E G	It.	•							27	93	10	5 % 3 7 ()
For	տ 990-T	E	Exempt C)rganizati	on Bu	sine	ss Inc	ome 🛚	Tax R	eturi	า	OMB No 1545	5-0047 —
	•	-		(and prox								004	
	* ~	For cal	endar year 2019 or o	ther tax year beginning			, and	ending		<u> </u>	~	201	19
Dan	artment of the Treasury		▶ Go	to www.irs gov/Fo	rm990T for i	nstructio	ons and the l	atest infor	mation.	AT.	T 1		
Inter	nal Revenue Service	•	Do not enter SSM	I numbers on this f	orm as it ma	y be ma	de public if y	our organi	zation is a	501(0)(3)	<u> </u>	Open to Public In 50 1(c)(3) Organiza	spection fo itions Only
A [Check box if address changed		Name of organiza	ation (Check	box if name	changed	and see inst	ructions.)		-	(Emp	loyer identification ployees' trust, see uctions)	
 R	Exempt under section	Print	CREATER	HOUSTON	COMMITM	สาคช	FOINT	እም ተ ረእ	т			3-71604	100
	501(c)(3())	or		and room or suite no				ATTO	<u> </u>	·	 -	lated business act	
	408(e) 220(e)	Туре		COAK BLV								instructions)	,
<u> </u>	100(c) 122(c) 1408A [] 530(a)			e or province, coun							1		
	529(a)		HOUSTON		-	Ji lulely	ii postai cout	;			541	900	
C B	ook value of all assets end of year		F Group exempti	on number (See ins	tructions.)	•	6291						
	738,068,5	63.	G Check organiza	ition type 🕨 🗓 🗓] 501(c) cor	poration	50	01(c) trust		401(a) trust	Oth	er trust
H E	nter the number of the o	rganiza	tion's unrelated tra	ides or businesses.		6		Describe	the only (or first) ur	related		
tra	ade or business here 🕨	FOU	NDATION	SERVICES				If only one	, complete	Parts I-V.	If more	than one.	
de	escribe the first in the bla	ank spac	e at the end of the	previous sentence	, complete P	arts I an							
	ısıness, then complete F			•			, ,						
I D	uring the tax year, was t	he corp	oration a subsidiai	v in an affiliated ord	oup or a pare	nt-subsi	diary control	led aroup?		▶ [Ye	es X No	
	"Yes," enter the name ar							3 6		,			
	ne books are in care of							Teleph	one numb	er ▶ 7	113-	333-220	0/
	rt I Unrelated						(A) Inc			Expenses		(C) Ne	
1a	Gross receipts or sales	·	224,1	17.		1 1	· · · · · · · · · · · · · · · · · · ·		, ,		r		
	Less returns and allow			c Balance		1c	224	,117.	= ,,		5		,,,,
2	Cost of goods sold (Sc		A line 7)			2	223	<u>, + + , •</u>		<u> </u>			
3	Gross profit. Subtract I		•	•		3	224	,117.			-	224	117.
4 a	Capital gain net income					4a		<u>, + + / •</u>				224,	<u> </u>
b	Net gain (loss) (Form 4	-	•	 ch Form 4797\		4b				<u></u>	,		
c	Capital loss deduction			on 1 on 11 47 57 j	•	4c					FC	EIVED	
5	Income (loss) from a p			ation (attach etatem	ent)	5		_/			LU		10
6	Rent income (Schedule		inp or an o corpor	auon (auaon statem	ient)	6		/		2	1011	10	<u> </u>
7	Unrelated debt-finance		a (Schadula E)			7				8 8	101	2 020	0
8	Interest, annuities, roya			ntrolled examples		8	/_						」第一
9	Investment income of a			•			/				GO	EN, UT	-
10	Exploited exempt activi			(17) organization ((Scriedule G)	10							
11	Advertising income (Sc		•		,	<i>P</i>							
12	Other income (See insti		•		/	11							
	Total. Combine lines 3			ı	<i>j</i> .	12	224	,117.				224	117
				where (See ins	in sationa to	13			!			224,	<u> </u>
<u> </u>				cted with the unre				auctions)					
14	Compensation of offic	ers, dıre	ctors, and trustee	s (Schedule K)							14		
15	Salaries and wages		_				• • •				15	97.	629.
16	Repairs and maintenar	nce	_							j	16		
17	Bad debts										17		
318	Interest (attach schedu	ule) (see	: instructions)								18		
2021	Taxes and licenses					•	•				19	13,	893.
20	Depreciation (attach Fo	orm 456	(2)				1	20	10.	359.	-		
2 1	Less depreciation clair	ned on §	Schedule A and el	sewhere on return				21a	•		21b	10.	<u>359.</u>
∲ 22	Depletion				•		•				22		
))) (1)	Contributions to deferr	ed com	pensation plans					•	•		23	8.	172.
	Employee benefit prog								•	i	24		033.
OBNINITIES	Excess exempt expens		edule I)							l	25		
Z 26	Excess readership cos			•	- •			•	•	ļ	26		
2 7	Other deductions (attac				-	•	SEE	STAT	EMENT	2	27	16	066.
<u> </u>	Total deductions. Add		•							_	28	166,	
G 29	Unrelated business tax		-	erating loss deduct	tion. Subtract	t line 28	from line 13			ľ	29		965.
30	Deduction for net opera									Ì			
	(see instructions)	3.50				, ,, 201	-				30		0.
31	Unrelated business tax	able inci	ome. Subtract line	30 from line 29	•					-	31	57	965.
	01-27-20 LHA For F				ctions					. 25	<u></u> ,	Form 990- 1	
				,					4	· 20			(2010)

0 ,

Form કર્	D _k T (2019) GREATER HOUSTON COMMUNITY FOUNDATION III Total Unrelated Business Taxable Income		23-7160400 Page 2				
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		132 68,497.				
33	Amounts paid for disallowed fringes						
34	Charitable contributions (see instructions for limitation rules)		34 0.				
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of	lines 32 and 33	68,497.				
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36				
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35		7 87 68,497.				
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)		& 38 <u>1,000</u> .				
39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,						
	enter the smaller of zero or line 37	1	$1 \frac{1}{39} \frac{1}{67,497}$				
Part	IV Tax Computation	<u>-</u>					
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	•	14,174.				
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:						
41	Tax rate schedule or Schedule D (Form 1041)	_	. 1.				
40			42				
	Proxy tax. See instructions Alternative manufacture and the second seco						
	Alternative minimum tax (trusts only)		43				
	Tax on Noncompliant Facility Income. See instructions	-	7 4 174				
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies		7 45 1 14,174.				
	V Tax and Payments		, a				
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)						
	Other credits (see instructions) . 46b		- ``}				
C	General business credit. Attach Form 3800		- -				
d	Credit for prior year minimum tax (attach Form 8801 or 8827) . 46d						
е	Total credits. Add lines 46a through 46d		46e				
47	Subtract line 46e from line 45		47 14,174.				
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (a	attach schedule)	48				
49	Total tax Add lines 47 and 48 (see instructions)		$49 \frac{14,174}{}$				
	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50 0.				
	Payments: A 2018 overpayment credited to 2019	6,484					
	2019 estimated tax payments Lb 5 b 5	7,000					
	Tax deposited with Form 8868	7,000					
	Foreign organizations: Tax paid or withheld at source (see instructions)		─ [**]				
	Backup withholding (see instructions) 51e		-				
			- 				
9 ,	Other credits, adjustments, and payments: Form 2439						
	Form 4136 Other Total \bullet \(\sum_{\text{136}} \)						
	Total payments. Add lines 51a through 51g	,	52 13,484.				
	Estimated tax penalty (see instructions). Check if Form 2220 is attached	٤ .	53 15.				
	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed		705.				
	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	•	55				
		unded	56				
Part	VI Statements Regarding Certain Activities and Other Information (see instruc	tions)					
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No				
(over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file						
í	FINCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country						
ı	nere > CAYMAN ISLANDS		X				
58 l	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	in trust?	Х				
	f "Yes," see instructions for other forms the organization may have to file.	,	· · ·				
	Enter the amount of tax-exempt interest received or accrued during the tax year > \$						
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the	ne best of my kn	nowledge and helief it is true				
Sign	correct, and complete Declaration of preggrer (other than taxpayer) is based on all information of which preparer has any knowledge	ge					
Here	CAME PORMILIES 20 A TIPE CURIN		May the iRS discuss this return with				
	Signature of officer Date TREASURER Title		the preparer shown below (see				
			instructions)? X Yes No				
	Print/Type preparer's name Preparer's signature Date O	Check	If PTIN				
Paid		self- employed	,				
Prepa	erer GUY T. TABOR, CPA / // // ''/7/20		P00171798				
Use (Firm's EIN	74-1695589				
	ONE RIVERWAY, SUITE 1900						
	Firm's address ► HOUSTON, TX 77056	Phone no.	(713) 622-2310				
923711 0			Form 990-T (2019)				

Schedule A - Cost of Good	ds Sold. Enter	method of inve	entory v	aluation N/A	<u> </u>				
1 Inventory at beginning of year	1			Inventory at end of ye			6		
2 Purchases	2		7	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2			ſ		
3 Cost of labor	3						'i 		
4 a Additional section 263A costs								<u> </u>	
(attach schedule)	4a		8	Do the rules of section	1 263A (with respect to		Yes	No
b Other costs (attach schedule)	. 4b		_	property produced or	acquire	d for resale) apply to		*	
5 Total Add lines 1 through 4b	5		<u> </u>	the organization?				_ <u></u>	<u> </u>
Schedule C - Rent Income (see instructions)	(From Real	Property ar	nd Pe	rsonal Property	Leas	ed With Real Pro	perl	(y) 	
1 Description of property									
(1)									
(2)									
(3)									
(4)									
	2 Rent receiv	ed or accrued				2(a) Dadvatiana dinasti		-tlth th	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	re than	of rent for	personal	onal property (if the percent property exceeds 50% or if ed on profit or income)	age	3(a) Deductions directly columns 2(a) a	nd 2(b)	(attach schedule)	"
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			<u>0.</u>	 			
(c) Total income Add totals of columns here and on page 1, Part I, line 6, colum	n (A)	>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<u> </u>		0.
Schedule E - Unrelated De	bt-Financed	I Income (see	instru	ctions)	, <u> </u>				
			2	Gross income from	ļ	Deductions directly cor to debt-finance			
1 Description of debt-fi	inanced property			or allocable to debt- financed property	(a) Straight line depreciatio (attach schedule)		(b) Other deductions (attach schedule)		s
(1)								7 	
(2)									
(3)							7		
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-final	adjusted basis dlocable to nced property i schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8 Allocable deduction of x total of column 6 x total of column 3(a) and 3(b))	
(1)		,——		%			1		
(2)				%					
(3)				%					
(4)			1	%					
						nter here and on page 1, lart I, line 7, column (A)		Enter here and on page Part I, line 7, column (B	
Totals				•		0			0.
Total dividends-received deductions in	cluded in column	8	·			•			0.

•		Exe	mpt Controlled Organizations .							
Name of controlled organiza	:dent		Net unrelated income (loss) (see instructions) 4. 1		otal of specified rments made	5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5		
(1)										
(2)			3							
(3)			· · · · ·							
(4)					•					
Nonexempt Controlled Organ	nizations				,	·	1	_ 		
7. Taxable Income	8. Net unrelated inco (see instruction		Total of specified pay made	ments	in the controlli	mn 9 that is included ing organization's s income	11. Dec with	ductions directly connected income in column 10		
(1)							,	* *		
(2)		•			*					
(3)						•				
(4)			<u> </u>		2	· · ·				
					Enter here and	nns 5 and 10 on page 1, Part I, column (A)	Enter he	d columns 6 and 11 are and on page 1, Part I, one 8, column (B)		
Totals		-	•			0.		. 0		
Schedule G - Investme	ent Income of a	Section 501	(c)(7), (9), or	(17) Oı	rgaṇization			•		
	cription of income	·	2. Amount of	income	3. Deduction directly connectatach sched	nected 4. Set-asides		5. Total deductions and set-asides (col 3 plus col 4)		
(1)					_ +			(60: 6 2:36 65: 1)		
(2)										
(3)										
(4)										
otals		····	Enter here and of Part I, line 9, co	0 •				Enter here and on page Part I, line 9, column (B)		
Schedule I - Exploited (see instru		/ Income, O	ther Than Ad	vertisi	ng Income	1				
1. Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expenses directly connecte with production of unrelated business income	minus column	trade or lumn 2 n 3) If a cols 5	5. Gross inconfrom activity the is not unrelate business inconfiguration.	nat attribut	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)	-									
(2)										
(3)							_			
(4)										
otals •	Enter here and on page 1, Part I, line 10, col (A)	Enter here and or page 1, Part I, line 10, col (B)						Enter here and on page 1, Part II, line 25		
Schedule J - Advertisii			0.4.		్డికి ఇట్ కు చెక్కా	<u>". • = " </u>		1 0.		
	Periodicals Rep		onsolidated	Basis						
· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		T		-			
1. Name of periodical	2 Gross advertising income	3. Direct advertising of		l 2 minus in, computi	5. Circulation income	on 6. Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)		
1)			1 2 4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1.	The same of the sa		
2)				⁶⁷ -4 <u>1.</u> 1. 2 * 7. 2. 1. 1	÷		.,			
3)							٠, ي			
4)			× 3. \$		rs		-			
		1.			.					
tals (carry to Part II, line (5))	▶	0.	0.		1			0		
								Form 990-T (2010		

Form 990-T (2019) GREATER HOUSTON COMMUNITY FOUNDATION 23-71604

Part II. Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in

columns 2 through 7	on a	line-by-line	basis)
---------------------	------	--------------	--------

Name of periodical		2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				1	***************************************		
(2)							
(3)	-		,	-			
(4)	-	-	-				- · · · -
Totals from Part I	•	0.	0.	rest of the second		y may y y may y may a	0.
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, cot (B).				Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	▶	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	0.

Form 990-T (2019)

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
•		
DESCRIPTION		AMOUNT
ACCOUNTING SERVICES		594.
COMPUTER AND OTHER EQUIPMENT		1,421.
COMPUTER NETWORK SUPPORT		5,291.
CONSULTING-PROGRAM		608.
CONTRACT LABOR		546.
FEES & LICENSES		38.
MARKETING/PR MATERIALS		65.
MEETINGS, LUNCHES & DINNERS		473.
OVERHEAD ALLOCATION		-14,788.
PAYROLL PROCESSING		5,890.
POSTAGE AND SHIPPING		34.
RENT		6,949.
SOFTWARE LICENSES & SUPPORT		6,181.
TELEPHONE & COMMUNICATIONS		2,315.
TRAVEL		306.
WEBSITE DESIGN / MAINT		143.
TOTAL TO FORM 990-T, PAGE 1, LIN	≅ 27	16,066.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an **Unrelated Trade or Business**

ENTITY						
	OMB No					

Employer identification number

23-7160400

1545-0047

1

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

GREATER HOUSTON COMMUNITY FOUNDATION

For calendar year 2019 or other tax year beginning

Open to Public Inspection for 501(c)(3) Organizations Only

523000 Unrelated Business Activity Code (see instructions) Describe the unrelated trade or business ► INVESTING GROUP Part | Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance ▶ 1c 2 Cost of goods sold (Schedule A, line 7) 2 Gross profit Subtract line 2 from line 1c 3 547 Capital gain net income (attach Schedule D) 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 3 STATEMENT 4 -77,506-77,506. 5 6. Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 11 Advertising income (Schedule J) 11 12 Other income (See instructions, attach schedule) 12 13 Total. Combine lines 3 through 12 13 -76.959Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 14 15 Salaries and wages 15 Repairs and maintenance 16 16 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 18 19 Taxes and licenses 19 Depreciation (attach Form 4562) 20 . j. j Less depreciation claimed on Schedule A and elsewhere on return 21 21b 22 22 23 Contributions to deferred compensation plans 23 24 Employee benefit programs 24 25 Excess exempt expenses (Schedule I) 25 26 Excess readership costs (Schedule J) 26 27 Other deductions (attach schedule) 27 28 Total deductions. Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see STMT Unrelated business taxable income Subtract line 30 from line 29 LHA For Paperwork Reduction Act Notice, see instructions. Schedule M (Form 990-T) 2019

FORM 990-T (M) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 3
DESCRIPTION	NET INCOME OR (LOSS)
ARTHUR STREET FUND II, LP - ORDINARY BUSINESS INCOME	
(LOSS)	297.
ENERGY TRANSFER LP - ORDINARY BUSINESS INCOME (LOSS) ENERGY TRANSFER LP - INTEREST INCOME	-5,344.
MAGELLAN MIDSTREAM PARTNERS LP - ORDINARY BUSINESS INCOME	125.
(LOSS)	-4,075.
THE BLACKSTONE GROUP, LP - ORDINARY BUSINESS INCOME	-,
(LOSS)	1.
USCA ALL TERRAIN FUND - ORDINARY BUSINESS INCOME (LOSS)	179.
USCA ALL TERRAIN FUND - OTHER INCOME (LOSS)	88.
THE BUCHANAN FUND IV LLC - NET RENTAL REAL ESTATE INCOME PACIFIC LAKE PARTNERS FUND TWO, LP - ORDINARY BUSINESS	2,127.
INCOME (LOSS)	-66,229.
QUIK-WAY RETAIL ASSOCIATES HOLDINGS II, LTD - ORDINARY	00,2231
BUSINESS INCOME (LOSS	-13,210.
QUIK-WAY RETAIL ASSOCIATES HOLDINGS II, LTD - NET RENTAL	
REAL ESTATE INCOME	2,123.
QUIK-WAY RETAIL ASSOCIATES HOLDINGS II, LTD - OTHER NET RENTAL INCOME (LOSS)	-683.
ANACAPA PARTNERS II LP - ORDINARY BUSINESS INCOME (LOSS)	-20,911.
ANACAPA PARTNERS II LP - OTHER INCOME (LOSS)	-1,569.
SEARCH FUND PARTNERS 5, LP - ORDINARY BUSINESS INCOME	_,,,,,,
(LOSS)	-13.
SEARCH FUND PARTNERS 6, LP - ORDINARY BUSINESS INCOME	
(LOSS)	460.
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5	-106,634.
FORM 990-T (M) INCOME (LOSS) FROM S CORPORATIONS	STATEMENT 4
	NET INCOME
DESCRIPTION	OR (LOSS)
TEXAS INDEPENDENT BANCSHARES, INC - ORDINARY BUSINESS	
INCOME (LOSS)	27,154.
TEXAS INDEPENDENT BANCSHARES, INC - INTEREST INCOME	1,219.
TEXAS INDEPENDENT BANCSHARES, INC - DIVIDEND INCOME	690.
TEXAS INDEPENDENT BANCSHARES, INC - ROYALTIES	65.
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5	29,128.
·	

SCHEDULE M	NET	OPERATING LOSS I	DEDUCTION	STATEMENT 5
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	74,946.		74,946.	74,946.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	74,946.	74,946.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

ENT	ITY
	ОМЕ

Employer identification number

23-7160400

B No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning

GREATER HOUSTON COMMUNITY FOUNDATION

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only ,

	Describe the unrelated trade or business ANGELES G		FUND,	LLC			
Pa	rt I Unrelated Trade or Business Income			ncome	(B) Expense	es	(C) Net
1 a	Gross receipts or sales .	<u> </u>			A. 10 17 17		* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Less returns and allowances c Balance ▶	1c				- ""	
2	Cost of goods sold (Schedule A, line 7)	2			Topic of the state	`*	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	Gross profit Subtract line 2 from line 1c	3			4	· s* ~	
4 a	Capital gain net income (attach Schedule D)	4a		0.		7 12 11	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				- F	
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 6	5		6,213.		', ',	6,213.
6	Rent income (Schedule C)	6					
7	Unrelated debt-financed income (Schedule E)	7					
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9					
10	Exploited exempt activity income (Schedule I)	10	•				
11	Advertising income (Schedule J)	11					
12	Other income (See instructions; attach schedule)	12			13 X X	, ",	
13	Total. Combine lines 3 through 12	13		6,213.			6,213.
14	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in Compensation of officers, directors, and trustees (Schedule K)	ncom	ne.)				Thust be
15	Salaries and wages			•		14	
16	Repairs and maintenance					15	
17	Bad debts	•		•		16	
18	Interest (attach schedule) (see instructions)					17	
19	Taxes and licenses					18 19	
20	Depreciation (attach Form 4562)	•		20		19	
21	Less depreciation claimed on Schedule A and elsewhere on return			21a		21b	
22	Depletion			Zia		22	
23	Contributions to deferred compensation plans			٠		23	
24	Employee benefit programs				i	24	
25	Excess exempt expenses (Schedule I)				-	25	
26	Excess readership costs (Schedule J)		•		•	26	
27	Other deductions (attach schedule)	•				27	
28	Total deductions. Add lines 14 through 27			•	-	28	0.
	Unrelated business taxable income before net operating loss deduced	otion (Subtract lin	a 28 from ho	a 13	29	6,213.
	Deduction for net operating loss arising in tax years beginning on o				5 13	29	<u> </u>
	instructions)	aitel	January I,		STMT 7	30	
	Unrelated business taxable income Subtract line 30 from line 29			·	DIMI /	30 31	5,927.
<u> </u>	STANDARD SECTION (ANADIC INCOME CODURACT INTE OF HOME 29					3 I	

FORM 990-7	r (M)	INCOM	ME (LOSS) FROM P	ARTNERSHIPS	STATEMENT	
DESCRIPTIO	ON				NET INCOM	
BUSINESS I	NCOME (I	CO	UNITIES FUND, LL UNITIES FUND, LL			10.
INCOME (LO		JIII OFFORIC	MITTES FOND, DD	C - OTHER	6,2	23.
TOTAL INCI	TODED ON	SCHEDULE M,	PART I, LINE 5		6,2	13.
SCHEDULE M			PART I, LINE 5 OPERATING LOSS		6,2 STATEMENT	13.
SCHEDULE M	ſ					
	ſ	NET	OPERATING LOSS LOSS PREVIOUSLY	DEDUCTION LOSS	STATEMENT AVAILABLE THIS YEAR	

Department of the Treasury

Name of the organization

Internal Revenue Service

Employer identification number

23-7160400

3

OMB No 1545-0047

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

GREATER HOUSTON COMMUNITY FOUNDATION

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

	Jurelated Business Activity Code (see instructions) ► <u>52300</u> Describe the unrelated trade or business ► GARRISON		CIAL OPPORTU	NITIES		
	t l Unrelated Trade or Business Income		(A) Income	(B) Expense	 es	(C) Net
1a	Gross receipts or sales				گرید یا	
b	Less returns and allowances c Balance	1c				
2	Cost of goods sold (Schedule A, line 7)	2		3 - 4 - Si		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	Gross profit. Subtract line 2 from line 1c	3			, ' .	
4 a	Capital gain net income (attach Schedule D)	4a		2 5 3 3 4 4 5 6 5 7	# [*] : 	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2101	
c	Capital loss deduction for trusts	4c			* ',"	
5	Income (loss) from a partnership or an S corporation (attach		412 222	7 1 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1, "	412 222
_	statement) STATEMENT 8	5	-413,223.	To Not the state of the state o		-413,223.
6	Rent income (Schedule C)	6_				
7	Unrelated debt-financed income (Schedule E)	7		ļ		
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8	·	·		
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10		 		
11	Advertising income (Schedule J)	11		g who are to a	, ,, ,,	
12	Other income (See instructions, attach schedule)	12	440.000		`,.']	
<u>13</u> _	Total. Combine lines 3 through 12	13	<u>-413,223.</u>	<u> </u>		-413,223.
	Deductions Not Taken Elsewhere (See instruct directly connected with the unrelated business in	ncom	e.)		1	Tono must be
14	Compensation of officers, directors, and trustees (Schedule K)		•		14	
15	Salaries and wages				15	ļ <u>.</u>
16	Repairs and maintenance				16	
17	Bad debts .			•	17	
18	Interest (attach schedule) (see instructions)				18_	·····
19	Taxes and licenses :		. 1 1		19	
20	Depreciation (attach Form 4562)		20			
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	
22	Depletion		,		22	
23	Contributions to deferred compensation plans		. • . •		23	
24	Employee benefit programs .	•			24	<u> </u>
25	Excess exempt expenses (Schedule I)		•		25	<u> </u>
26	Excess readership costs (Schedule J)		•		26	
27	Other deductions (attach schedule)				27	
28	Total deductions. Add lines 14 through 27			•	28	0.
29	Unrelated business taxable income before net operating loss deduction	ction.	Subtract line 28 from lin	e 13	29	-413,223.
30	Deduction for net operating loss arising in tax years beginning on o	r after	January 1, 2018 (see			
	instructions)			STMT 9	30	0.
<u>31</u> _	Unrelated business taxable income Subtract line 30 from line 29				31	-413,223.
LHA	For Paperwork Reduction Act Notice, see instructions.			s	chedu	le M (Form 990-T) 2019

FORM 990-T (M)	INCOME (LOSS) FROM P	ARTNERSHIPS	STATEMENT	8
DESCRIPTION			NET INCOME OR (LOSS)	
GARRISON SPECIAL OPPORTUNORDINARY BUSINESS INCOME	NITIES INSTITUTIONAL	FU -	-413,22	3.
TOTAL INCLUDED ON SCHEDUI	TO M DADM T TIME E	•	442 00	
TOTAL TROBUBLE ON BUILDON	LE M, PART I, LINE 5		-413,22	3.
SCHEDULE M	NET OPERATING LOSS		STATEMENT	9
	NET OPERATING LOSS LOSS PREVIOUSLY			-
SCHEDULE M	NET OPERATING LOSS LOSS PREVIOUSLY ED APPLIED	DEDUCTION LOSS	STATEMENT	9

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an **Unrelated Trade or Business**

ENTITY	Z

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Open to Public Inspection for 501(c)(3) Organizations Only

GREATER HOUSTON COMMUNITY FOUNDATION 23-7160400 Unrelated Business Activity Code (see instructions) 523000 Describe the unrelated trade or business PACIFIC LAKE PARTNERS FUND ONE, LP Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance 10 Cost of goods sold (Schedule A, line 7) 2 Gross profit Subtract line 2 from line 1c 3 Capital gain net income (attach Schedule D) 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 10 4,605 4,605. 5 Rent income (Schedule C) 6 6 7 Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions, attach schedule) 12 12 4,605 Total, Combine lines 3 through 12 605. 13 Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 15 Salaries and wages 15 Repairs and maintenance 16 16 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 18 19 Taxes and licenses 19 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 21a 21b 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs 24 25 Excess exempt expenses (Schedule I) 25 26 Excess readership costs (Schedule J) 26 27 Other deductions (attach schedule) 27 28 Total deductions. Add lines 14 through 27 0. 28 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 4,605. 29 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see Unrelated business taxable income Subtract line 30 from line 29 LHA For Paperwork Reduction Act Notice, see instructions. Schedule M (Form 990-T) 2019

	~~~~		~ ~	
•	GREATER	HOUSTON	COMMUNITY	FOUNDATION

23-7160400

FORM 990-T (M) INCOME (L	OSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION		NET INCOME OR (LOSS)
PACIFIC LAKE PARTNERS FUND ONE, LINCOME (LOSS)	- ORDINARY BUSINESS	4,605.
TOTAL INCLUDED ON SCHEDULE M, PAR	'I, LINE 5	4,605.

Employer identification number

5

SCHEDULE M (Form 990-T)

# Unrelated Business Taxable Income from an Unrelated Trade or Business

0040

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning _______, and ending

▶ Go to www.irs.gov/Form990T for instructions and the latest information.
 ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

	GREATER HOUSTON COMMUNI	TY	FOUNDATION	23-71	604	00
_ i	Unrelated Business Activity Code (see instructions)   52300	0	-			
	Describe the unrelated trade or business   LC MACANT	'A	· · · · · · · · · · · · · · · · · · ·			
Pa	rt I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1 a	Gross receipts or sales					,*
b	Less returns and allowancesc Balance ▶	1c			. ,-	
2	Cost of goods sold (Schedule A, line 7)	2		4,2	<u>, 1</u> .	X 3
3	Gross profit. Subtract line 2 from line 1c	3			*	
4 a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				<u> </u>
С	Capital loss deduction for trusts	4c			· `- '	
5	Income (loss) from a partnership or an S corporation (attach	Ì		, , , , , , , , , , , , , , , , , , , ,		•
	statement)	5		*	,	
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				<u> </u>
-8	Interest, annuities, royalties, and rents from a controlled				Ì	
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10		•		
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12		,	. ' "a	
13 _	Total, Combine lines 3 through 12	13	0.			
	Deductions Not Taken Elsewhere (See instruct directly connected with the unrelated business in Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	····
16	Repairs and maintenance				16	······································
17	Bad debts		•	3	17	
18	Interest (attach schedule) (see instructions)		•		18	
19	Taxes and licenses		•	•	19	····
20	Depreciation (attach Form 4562)		20			
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	4
22	Depletion	` •	( <del>214</del> )		22	
23	Contributions to deferred compensation plans			•	23	
24	Employee benefit programs			•	24	
25	Excess exempt expenses (Schedule I)	•	•	•	25	<del></del>
	Excess readership costs (Schedule J)			•	26	
27	Other deductions (attach schedule)				27	
28	Total deductions. Add lines 14 through 27	•			28	0.
	Unrelated business taxable income before net operating loss deductions.	ction :	Subtract line 28 from line	e 13	29	0.
30	Deduction for net operating loss arising in tax years beginning on o			•	23	
	instructions)	. 41101	, , 2010 (000	STMT 11	, ,	0.
31 _	Unrelated business taxable income Subtract line 30 from line 29	•		2 11	31	<del>`</del>
LHA				· So		e M (Form 990-T) 2019

SCHEDULE M	NET	OPERATING LOSS	DEDUCTION	STATEMENT	11
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/18	71.		71.	7	1.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	71.	7	1.

## SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

➤ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-RIC, 1120-SF, or certain Forms 990-T.

➤ Go to www.irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

Name

Employer identification number

GREATER HOUSTON	COMMUNITY FOUND	ATION		23-71	60400
Did the corporation dispose of any inve	estment(s) in a qualified opportu	inity fund during the tax		<b>•</b>	Yes X No
If "Yes," attach Form 8949 and see its			our gain or loss		
Part 1 Short-Term Capita	I Gains and Losses (See	instructions.)			
See instructions for how to figure the amouto enter on the lines below.	ints (d)	(e)	(g) Adjustments to gain		h) Gain or (loss) Subtract
This form may be easier to complete if you	Proceeds (sales price)	(e) Cost (or other basis)	or loss from Form(s) 8949 Part I, line 2, column (g)	), coi	ing Gain or (loss) Subtract lumn (e) from column (d) and bine the result with column (g)
round off cents to whole dollars	(Sales price)	(or other basis)	Part I, Ime 2, Column (g)	Com	ine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which bas was reported to the IRS and for which y have no adjustments (see instructions). However, if you choose to report all the transactions on Form 8949, leave this liblank and go to line 1b	ou se				·
1b Totals for all transactions reported on					•
Form(s) 8949 with Box A checked					····
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment	sales from Form 6252, line 26 or 3	7.		4	
5 Short-term capital gain or (loss) from like	e-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach co	mputation)			6 (	<u> </u>
7 Net short-term capital gain or (loss). Co			•	7	
Part II Long-Term Capital		nstructions)			
See instructions for how to figure the amou to enter on the lines below	nts (d)	(e)	(g) Adjustments to gain	_   ₍₁	h) Gain or (loss) Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	(e) Cost (or other basis)	or loss from Form(s) 8949 Part II, line 2, column (g)	. Icoli	umn (e) from column (d) and oine the result with column (g)
8a Totals for all long-term transactions report on Form 1099-B for which basis was reported to the IRS and for which you had no adjustments (see instructions). Hower if you choose to report all these transact on Form 8949, leave this line blank and gline 8b	ive ver, ions			1 m	
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked .					
9 Totals for all transactions reported on				ļ	
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on			•		
Form(s) 8949 with Box F checked					
11 Enter gain from Form 4797, line 7 or 9	-			11	<u> </u>
12 Long-term capital gain from installment	sales from Form 6252, line 26 or 3	7.		12	
13 Long-term capital gain or (loss) from like	e-kind exchanges from Form 8824			13	
14 Capital gain distributions	-			14	
15 Net long-term capital gain or (loss). Cor		n h		15	<del></del>
Part III   Summary of Parts I	and II				
16 Enter excess of net short-term capital ga	ın (lino 7) over net long-term capita	l loss (line 15)		16	
17 Net capital gain. Enter excess of net long		•	ne 7)	17	
18 Add lines 16 and 17. Enter here and on F	form 1120, page 1, line 8, or the pro	oper line on other returns		18	0.
Note: If losses exceed gains, see Capital	Losses in the instructions.				

# SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www irs.gov/Form1120 for instructions and the latest information

Name

Employer identification number

• • • • • • • • • • • • • • • • • • • •	nity fund during the tax			
		cyear?	•	▶  Yes  No
	ements for reporting yo	our gain or loss		
d Losses (See	instructions.)		,	
(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part Line 2, column (	มก 49, (a)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g
		7 a.c.,	.97	Service and result with columning
	·			
		•		
	-			
				-
-	,			
m 6252, line 26 or 37	7		4	
	• •	•		
				(
through 6 in column	h		7	
		_		<del></del>
				T
(d) Proceeds (sales price)	(6) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 894 Part II, line 2, column (	in 49, g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	• , • =			
				,
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				,
				,
			The second secon	
,				,
,				,
			11	547.
n 6252, line 26 or 37			12	547.
n 6252, line 26 or 37 es from Form 8824			12 13	547.
es from Form 8824			12 13 14	
			12 13	547.
es from Form 8824 hrough 14 in column	.h		12 13 14 15	
es from Form 8824 hrough 14 in column net long-term capital	h loss (line 15)	ne 7)	12 13 14 15	547.
es from Form 8824 hrough 14 in column net long-term capital iin (line 15) over net	loss (line 15) short-term capital loss (lin		12 13 14 15 16 17	547.
es from Form 8824 hrough 14 in column net long-term capital iin (line 15) over net	h loss (line 15)		12 13 14 15	547.
	(d) Proceeds (sales price)  m 6252, line 26 or 37 les from Form 8824  through 6 in column  I Losses (See ii  (d) Proceeds	m 6252, line 26 or 37 les from Form 8824  through 6 in column h  I Losses (See instructions )  (d) Proceeds (e) Cost	(d) (e) (cost (or other basis) (g) Adjustments to go rioss from Form(s) 89 Part I, line 2, column (g)	(d) (e) (cost (or other basis) (galaxy part   line 2, column (g) (g) Adjustments to gain or loss from Form(s) 8949, Part   line 2, column (g)

LHA