	F	orm 990-T	990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))							OMB No. 1545-0047		
For calendar year 2019 or other tax year beginning										2019		
				-	-							
	Depar	rtment of the Treasury all Revenue Service	ľ		to www.irs.gov/Form990T fo				Open to Pu	blic Inspection for		
•	_		► Do 1	not er	nter SSN numbers on this form as it				ion is a 501(c)(3)		501(c)(3) O	rganizations Only
	A L	Check box if address changed	ı				changed and see instruct		T (E	Employees' tr	ntification number rust, see	
•		xempt under section	n Pri	nt 📙	The Cynthia & Georg	ge M	itchell Four		structions.)	_		
	2	<u>₹</u> 501(c) <u>_</u> (23_)	.	or	2700 Technology For The Woodlands, TX	rest	BTAG #500				74-217	
	L	408(e)	9	pe	The woodlands, IX	1130	1				I nrelated bu s See instructio	siness activity code ons.)
	L	_ 408A	a)									
	L	529(a)										
		Book value of all assets at end of year F Group exemption number (See instructions.)▶										
		536, 164, 394	. G Ch	ieck	organization type 🟲 🛚 🗓	501 (c	c) corporation]501(c)	trust 4	101 (a)	trust	Other trust
•	H E	Enter the number of the	he organizat	ion's	unrelated trades or businesses		▶1	Desc	ribe the only (or first)	unrelated	
		trade or business he							If	only or	ne, compl	ete Parts I-V.
					in the blank space at the end		previous sentenc	e, comp	lete Parts I a	nd II, d	complete a	a Schedule M
-					s, then complete Parts III-V.						_ 	
		-		-	ation a subsidiary in an affilia	_	-	ubsidiary	controlled gr	oup?	► ∐ ١	res XNo
_					ing number of the parent cor	poration	on ►	 				
į		The books are in care			s Vassilakis			Tele	phone numbe	r► 71	<u> 13-377-</u>	<u>-5069</u>
L	Pai				isiness Income		(A) Income		(B) Expens	es	C) Net	
	1 a	Gross receipts or s	sales									
	Ł	Less returns and allowa			c Balance►	1c					l	
	2	Cost of goods sold	(Schedule	A, li	ne 7)	2						
	3	Gross profit. Subtra	rom l	ine 1c	3							
	4 a	a Capital gain net in	come (attac	ch S	chedule D)	4a						
	t	Net gain (loss) (Form 4)	797, Part II, III	ne 17)	(attach Form 4797)	4b						
	C					4c						
	5	Income (loss) from	a partnershi _l	p or a	an S corporation							
	6	•	-						and the second			
	7			-	Schedule E)	7		-11	<u> </u>	115 13		
	8		-		a controlled organization (Schedule F)	8	·		CO CONTRACTOR OF THE PERSON OF			
	9				9), or (17) organization (Schedule 6).	9			S NOV P	7 20	ာ ၁	
	10		-		(Schedule I)	10			m 1.00 0	3 / ()	5	
	11	-	•		•••••	11			OCT	-11	7	
	12	Other income (See	instruction	ıs; a	ttach schedule)			'-			1	
						12						
_	13							0.		0.		0.
[Par	t II Deduction	is Not Ta	ken	Elsewhere (See instru	ctions	s for limitations	s on de	eductions.)	(Dedu	uctions	must be
_					the unrelated business					, _ .		
	14				s, and trustees (Schedule K)					14		
	15	-								15		
721	16	•								16		
7	17				• • • • • • • • • • • • • • • • • • • •					17		
_	18	•			tructions)					18		
2	19	·								19	L	
Z	20	Depreciation (attac		20								
JAN	21	Less depreciation claimed on Schedule A and elsewhere on return								21b		
	22	Depletion								22	1	
	23									23		
=	24	Employee benefit p	Imployee benefit programs									
CANNE	25	Excess exempt exp				25						
Ş	26			∍ J)			26	-				
~7	27									27	 	
	28				ough 27					28	1	
	29				e before net operating loss de					29		
	30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions).									<u> </u>	
	31	Unrelated business	taxable in	come	e. Subtract line 30 from line 2	9		. <u>.</u>		31	Ī	0.

BAA For Paperwork Reduction Act Notice, see instructions.

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			74-2	170127	Page 2
Pai	<u>t III</u>	Total Unrelated Business Taxable Income			
32		of unrelated business taxable income computed from all unrelated trades or businesses (see actions)	32	,	0.
33		unts paid for disallowed fringes.	`		
		•			
34		table contributions (see instructions for limitation rules)		<u> </u>	
35		unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 froum of lines 32 and 33			0.
36	Deduct	tion for net operating loss arising in tax years beginning before January 1, 2018 (see instr.)	36	3	
37	Total	of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	. 37	,	0.
38		ific deduction (Generally \$1,000, but see line 38 instructions for exceptions)			
39	Unre	lated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, the smaller of zero or line 37.			0.
Par		Tax Computation			
40	_	nizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	4 0	Y 1	0.
41		as Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount	T	<u> </u>	
71			► 41	_	
42		y tax. See instructions	42		
42		native minimum tax (trusts only)			
43		· · · · · · · · · · · · · · · · · · ·			
44		on Noncompliant Facility Income. See instructions.			
45		Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	<u> </u>	0.
		Tax and Payments			
		gn tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a		ł	
		credits (see instructions)			
		ral business credit. Attach Form 3800 (see instructions)			
		t for prior year minimum tax (attach Form 8801 or 8827) 46d		_	
е		credits. Add lines 46a through 46d	46	e	0.
47	Subtr	act line 46e from line 45	47	<u>' </u>	0.
48		taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866			
		Other (attach schedule)	48		
49	Total	tax. Add lines 47 and 48 (see instructions).	49		0.
50	2019	net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50		
51 a	Pavm	nents: A 2018 overpayment credited to 2019			
	-	estimated tax payments. 51b 2,100	5.	1	
		leposited with Form 8868	7	1	
		gn organizations: Tax paid or withheld at source (see instructions)	\neg	1	
е	Backı	up withholding (see instructions)	7		
f	Credi	t for small employer health insurance premiums (attach Form 8941) 51 f			
g	Other	credits, adjustments, and payments: Form 2439	\neg		
		orm 4136 ☐ Other Total . ► 51 g			
52	Total	payments. Add lines 51a through 51g	52	-	2,100.
53		nated tax penalty (see instructions). Check if Form 2220 is attached	53	<u> </u>	
54		lue. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	▶ 54		
55		payment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.	► 55		2 100
		•			2,100.
56	_		► 56	<u> </u>	2,100.
	t VI				TV 1
57		y time during the 2019 calendar year, did the organization have an interest in or a signature or other authority			Yes No
		cial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinC	ENFO	rm 114,	
		t of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country here $ ightharpoonup ightharpoonup$. X
58	Durin	g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor t	o, a fo	reign trust?.	X
	If 'Yes	s,' see instructions for other forms the organization may have to file.			
59	Enter	the amount of tax-exempt, interest received or accrued during the tax year ▶ \$ 0.			
		Under penalties of perjury), declare that I have examined this return, including accompanying schedules and statements, and to the be belief, it is true correctly and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has	st of my	knowledge and	
Sign	1	l. / (//a=/18/.41.4)		the IRS discuss t	his return with
Here	Đ	1000000	the r	oreparer shown be	elow (see
		Signature/of officer Date Title	"150"	Y X	'es 📙 No
		Print/Type preparer's name Preparer's signature Date Check	ıf	PTIN	
Paid		Jody Blazek 10/27/2020 self-employ		P0007267	14
Pre-		Firm's name Blazek & Vetterling Firm's Park & Firm's EIN		-0269860	
pare Use		Firm's address 2900 Weslayan, Suite 200		0203000	
Only				7121 420	_5720
BAA	<u>'</u>	Houston, TX 77027 Phone no.		(713) 439	90-T (2019)
DWW		TEEA0202L 02/21/20		1 01111 3	4 0-1 (2017)

- ,									
Form 990-T (2019) The Cynthia					74	-217	0127	Р	age 3
Schedule A — Cost of Goods Sol									
1 Inventory at beginning of year		6		-	end of year	6			
2 Purchases		7	Cost of	good	Is sold. Subtract				
3 Cost of labor			and in	Part I,	om line 5. Enter here				
4 a Additional section 263A costs (attach schedule	· _					ــــــــــــــــــــــــــــــــــــــ		Yes	No
b Other costs		8	Do the rules		of section 263A (with		respect to		
(attach sch)	4b		propert	y proc	luced or acquired fo	le) apply			
5 Total. Add lines 1 through 4b					zation?				X
Schedule C — Rent Income (Fron	n Real Property and	d Personal Pr	operty	Leas	sed With Real P	roper	ty) (see ir	nstructi	ons)
1 Description of property									
(1)									
(2)									
(3)				_					
(4)									
2 Rent	received or accrued				3/a) Deduction	e direc	thy connec	tod wit	h
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	al (if the perco	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)			
(1)									
(2)									
(2)									
(4)									
Total	Total								
(c) Total income. Add totals of columns 2 here and on page 1, Part I, line 6, column	n (A) ▶				(b) Total deductions. here and on page 1, Pa I, line 6, column (B)	Enter rt ►			
Schedule E — Unrelated Debt-Fin	anced Income (see	instructions)							
1 Description of debt-finance	2 Gross income or allocable to		3 De	Deductions directly connected with or allocable to debt-financed property					
i Description of dest-infance	a property	financed property			(a) Straight line preciation (attach sch) (b) Other (attach s			duction hedule	ns)
(1)		· ·				—			
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5 Ave or allo property	6 Column divided b column 5	y		7 Gross income eportable (column 2 x column 6) 8 Allocable deduction (column 6 x total of columns 3(a) and 3(b)			of		

(1) (2) (3) (4) 윻 Enter here and on page 1, Enter here and on page 1, Part I, line 7, column (A). Part I, line 7, column (B). Total dividends-received deductions included in column 8

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Schedule, - Interest, A	Tillulues, N				rganizations		Organ		(see in	Suucuon		
1 Name of controlled organization	2 Employ identificat number	rer 3	3 Net unrelate income (loss) (see instruction		4 Total of spec				ncluded ntrolling zation's	in c	6 Deductions directly connected with income in column 5	
(1)						_						
(2)	 											
(3)							-					
(4)							Ī					
Nonexempt Controlled Organiz	ations							-				
7 Taxable Income	income (Net unrelated locome (loss) e instructions)		9 Total of specified payments made		included in t		column 9 that is the controlling n's gross income		connecte	ctions directly ed with income olumn 10	
(1)												
(2)												
(3)												
(4)							·					
Totals					here ar	nd on 8, co	page 1, olumn (/	•	here	e and on p 8, co	s 6 and 11. Enter page 1, Part I, line lumn (B).	
Schedule G - Investme	nt Income o	f a Sectio	n 501(c)(7), (9), or (17)	Orga	nizatio	n (see in:	struction	ns)		
1 Description of income		2 Amount of income		dire:	Deductions	eductions y connected		4 Set-asides (attach schedu		5 Tota set-a	otal deductions and -asides (column 3 plus column 4)	
(1)										<u> </u>		
(1) (2) (3)												
(3)												
(4)					····							
Tabele	Part I,	Enter here and on page 1, Part I, line 9, column (A).								Enter here and on page 1 Part I, line 9, column (B).		
Totals		vih e Imaan	04	The	n A discouti	al	<u> </u>	<u> </u>	A	<u> </u>		
Schedule I — Exploited I							T				T	
1 Description of exploited a	activity b	unrelated conr business pro income from of		ises directly ected with duction nrelated ess income	from unrelate or business (2 minus colui	Net income (loss) rom unrelated trade r business (column minus column 3). If a gain, compute plumns 5 through 7.		5 Gross income from activity that is not unrelated business income		penses Itable to Imn 5	7 Excess exempt expenses (column 6 minus column 5, bu not more than column 4).	
(1)			 								 	
(2)			†		_		 				 	
(3)			 -	_								
(4)											 	
	o Pai	er here and n page 1, t I, line 10, blumn (A).	age 1, on p			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			Enter here and on page 1, Part II, line 25.	
Totals	· · · · Pl	 -	<u> </u>		<u> </u>						<u> </u>	
Schedule J – Advertisin												
Part I Income From Pe											· · · · · · · · · · · · · · · · · · ·	
1 Name of periodica	ac	advertising adv		Direct ertising osts	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		5 Circulation income		6 Readership costs		7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).	
(1)			<u> </u>				<u> </u>				4	
(2)					1		├				-	
(3)	-		 		1		<u> </u>				1	
			 -				 		-		 	
Totals (carry to Part II, line (5)) ▶											
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Page 5 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.) 4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4). 2 Gross 3 Direct 5 Circulation 6 Readership advertising advertising costs income 1 Name of periodical income costs (1) (2) (3) (4) Totals from Part I...... Enter here and Enter here and Enter here and on page 1, Part II, line 26. on page 1, Part I, line 11, on page 1, Part I, line 11, column (B). column (A) Totals, Part II (lines 1-5).... Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of 4 Compensation attributable 2 Title time devoted to unrelated business 1 Name to business 윰 용 용 융 Total. Enter here and on page 1, Part II, line 14.....

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