | | events (not including \$ | | 101,075 | | | | | | | | | | |
| | | of contributions repo | | | | | | | | | | | | |
| | | 1c). See Part IV, line 1 | | | 8a | 23,795 | | | | | | | | |
| | | Less: direct expenses | | | 8b | 37,639 | 40.044 | | (13,844 | 1 | | | | |
| | C | Net income or (loss) f | | | ig eve | nts | (13,844 | 1 | (13,844 | | | | | |
| | 9a | Gross income from activities. See Part IV | | | 9a | | | | | | | | | |
| | b | Less: direct expenses | | | 9b | | | | | | | | | |
| | | Net income or (loss) f | | | | s > | | | | | | | | |
| | | Gross sales of inv | | | | | | | | | | | | |
| | | returns and allowance | | | 10a | 4,931 | | | | | | | | |
| | | Less: cost of goods s | | | 10b | 3,536 | | | | | | | | |
| | С | Net income or (loss) f | rom | sales of in | nvento | | 1,395 | 1,395 | | | | | | |
| S | | | | | | Business Code | | | | 1 | | | | |
| Miscellaneous Revenue | 11a | | | | | | | | 1 | | | | | |
| scellaned Revenue | b | | | | | | | 1 | | | | | | |
| Re Sce | C | All other revenue . | | | | | | 1 | | | | | | |
| Ž | e | Total. Add lines 11a- | | 1 | | | | | | | | | | |
| | 12 | Total revenue. See in | | | | | 739,63 | 158,277 | (13,844 |) | | | | |

| Part IX | Statem | ent of Fu | ınctional | Expenses |
|---------|--------|-----------|-----------|----------|

| Sectio | n 501(c)(3) and 501(c)(4) organizations must comp | lete all columns. All o | other organizations r | | n (A). |
|----------|--|-------------------------|------------------------------|-------------------------------------|--|
| | Check if Schedule O contains a response | | in this Part IX | | · · · · <u> </u> |
| | t include amounts reported on lines 6b, 7b, , and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 . | | | | |
| 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 | 77,551 | 69,796 | 3,878 | 3,877 |
| 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 | 84,754 | 76,279 | 4,237 | 4,238 |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 2,449 | 2,204 | 122 | 123 |
| 10 | Payroll taxes | 11,979 | 10,779 | 600 | 600 |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | | | | |
| С | Accounting | 3,500 | | 3,500 | 9. 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| 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.) | | | | 4.014 |
| 12 | Advertising and promotion | 4,833 | 1,611 | 1,611 | 1,611 |
| 13 | Office expenses | 29,735 | 14,867 | 7,434 | 7,434 713 |
| 14 | Information technology | 3,572 | 2,859 | | 713 |
| 15 | Royalties | | | | |
| 16 | Occupancy | 6,788 | 5,430 | 679 | 679 |
| 17 18 | Travel | 0,788 | 3,430 | <u> </u> | |
| | for any federal, state, or local public officials | | 7.000 | | 901 |
| 19 | Conferences, conventions, and meetings . | 9,011 | 7,209 | 901 | 901 |
| 20 21 | Interest | | | | |
| 22 | Depreciation, depletion, and amortization . | 3,168 | 1,584 | 792 | 792 |
| 23 | Insurance | 5,408 | 5,408 | | |
| 24 | Other expenses, Itemize expenses not covered | | | | |
| 44 | 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 | After-School Program Expense | 53,947 | 53,947 | | |
| b | 5k Race Expense | 56,292 | 56,292 | | |
| C | Dues & Subscriptions | 610 | | 610 | |
| d | License Fees | 7,605 | | 7,605 | |
| е | All other expenses | | | | 00.000 |
| 25 | Total functional expenses. Add lines 1 through 24e | 361,202 | 308,265 | 31,969 | 20,968 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet <u>. . . .</u> . . 🗆 Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 1 Cash-non-interest-bearing 227,371 78,063 2 2 3 245,088 3 4 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 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 7 4ssets 8 9,075 -0-9 2,267 9,809 Prepaid expenses and deferred charges . . . Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D . . . 10a 16,608 10c 2.717 11,332 Less: accumulated depreciation 10b (5,276)11 11 12 Investments-other securities. See Part IV, line 11 12 13 Investments-program-related. See Part IV, line 11 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 33) 99,664 16 486,058 16 8,142 17 18,077 17 18 18 19 4,476 2,500 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 21 Loans and other payables to any current or former officer, director, 22 Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 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 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 12.618 26 26 Organizations that follow FASB ASC 958, check here ▶ □ **Fund Balances** and complete lines 27, 28, 32, and 33. 27 87.046 220,393 27 28 245,088 28 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. Net Assets or 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 31 32 87,046 465,481 32 99,664 33 33 Total liabilities and net assets/fund balances 486,058

| | 4 | • |
|------|---|---|
| Page | 1 | 1 |
| ugo | • | - |

| orm 99 | | | | |
|--------|---|---|--------------|---------|
| Part | XI Reconciliation of Net Assets | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | • • | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | | | 9,637 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | | | 1,202 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | | | 8,435 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | | 8 | 7,046 |
| 5 | Net unrealized gains (losses) on investments | | | |
| 6 | Donated services and use of facilities | | | |
| 7 | Investment expenses | | | |
| 8 | Prior period adjustments | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | |
| 5.50 | 32, column (B)) | | 46 | 5,481 |
| Part | XII Financial Statements and Reporting | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | |
| | | 150000000000000000000000000000000000000 | 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 | ROBERT STATE | _ |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | ✓_ | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | |
| | separate basis, consolidated basis, or both: | | | |
| | ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | | |
| | the audit, review, or compilation of its financial statements and selection of an independent accountant? . | 2c | 1 | |
| | 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 | | 1 |
| 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 | <u></u> | <u></u> |
| | | For | n 990 | (2019) |
| | | | | |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2019
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

41-2142328 Girls on the Run Greater Houston 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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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 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 section 170(b)(1)(A)(iv). (Complete Part II.) 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 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 331/3% 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 331/3% 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.) 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b 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. Check this box if the organization received a written determination from the IRS that it is a 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). (v) Amount of monetary (vi) Amount of (iii) Type of organization (iv) is the organization (i) Name of supported organization (ii) EIN listed in your governing other support (see (described on lines 1-10 support (see document? instructions) instructions) above (see instructions)) Yes No (A) (B) (C) (D) (E)

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.)

| Section | on A. Public Support | | | | | | |
|---------|---|-------------------|-------------------|-------------------|------------------|----------------|------------------------|
| Calen | dar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | |
| | received. (Do not include any "unusual grants.") | 123,208 | 129,279 | 126,522 | 192,673 | 595,204 | 1,166,886 |
| 3 | 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 Gross receipts from activities that are not an | 85.041 | 88,232 | 111,130 | 129,093 | 144,433 | 557,929 |
| | 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 | 208,249 | 217,511 | 237,652 | 321,766 | 739,637 | 1,724,815 |
| 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 | 20,900 | 35,766 | 26,008 | 81,132 | 422,190 | 598,016 |
| С | Add lines 7a and 7b | 20,900 | 35,766 | 26,008 | 81,132 | 422,190 | 598,016 |
| 8 | Public support. (Subtract line 7c from | 20,900 | 00,700 | 20,000 | 01,102 | | |
| | line 6.) | | | | | | 1,138,799 |
| Secti | on B. Total Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 | Amounts from line 6 | 208,249 | 217,511 | 237,652 | 321,766 | 739,637 | 1,724,815 |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c | Add lines 10a and 10b | | | | | | |
| 11 | 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 | Total support. (Add lines 9, 10c, 11, and 12.) | 208,249 | 217,511 | 237,652 | 321,766 | | 1,724,815 |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop he | | | d, third, fourth | | | n 501(c)(3) · · ► □ |
| Secti | on C. Computation of Public Suppor | t Percentage |) | | | | |
| 15 | Public support percentage for 2019 (line | | | 13, column (f)) | | 15 | 66.02 % |
| 16 | Public support percentage from 2018 Sci | nedule A, Part I | II, line 15 . | <u> </u> | | 16 | 84.51 % |
| Secti | on D. Computation of Investment In | | | | | -T:=-T | |
| 17 | Investment income percentage for 2019 (| line 10c, colum | n (f), divided b | by line 13, colu | mn (f)) | 17 | -0- % |
| 18 | Investment income percentage from 2018 | Schedule A, F | Part III, line 17 | | | 18 | -0- % |
| 19a | 331/3% support tests—2019. If the organ | ization did not | The arcanization | on une 14, ar | iu linė 15 is m | ore man 331/37 | o, and line on ► ⊏7 |
| | 17 is not more than 331/3%, check this box | and stop nere. | me organizatio | on quamies as a | a publicly suppo | le more than ? | on . ▶ ☑ 31∞% and |
| b | 33 ¹ / ₃ % support tests—2018. If the organization 18 is not more than 33 ¹ / ₃ %, check this | tation aid not cr | re The organi | ime 14 OF IIIIE I | as a publicht s | upported organ | ization 🕨 🔲 |
| 20 | Private foundation. If the organization di | | | | | | |

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047 2019

Open to Public Inspection

Employer identification number Name of the organization 41-2142328 Girls on the Run Greater Houston Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year 1 Aggregate value of contributions to (during year) . 2 3 Aggregate value of grants from (during year) . . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No conferring impermissible private benefit? Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. 2a Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 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:

b Assets included in Form 990, Part X

| Part | III Organizations Maintaining C | | | | |
|--------|---|--|---|---|------------------------|
| 3 | Using the organization's acquisition, accollection items (check all that apply): | cession, and other reco | ords, check any of the | e following that make s | significant use of its |
| а | ☐ Public exhibition | d | ☐ Loan or exchang | 100 | |
| b | ☐ Scholarly research | е | Other | | |
| c | ☐ Preservation for future generations | | | | |
| 4 | Provide a description of the organization XIII. | n's collections and exp | lain how they further | the organization's exer | mpt purpose in Part |
| 5 | During the year, did the organization so assets to be sold to raise funds rather th | licit or receive donation an to be maintained as | ns of art, historical trepart of the organizati | easures, or other simile on's collection? | ar Yes No |
| Part | IV Escrow and Custodial Arrang | gements. | | | |
| | Complete if the organization at 990, Part X, line 21. | | | | |
| 1a | included on Form 990, Part X? | | | ions or other assets n | ot Yes No |
| b | If "Yes," explain the arrangement in Part | XIII and complete the | following table: | | |
| | | | | | mount |
| ¢ | Beginning balance | | | 1c | |
| d | Additions during the year | | | 1d | |
| е | Distributions during the year | | | 1e | |
| f | Ending balance | | | 1f | 0 P.V. P.N. |
| 2a | Did the organization include an amount | on Form 990, Part X, Iir | e 21, for escrow or co | ustodiai account liability | // Li tes Li No |
| | If "Yes," explain the arrangement in Part | XIII. Check here if the | explanation has been | provided on Part Air . | _ <u></u> |
| Par | | noward "Vaa" on Ed | um 000 Part IV line | 10 | |
| - | Complete if the organization a | | rior year (c) Two year | | k (e) Four years back |
| 4- | Perinning of year balance | (a) Current year (b) F | lor year (c) two year | 3 Dack (b) Three years but | (b) roar yours saon |
| 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 | | nce (line 1g, column (a | i)) held as: | |
| а | Board designated or quasi-endowment | % | | | |
| b | Permanent endowment ▶ | _% | | | |
| C | Term endowment ▶ % | | | | |
| | The percentages on lines 2a, 2b, and 2c | | | | L W |
| 3a | Are there endowment funds not in the p | possession of the orga | nization that are neld | and administered for ti | Yes No |
| | organization by: | | | | 3a(i) |
| | (7) | | | | 3a(ii) |
| | | | | | 3b |
| b | If "Yes" on line 3a(ii), are the related orga | | | | 30 |
| 4 | Describe in Part XIII the intended uses o | | JOWINGIR IDIOS. | | |
| Part | Land, Buildings, and Equipm Complete if the organization a | newored "Vee" on E | orm 000 Part IV lin | a 11a See Form 990 | Part X line 10 |
| | Description of property | (a) Cost or other basis | | (c) Accumulated | (d) Book value |
| | Description of property | (investment) | (other) | depreciation | (3) 2001 1440 |
| 1a | Land | | | | |
| b | Buildings | | | | |
| c | Leasehold improvements | 5,9 | 50 | (1,050) | 4,900 |
| d | Equipment | 10,69 | | (4,226) | 6,432 |
| е | Other | | | | |
| Total. | Add lines 1a through 1e. (Column (d) mu | st equal Form 990, Par | t X, column (B), line 1 | Oc.) | 11,332 |

| Par | | | per Return. | |
|------------------|---|--|--|-----------------|
| | Complete if the organization answered "Yes" on Form 990, | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 739,637 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 1 1 | | |
| а | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| C | Recoveries of prior year grants | | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | -0- |
| 3 | Subtract line 2e from line 1 | · · · · · · · · | 3 | 739,637 |
| 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 4b | | |
| b | Other (Describe in Part XIII.) | | 4c | -0- |
| | Add lines 4a and 4b | | | 739,637 |
| 5 | XII Reconciliation of Expenses per Audited Financial Staten | ents With Expens | es per Return. | 103,001 |
| Part | Complete if the organization answered "Yes" on Form 990, | Part IV line 12a | co per metam | |
| 1 | Total expenses and losses per audited financial statements | | 1 | 361,202 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | | 2e | -0- |
| 3 | Subtract line 2e from line 1 | | 3 | 361,202 |
| 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 | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| C | Add lines 4a and 4b | | | -0- |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin XIII Supplemental Information. | ne 18.) | 5 | 361,202 |
| Provid 2; Par | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part | d 4; Part IV, lines 1b a to provide any addition | and 2b; Part V, line onal information. | 4; Part X, line |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization 41-2142328 Girls on the Run Greater Houston Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations e 🗹 Solicitation of non-government grants ☑ Solicitation of government grants ✓ Internet and email solicitations g Special fundraising events Phone solicitations **d** In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☑ No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in (vi) Amount paid to (or retained by) (iii) Did fundraiser have (i) Name and address of individual or entity (fundraiser) (iv) Gross receipts (ii) Activity custody or control of contributions? from activity organization col. (i) Yes No 1 2 3 4 5 6 7 R 9 10 **Total** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Cat. No. 50083H

| Part II | Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more |
|---------|--|
| | than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with |
| | gross receipts greater than \$5,000. |

| | | g. 1 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | | | | |
|--|-------|--|----------------------------|--|--|---------------------------------|--|
| | | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events | |
| 1 | | | Soiree | Fall RunRaiser | Spring RunRaiser | (add col. (a) through col. (c)) | |
| | | | (event type) | (event type) | (total number) | (-)/ | |
| Revenue | 1 | Gross receipts | 101,051 | 13,285 | 10.533 | 124,869 | |
| € | • | | | 2 | | | |
| | 2 | Less: Contributions | 77,256 | 13,285 | 10,533 | 101,074 | |
| | 3 | Gross income (line 1 minus | | | | 00 705 | |
| _ | | line 2) | 23,795 | -0- | -0- | 23,795 | |
| | 4 | Cash prizes | | | | | |
| | 5 | Noncash prizes | | 2,046 | | 2,046 | |
| nses | 6 | Rent/facility costs | 16,390 | | | 16,390 | |
| Direct Expenses | 7 | Food and beverages | | | | | |
| Direct | 8 | Entertainment | 3,950 | | | 3,950 | |
| | 9 | Other direct expenses . | 13,414 | 1,418 | 1,763 | 16,595 | |
| | | | | 1 / N | _ | 20.004 | |
| | 10 | Direct expense summary. Ac Net income summary. Subtra | | | | 38,981 (15,186) | |
| 100 | 11 | | act line 10 from line 3, C | ored "Vee" on Form (| 000 Part IV line 10 | | |
| Fd | rt II | \$15,000 on Form 990-E | | sed 165 Officials | 330, 1 art IV, mile 13, | or reported more than | |
| | F | \$10,000 011 0111 000 E | | (b) Dull taba (instant | | (d) Total gaming (add | |
| Revenue | | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | col. (a) through col. (c) | |
| Ve | | | | | ************************************** | | |
| æ | 1 | Gross revenue | | | | | |
| | i i | 0.000.000.000 | | | | | |
| ses | 2 | Cash prizes | | | | | |
| Exper | 3 | Noncash prizes | | | | | |
| Direct Expenses | 4 | Rent/facility costs | | | | | |
| | 5 | Other direct expenses . | | | | | |
| | 6 | Volunteer labor | ☐ Yes% ☐ No | ☐ Yes% ☐ No | Yes % No | | |
| | 7 | 7 Direct expense summary. Add lines 2 through 5 in column (d) | | | | | |
| | 8 | 8 Net gaming income summary. Subtract line 7 from line 1, column (d) | | | | | |
| | | | | | | | |
| 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? | | | | | | | |
| | | | | | | | |
| b If "No," explain: | | | | | | | |
| | - | | | | | | |
| 40 | , ī | Were any of the organization's g | aming licenses revoked | t suspended or termin | ated during the tax year | ? Yes No | |
| 10 | | | | | | | |
| | J 1 | f "Yes," explain: | | | | | |
| | - | | | | | | |

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2019 Open to Public

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

41-2142328 Girls on the Run Greater Houston Part VI. Section A. Line 2. Mary T Callahan, CEO and President, is spouse of Jay Callahan, Secretary (Officer, non-Director). Part VI. Section B. Line 11b. The Executive Director, the Treasurer Director, the Chairman, and the pro-bono CPA reviewed the 990 and then it was distributed to the entire Board for approval before filing. Part VI. Section B. Lines 12a, 12b, 12c. Girls on the Run has a conflict of interest policy that applies to all Directors, Officers, and employees Board Directors and Officers must disclose potential conflicts at Board meetings and must sign annually that they have read and reviewed teat policy and have disclosed any conflicts. Part VI. Section B. Lines 15a, 15b. The Board's Finance Committee reviews annually the CEO's compensation. GuideStar executive compensation. reports and Girls on the Run International compensation reports are used to compare similar non-profits and similar Girls on the Run Counces executive director compensation. Annually the organization's effectiveness is reviewed in conjunction with the performance review. Part VI. Section C. Line 19. The organization's annual report with its financial statements is posted on its website. Additionally, the website home page has a link to GuideStar's website where its financial statements, annual reports, 990 tax filings, conflict of interest policy, and governing documents are posted and available for viewing.