Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u> </u>	For the 2	2021 calend	dar year, or tax year beginning	, 2021, and end	ing		, 20			
В	Check if a	pplicable:	C Name of organization PRESERVATION TEXAS,	INC.		D Emplo	yer identification number			
X	Address c	hange	Doing business as			75-21	29913			
	Name cha	nge	Number and street (or P.O. box if mail is not delivered to street	eet address)	Room/suite	E Telepho	one number			
$\overline{\Box}$	Initial retur	m	PO BOX 3514			(512)	472-0102			
$\overline{\Box}$	Final return	n/terminated	City or town, state or province, country, and ZIP or foreign p	ostal code		,				
=	Amended		SAN MARCOS, TX 78667			G Gross	receipts \$ 178,806.			
=	Application		F Name and address of principal officer:		H(a) Is this a gro		p return for subordinates? Yes X No			
	, ippout.o.		EVAN THOMPSON, PO BOX 3514, SAN M	ARCOS. TX 78	1					
	Tax-exem			4947(a)(1) or 527			t. See instructions.			
			RESERVATIONTEXAS.ORG		H(c) Group e					
			Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of for	, , ,		of legal domicile: TX			
	art I	Summai		2 1001 01101	1000	III Otato (or logar dornlone. 111			
			cribe the organization's mission or most significar	at activities: DDEC	EDVAMION MEN	AC TC	MUE ADVOCAME EOD			
Φ	1		ING THE HISTORIC RESOURCES OF TEX							
Governance							CI, BUARD			
ű			MENT, ORGANIZATIONAL VISIBILITY, box ► ☐ if the organization discontinued its ope				ita nat agasta			
Š	1			-		3				
<u>م</u>	I		voting members of the governing body (Part VI, li				15			
Š	1		independent voting members of the governing be	• •	•	4	15			
Ĭŧ	1		per of individuals employed in calendar year 2021			5	1			
Activities	1		per of volunteers (estimate if necessary)			6	50			
⋖	1		ated business revenue from Part VIII, column (C),			7a	0.			
	b N	Net unrelat	ted business taxable income from Form 990-T, Pa	art I, line 11		7b	0.			
Revenue				Prior Yea		Current Year				
			ons and grants (Part VIII, line 1h)	560.	135,495.					
	I		ervice revenue (Part VIII, line 2g)		075.	0.				
ž	1		income (Part VIII, column (A), lines 3, 4, and 7d)			449.	26,562.			
_	1		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c,	·		745.	16,749.			
			ue-add lines 8 through 11 (must equal Part VIII, co		225,	829.	178,806.			
	1		I similar amounts paid (Part IX, column (A), lines 1							
	1		aid to or for members (Part IX, column (A), line 4)							
es	1		her compensation, employee benefits (Part IX, colur		121,	073.	102,400.			
Expenses	16 a F	Profession	al fundraising fees (Part IX, column (A), line 11e)							
άx	b 1	Total fundr	aising expenses (Part IX, column (D), line 25)	12,204.						
Ш	17 (Other expe	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	117,	019.	98,592.			
			nses. Add lines 13-17 (must equal Part IX, columr		238,	092.	200,992.			
	19 F	Revenue le	ess expenses. Subtract line 18 from line 12		-12,	263.	-22,186.			
ces					Beginning of Curr	ent Year	End of Year			
Net Assets or Fund Balances	20 T	Total asset	s (Part X, line 16)		4,846,	797.	4,848,199.			
t As	21 T	Total liabili	ties (Part X, line 26)		4,	846.	3,462.			
울撎	22 N	Net assets	or fund balances. Subtract line 21 from line 20		4,841,	951.	4,844,737.			
Pa	art II	Signatu	re Block							
			, I declare that I have examined this return, including accompar				ny knowledge and belief, it is			
tru	e, correct,	and complete	e. Declaration of preparer (other than officer) is based on all info	rmation of which prep	arer has any knowled	lge.				
		Ron	r Siebler		C	ctobe)	r 19,2022			
Siç	gn	Signatu	ure of officer		Date					
He	re	RON	SIEBLER, TREASURER							
			r print name and title							
D-	: 4	Print/Type	preparer's name Preparer's signature		Date	Check	if PTIN			
Pa		Peter	L. Allman, CPA Peter Lace	-CPA	10/18/2022	self-empl	_			
	eparer	Firm's non				EIN ► 4	6-2979080			
US	e Only	′ 	dress ► 9600 Great Hills Trail, Suite 15	SOW. Austin '						
Ma	y the IRS		this return with the preparer shown above? See in		· · · · ·	•				

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:
	PRESERVATION TEXAS IS THE ADVOCATE FOR
	PRESERVING THE HISTORIC RESOURCES OF TEXAS THROUGH A FOCUS ON ADVOCACY , BOARD
	DEVELOPMENT, ORGANIZATIONAL VISIBILITY, AND RESOURCE DEVELOPMENT
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 b expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 149,129. including grants of \$ 0.) (Revenue \$ 0.)
	THE ENTITY HOSTS AN ANNUAL CONFERENCE AND SEMINARS FOR EDUCATORS,
	LEGISLATORS AND PRESERVATION ORGANIZATIONS. THEY ALSO PROVIDE
	ADVOCACY TRAINING AND GRANT WRITING AND PROMOTE TEXAS' MOST
	ENDANGERED PLACES LIST.
4b	(Code:) (Expenses \$ 24,215. including grants of \$ 0.) (Revenue \$ 0.)
	THE BASSETT FARM IS A HISTORIC FARM APPROXIMATELY 40 MILES EAST OF
	WACO, TEXAS, THAT PRESERVATION TEXAS IS PRESERVING AS A HISTORIC PLACE.
	1 III.CU •
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 173,344.
70	Total program solving expenses F 1/3,344.

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Part	IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	×	
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? <i>If "Yes," complete Schedule C, Part II</i>	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8	×	
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		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X, as applicable.			
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	×	
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		×
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		×
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? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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		×
12a		12a		×
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		×
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? <i>If "Yes," complete Schedule F, Parts II and IV </i>	15		×
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		×
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		×
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			
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	18		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Part I	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		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
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? <i>If "Yes," complete Schedule L, Part II</i>	26		×
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		×
28	Was the organization a party to a business transaction with one of the following parties (see the 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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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? <i>If "Yes," complete Schedule R, Part I </i>	33		×
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		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
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		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
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			
	55 Concease & contains a responde of note to any intention art v	<u> </u>	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10		

Form **990** (2021)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	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 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country ▶			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u></u>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	ο-		
h		6a		×
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		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7e 7f		×
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
	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:			
a b	Gross income from members or shareholders			
D	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
_b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	46		×
	If "Yes," see the instructions and file Form 4720, Schedule N.	15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		×
	If "Yes," complete Form 4720, Schedule O.	.5		
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Part VI

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.								
C+:	Check if Schedule O contains a response or note to any line in this Part VI			×					
Secti	on A. Governing Body and Management		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15		162	INO					
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b 2	Enter the number of voting members included on line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×					
3									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3 4		×					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		$\frac{\sim}{\times}$					
6	Did the organization have members or stockholders?	6	×						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		×					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,								
_	stockholders, or persons other than the governing body?	7b		×					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	×						
ь 9	Each committee with authority to act on behalf of the governing body?	8b	×						
9	the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>								
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue									
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		×					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×						
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40							
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	×						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," describe on Schedule O how this was done.	120	×						
13	Did the organization have a written whistleblower policy?	13							
14	Did the organization have a written document retention and destruction policy?	14		×					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	×						
b	Other officers or key employees of the organization	15b		×					
40	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16h							
Secti	on C. Disclosure	16b							
17	List the states with which a copy of this Form 990 is required to be filed ▶								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	Γ (sec	tion 5	01(c)					
19	☐ Own website ☐ Another's website ☒ Upon request ☐ Other <i>(explain on Schedule O)</i> Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year.	f inter	est p	olicy,					
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	>						

EVAN THOMPSON, PO BOX 3514, SAN MARCOS, TX 78667 (512)472-0102

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No"

Form 990 (2021)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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

Check this box if fletther the organization					C)			,		
(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) CHARLES JOHN	10.00									
PRESIDENT		×		×				0.	0.	0.
(2) RON SIEBLER TREASURER	10.00	×		×				0.	0.	0.
(3) SUE LAZARA SECRETARY	10.00	×		×				0.	0.	0.
(4) CHARLENE ORR VICE PRESIDENT	10.00	×		×				0.	0.	0.
(5) ANDREA BAREFIELD BOARD MEMBER	1.00	×						0.	0.	0.
(6) DERRICK BIRSALL BOARD MEMBER	1.00	×						0.	0.	0.
(7) SEHILA MOTA CASPER BOARD MEMBER	1.00	×						0.	0.	0.
(8) MAX GROSSMAN BOARD MEMBER	1.00	×						0.	0.	0.
(9) AUGUST HARRIS III BOARD MEMBER	1.00	×						0.	0.	0.
(10) DIXIE HOOVER BOARD MEMBER	1.00	×						0.	0.	0.
(11) KATE JOHNSON BOARD MEMBER	1.00	×						0.	0.	0.
(12) CHARLES R LYNCH BOARD MEMBER	1.00	×						0.	0.	0.
(13) SERENA PUTEGNAT BOARD MEMBER	1.00	×						0.	0.	0.
(14) JOSE R RODRIGUEZ BOARD MEMBER	1.00	×						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
	(C)									
(A) Name and title	(B) Average hours	box,	unles	neck ss pe	rson	e than of is both or/trust	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	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/ 1099-NEC)	from related organizations (W-2 1099-MISC/ 1099-NEC)	compensation / from the organization and related organizations
(15) WILLIS WINTERS	1.00	.,						_	_	_
BOARD MEMBER	40.00	×						0.	0.	0.
(16) EVAN THOMPSON EXECUTIVE DIRECTOR	40.00	<u> </u> 		×				90,000.	0.	6,898.
(17)								30,000		37020
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal		 n A					>	90,000.	0.	6,898.
d Total (add lines 1b and 1c)								90,000.	0.	
Total number of individuals (including bureportable compensation from the organ		to th	iose	e list	ted	above	e) w	ho received mor	e than \$100,000	
3 Did the organization list any former employee on line 1a? If "Yes," complete								oyee, or highes	=	-
 For any individual listed on line 1a, is the organization and related organizations 	e sum of re	portal	ble	con	пре	nsatic	n a	nd other compe	nsation from the	
individual										4 ×
5 Did any person listed on line 1a receive of for services rendered to the organization									tion or individua	5 ×
Section B. Independent Contractors										4400.000 (
Complete this table for your five hig compensation from the organization. Rep										
(A) Name and business add	dress							(B) Description of serv	vices	(C) Compensation
2 Total number of independent contract							th	ose listed abov	e) who	

Part VIII Statement of Revenue Check if Schedule O contain

ı are		Check if Schedule O contains a respon	se or note to an	y line in this Pa	urt VIII		\sqcap
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b	4,870.				
ي ق	С	Fundraising events 1c					
fts, r A	d	Related organizations 1d					
اق آق	е	Government grants (contributions) 1e					
ns, Sin	f	All other contributions, gifts, grants,					
utio ner		and similar amounts not included above 1f	130,625.				
rib Ot	g	Noncash contributions included in					
ont nd		lines 1a–1f 1g	·				
O a	h	Total. Add lines 1a–1f		135,495.			
ø)	_		Business Code		-		_
Program Service Revenue	2a	EVENT ADMISSION AND FEES	900099	0.	0.	0.	0.
gram Ser Revenue	b						
n S /en	C .						
ıraı Rev	d						
rog I	e	All able to a superior and in the superior					
Д	f	All other program service revenue Total. Add lines 2a–2f	▶	0.			
	<u>g</u> 3	Investment income (including dividends		0.			
		other similar amounts)		26,562.	0.	0.	26,562.
	4	Income from investment of tax-exempt bo	L	20,3021			20,3021
	5	Royalties	· ·				
		(i) Real	(ii) Personal				
	6a	Gross rents 6a 16,749.					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c 16,749.					
	d	Net rental income or (loss)		16,749.	0.	0.	16,749.
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
ne	b	Less: cost or other basis					
evenue		and sales expenses . 7b					
Re√	_	Gain or (loss) 7c					
erl	d	Net gain or (loss)	▶				
Other	8a	Gross income from fundraising					
0		events (not including \$ of contributions reported on line					
		1c). See Part IV, line 18 8a					
	h	Less: direct expenses 8b					
		Net income or (loss) from fundraising eve	ents ►				
		Gross income from gaming					
	-	activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities	es >				
		Gross sales of inventory, less					
		returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of inventor	ory >				
SI			Business Code				
Miscellaneous Revenue	11a						
scellaneo Revenue	b						
cel	С						
Ais	d	All other revenue					
		Total. Add lines 11a–11d	▶	150 000			40.011
	12	Total revenue. See instructions	•	178,806.	0.	0.	43,311.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. 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 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 85,927. 68,741. 8,592. 8,594. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 16,473. 10 Payroll taxes 13,180. 1,647. 1,646. 11 Fees for services (nonemployees): Management Legal Accounting 7,699. 6,844. 855. 0. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . 0. 9,725. 8,645. 1,080. 12 Advertising and promotion 13 5,009. 2,575. 1,621. 813. Office expenses 14 696. 87. Information technology 869. 86. 15 Occupancy 24,215. 24,215. 16 0. 0. 890. 704. 186. 17 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 0. 28,253. 28,253. 0. 20 21 Payments to affiliates 11,367. 11,053. 314. 0. 22 Depreciation, depletion, and amortization . 23 10,565. 8,438. 1,063. 1,064. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) а C d All other expenses 25 **Total functional expenses.** Add lines 1 through 24e 200,992. 173,344. 15,444. 12,204. 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

		Check it Schedule O contains a response of note to any line in this Pa	(A) Beginning of year		· · · · · · ∟ (B) End of year
	1	Cash—non-interest-bearing	69,309.	1	95,796.
	2	Savings and temporary cash investments	03/303.	2	33,730.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,		7	
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		6	
'n	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
188	9	Prepaid expenses and deferred charges		9	
•	10a	Land, buildings, and equipment: cost or other		9	
	IVa	basis. Complete Part VI of Schedule D 10a 4,418,437.			
	h	Less: accumulated depreciation 10b 97,487.	3,741,676.	10c	4,320,950.
	11	'	1,035,812.	11	431,453.
	12	Investments—publicly traded securities	1,033,612.	12	431,433.
				13	
	13 14	Investments—program-related. See Part IV, line 11		14	
		Intangible assets		15	
	15 16	Total assets. Add lines 1 through 15 (must equal line 33)	4,846,797.	_	4,848,199.
	17	Accounts payable and accrued expenses		17	
	18		4,846.	18	3,462.
	19	Grants payable		19	
	20	Deferred revenue		20	
	21	Tax-exempt bond liabilities		21	
	22	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director,		21	
ijes	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
Ξ		controlled entity or family member of any of these persons		00	
Liabilities	00			22	
_	23 24	Secured mortgages and notes payable to unrelated third parties		23 24	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	4,846.	26	3,462.
' 0	20	Organizations that follow FASB ASC 958, check here ▶ ⊠	4,040.	20	3,402.
ĕ		and complete lines 27, 28, 32, and 33.			
<u> a</u>	27	Net assets without donor restrictions	4,793,346.	27	4,783,158.
Ва	28	Net assets with donor restrictions	48,605.	28	61,579.
nd		Organizations that do not follow FASB ASC 958, check here ▶ □	10,003.		01/3/5.
교		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Į.	32	Total net assets or fund balances	4,841,951.	32	4,844,737.
Š	33	Total liabilities and net assets/fund balances	4,846,797.	-	4,848,199.
			-,010,757.		Form QQ0 (2021

Form 990 (2021) Page **12**

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)	1	78 , 8	06.					
2	Total expenses (must equal Part IX, column (A), line 25)	2(00,9	92.					
3	Revenue less expenses. Subtract line 2 from line 1		22,1	86.					
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4								
5	Net unrealized gains (losses) on investments		24,9	72.					
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								
	32, column (B))	4,84	44,7	37.					
Part	XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		×					
			Yes	No					
1	Accounting method used to prepare the Form 990: Cash Accrual Other MODIFIED CASH BASIS Cash Accrual Cash Basis	_							
	If the organization changed its method of accounting from a prior year or checked "Other," explain or Schedule O.	n							
_		_							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	×						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled o	r							
	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	a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?								
	•	2c	×						
	If the organization changed either its oversight process or selection process during the tax year, explain or Schedule O.	n							
0-									
3 a	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?			.,					
L	-	3a		×					
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.								
	required addit of addits, explain why on somedule of and describe any steps taken to didelyo such addits.	3b	000	(0004)					

REV 07/25/22 PRO Form **990** (2021)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047 2021

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

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

			TEXAS						75-2129913		
Par						l organizations mus				ons.	
The c	_		•			s: (For lines 1 through		-	•		
2						on of churches descr			U(D)(1)(A)(I).		
3											
4						onjunction with a hosp				(iii) Fn	ter the
7	_			ity, and state	•	onjunouon with a noof	ortal acce	mbod iii c	00011011 170(0)(1)(1)(1)	(,	tor the
5	☐ Ar	n orgar	nization o	perated for		college or university	owned c	or operate	ed by a government	al unit	described in
6	☐ A ·	federa	l, state, o	local gover	nment or govern	mental unit described	in secti	on 170(b)	(1)(A)(v).		
7	7										
					(A)(vi). (Complet						
8						(1)(A)(vi). (Complete					
9	or un	univer niversit	sity or a r y:	on-land-gra	nt college of agr	d in section 170(b)(1) iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the co	ollege or
10	red su	ceipts ipport	from active from gros	ities related s investmen	to its exempt fu t income and un	e than 33 ¹ /3% of its sunctions, subject to ce related business taxa 75. See section 509 (a	rtain exc ble incon	eptions; a ne (less s	and (2) no more than ection 511 tax) from	33 ¹ /3 ⁹	√ of its
11		•	-	-		sively to test for public		•	•		
12	☐ Ar	n organ	ization or	ganized and	operated exclusi	vely for the benefit of,	to perfor	m the fun	ections of, or to carry	out th	e purposes of
						escribed in section 5					
	the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.										
а						l, supervised, or contr					
		supp	orting org	anization. Y	ou must comple	regularly appoint or e ete Part IV, Sections	A and B	•			
b						sed or controlled in co					
						rganization vested in V, Sections A and C		e persons	that control or man	age the	e supported
_		-	` '		-	ting organization ope		onnection	n with and function	ally inte	arated with
С						ns). You must comp				any mic	egrated with,
d		Туре	III non-f	unctionally i	i ntegrated. A su	pporting organization	operate	d in conn	ection with its suppo	orted o	rganization(s)
						nization generally mu				id an a	ttentiveness
		requi	rement (s	ee instructio	ns). You must c	omplete Part IV, Sec	ctions A	and D, ar	nd Part V.		
е						a written determination				e II, Ty	pe III
_			-	-		tionally integrated sup	pporting	organizat	ion.		
Ť										•	
g			ported orga			oorted organization(s). (iii) Type of organization	1		(A) Amount of monotony	/	\ Amazunt af
	(I) INAII	ne or sup	oported orga	mzation	(ii) EIN	(described on lines 1–10		organization ur governing	(v) Amount of monetary support (see) Amount of r support (see
						above (see instructions))	docu	ment?	instructions)	in	structions)
							Yes	No			
(A)											
(B)											
(C)											
(D)											
(E)											
Tota	1										

Schedule A (Form 990) 2021 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 4 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) 14 % Public support percentage from 2020 Schedule A, Part II, line 14 15 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	51,625.	222,538.	62,318.	171,560.	135,495.	643,536.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	14,056.	24,667.	7,407.	14,075.	0.	60,205.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	65,681.	247,205.	69,725.	185,635.	135,495.	703,741.
7a	Amounts included on lines 1, 2, and 3	_	_				
	received from disqualified persons .	7,380.	3,830.	334.	3,135.	0.	14,679.
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	0.		_	•		•
_	Add lines 7a and 7b		0.	0.	0.	0.	0.
8	Public support. (Subtract line 7c from	7,380.	3,830.	334.	3,135.	0.	14,679.
Ū	line 6.)						689,062.
Secti	on B. Total Support						00370021
	dar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	65,681.	247,205.	69,725.	185,635.	135,495.	703,741.
10a	Gross income from interest, dividends,	,	,	,	•	,	· · · · · ·
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	64,006.	31,049.	52,152.	40,194.	43,311.	230,712.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	64,006.	31,049.	52,152.	40,194.	43,311.	230,712.
11	Net income from unrelated business						
	activities not included on 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						
10	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	100 607	270 254	101 055	225 222	170 006	024 452
14	First 5 years. If the Form 990 is for the					178,806.	934,453.
17	organization, check this box and stop he	•			•		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8			3. column (f))		15	73.74 %
16	Public support percentage from 2020 Sch		=			16	74.19 %
	on D. Computation of Investment Inc					1	
17	Investment income percentage for 2021 (I			y line 13, colu	mn (f))	17	24.69 %
18	Investment income percentage from 2020			-			23.77 %
19a	331/3% support tests-2021. If the organi	ization did not	check the box	on line 14, ar	nd line 15 is m	ore than 331/39	6, and line
	17 is not more than 331/3%, check this box	and stop here.	The organization	on qualifies as a	a publicly suppo	orted organizati	on . > X
b	331/3% support tests-2020. If the organiz						
	line 18 is not more than 331/3%, check this b	oox and stop h	ere. The organi	zation qualifies	as a publicly s	upported organ	ization
20	Private foundation. If the organization di	d not check a l	oox on line 14	19a or 19h o	heck this hox	and saa instru	ctions

Supporting Organizations Part IV

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

Se

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

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
_		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netru	ctions	2)
a b c	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity. 			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below</i> . Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

				9
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	tru:	st on Nov. 20, 1970 (expl	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	ions A through E.
Sec	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_ 2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_ 5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C—Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally i	ntegrated Type III suppo	rting organization
	(see instructions)			

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2021 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions** Section E—Distribution Allocations (see instructions) **Distributable Excess Distributions** Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 **a** From 2016 From 2017 **c** From 2018 **d** From 2019 **e** From 2020 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2021 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2021 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7: Excess from 2017 . . . Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . .

Excess from 2021 . . .

Schedule A (Form 990) 2021 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

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

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Se	ection 501(c)(4), (5), or (6) orga	nizations: Complete Part III.				
	of organization			Employer ider	ntification number	
	SERVATION TEXAS, I	NC.		75-21299		
Part		e organization is exempt unde	er section 501(d	c) or is a section 527 of	organization.	
1	Provide a description of definition of "political can	the organization's direct and incompaign activities."	direct political ca	mpaign activities in Part	IV. See instructions	foi
2		y expenditures. See instructions .			;	
3		cal campaign activities. See instruc				
Part		e organization is exempt unde				
1 2 3 4a b Part 1 2 3 4	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount directly activities	ly expended by the filing organization is exempt under ly expended by the filing organization is funds contribution in the sexpenditures. Add lines 1 and 2	er section 501(cation for section	section 4955		No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on entributions received that were pro- fund or a political action committed	enter the amount property and directly	paid from the filing organi delivered to a separate p	zation's funds. Also e	enter such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of politica contributions received a promptly and directly delivered to a separate political organization. If none, enter -0	nd e
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

ocne	edule C (Form 990) 2021					Page 2			
Pa	rt II-A Complete if the organization section 501(h)).	n is exempt u	ınder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under			
A	Check ► ☐ if the filing organization belon	gs to an affiliate	ed group (and list i	n Part IV each affil	iated group memb	per's name,			
	address, EIN, expenses, and	share of excess	lobbying expendi	tures).					
В	Check ► ☐ if the filing organization check			ovisions apply.					
	Limits on Lobb				(a) Filing	(b) Affiliated			
	(The term "expenditures" m	eans amounts	paid or incurred.)		organization's totals	group totals			
1	 Total lobbying expenditures to influence 	public opinion	(grassroots lobbyi	ng)	0.				
	b Total lobbying expenditures to influence	a legislative bo	dy (direct lobbying	g)	0.				
	c Total lobbying expenditures (add lines 1)	a and 1b) .			0.				
	d Other exempt purpose expenditures .				200,992.				
	 Total exempt purpose expenditures (add 		•		200,992.				
	f Lobbying nontaxable amount. Enter	the amount fr	om the following	table in both					
	columns.	_			40,198.				
	If the amount on line 1e, column (a) or (b) is:	: The lobbying	nontaxable amount	t is:					
	Not over \$500,000	20% of the am	nount on line 1e.						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000.					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	ver \$1,500,000.					
	Over \$17,000,000	\$1,000,000.							
	g Grassroots nontaxable amount (enter 25	•			10,050.				
	h Subtract line 1g from line 1a. If zero or le				0.				
	i Subtract line 1f from line 1c. If zero or le	•			0.				
	j If there is an amount other than zero		1h or line 1i, did	the organization	file Form 4720				
	reporting section 4911 tax for this year?	?				Yes No			
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)								
	1 - 1.1	. F a.u. alituv	Duning 4 Vas: 4						
	Lobbying	j Expenditures	During 4-Year Av	eraging Period					
	Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total			

	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total					
2a	Lobbying nontaxable amount	49,103.	52,440.	47,618.	40,198.	189,359.					
b	Lobbying ceiling amount (150% of line 2a, column (e))					284,039.					
С	Total lobbying expenditures	0.	0.	0.	0.	0.					
d	Grassroots nontaxable amount	12,276.	13,110.	11,905.	10,050.	47,341.					
е	Grassroots ceiling amount (150% of line 2d, column (e))					71,012.					
f	Grassroots lobbying expenditures	0.	0.	0.	0.	0.					

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Schedule C (Form 990) 2021

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Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed I	Form	5768		
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
	iption of the lobbying activity.	Yes	No	Ar	nount	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912		-			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\				
Part I	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), c	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		
Part I	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Ol answered "Yes."				ine 3	I, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Part	• •					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up list); Par 	t II-A, II	nes 1	and

Part IV	Supplemental Information (continued)

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Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

	SERVATION TEXAS, INC.		75-2129913
Par			ls or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6. (a) Donor advised funds	(b) Finale and the many
1 2 3	Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a		
6	funds are the organization's property, subject to the Did the organization inform all grantees, donors, ar only for charitable purposes and not for the benefit	nd donor advisors in writing that grant t of the donor or donor advisor, or for	funds can be used r any other purpose
	conferring impermissible private benefit?		· · · · · · · · · · Yes No
Par		Voo" on Form 000 Dort IV line 7	
1	Complete if the organization answered "\ Purpose(s) of conservation easements held by the organization answered "\		
•	Preservation of land for public use (for example, recreations)	= : : : : : : : : : : : : : : : : : : :	f a historically important land area
	☐ Protection of natural habitat	·	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contributior	
_	easement on the last day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements Total acreage restricted by conservation easements		
b	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (
	historic structure listed in the National Register $$.		· 2d
3	Number of conservation easements modified, trans tax year ►	ferred, released, extinguished, or term	ninated by the organization during the
4 5	Number of states where property subject to conserve Does the organization have a written policy regardications, and enforcement of the conservation east	arding the periodic monitoring, insp	
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting \$\blacktriangleright*	g, handling of violations, and enforcing of	conservation easements during the year
8	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports co		and expense statement and
	balance sheet, and include, if applicable, the text of organization's accounting for conservation easemer		ncial statements that describes the
Dout			Other Cimiler Assets
Part	Complete if the organization answered "	Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASI of art, historical treasures, or other similar assets service, provide in Part XIII the text of the footnote to	held for public exhibition, education, o its financial statements that describe	or research in furtherance of public es these items.
b	If the organization elected, as permitted under FAS art, historical treasures, or other similar assets held provide the following amounts relating to these item	for public exhibition, education, or res is:	earch in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		• \$
•	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, following amounts required to be reported under FA		assets for financial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Col	llections of Ar	t, Hist	orical T	reasures	, or Ot	her Similar As	ssets (coi	ntinued)
3	Using the organization's acquisition, acce collection items (check all that apply):	ession, and other	recor	ds, chec	k any of the	e follow	ving that make	significant	use of its
а	☐ Public exhibition		d [Loan	or exchang	e progr	am		
b	▼ Scholarly research ▼ Comparison of the		_						
С	X Preservation for future generations								
4	Provide a description of the organization's XIII.	s collections and	d expla	in how th	ney further	the org	anization's exe	mpt purpo	se in Part
5	During the year, did the organization solid assets to be sold to raise funds rather than								. V N.
Doub			-u as p	art Or tire	organizati	011 3 00	mection:	Tes	× No
Part	Complete if the organization and 990, Part X, line 21.	swered "Yes" o							Form
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?								s 🗌 No
b	If "Yes," explain the arrangement in Part X	III and complete	the fol	lowing ta	able:			mount	
•	Reginning halance					1c		ariourit	
G C	Beginning balance					1d			
d						1e			
e	Distributions during the year Ending balance					1f			
f Oo	Did the organization include an amount on							,2 □ V 0	□ No
2a	If "Yes," explain the arrangement in Part X								
Par		III. Check here ii	the ex	piariation	i nas been	provide	ed on Part Alli .		
Гаг	Complete if the organization ans	swored "Vee" o	n Forr	m 000 E	Part IV/ line	10			
		Current year	(b) Pric		(c) Two year		(d) Three years bac	k (a) Four	vears back
1a	Beginning of year balance) Ourrent year	(6) 1 110	n year	(c) Two year	3 Dack	(d) Three years bac	K (e) i oui j	- Dack
b	Contributions								
C	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 c	-	oalance	e (line 1g	, column (a)) held a	as:		
а	Board designated or quasi-endowment ▶	·%	ó						
b	Permanent endowment ▶%	6							
С	Term endowment ▶%								
	The percentages on lines 2a, 2b, and 2c sl	•							
3a	Are there endowment funds not in the pos	ssession of the	organiz	ation tha	at are held	and ad	ministered for tl	ne _	
	organization by:							'	res No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ	izations listed as	requir	ed on Sc	hedule R?			3b	
4	Describe in Part XIII the intended uses of t		s endo	wment fu	ınds.				
Part									
	Complete if the organization ans	wered "Yes" o	n Forr	n 990, F	Part IV, line	e 11a. :	See Form 990	, Part X, li	ne 10.
	Description of property	(a) Cost or other (investment)			r other basis ther)		Accumulated epreciation	(d) Book	value
1a	Land		0.						0.
b	Buildings			4,3	31,841.		14,360.	4,31	7,481.
С	Leasehold improvements						-	·	
d	Equipment			1	86,596.		83,127.		3,469.
<u>e</u>	Other								
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990,	Part X	, column	(B), line 10	Oc.)	▶	4,32	0,950.

Part VII	Investments – Other Securities.			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		nod of valuation: of-year market value
(1) Financial	derivatives			
(2) Closely h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.) .			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		nod of valuation: of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.) .			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11d. See Form	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.	<u> </u>		
raitx	Complete if the organization answered "Yes" on For	rm 990 Part IV lin	e 11e or 11f See	Form 990 Part X
	line 25.	000, . a,	0 110 01 1111 000	7 7 61111 666, 1 41174,
1.	(a) Description of liability			(b) Book value
(1) Federal ir				(,,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			
	runcertain tax positions. In Part XIII, provide the text of the footn		n's financial stateme	nts that reports the
	s liability for uncertain tax positions under FASB ASC 740. Check			

	XI Reconciliation of Revenue per Audited Financial Stateme	-	Return.
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			er Return.
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5
Part 2	Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part		
Pt I	I, Line 4: PRESERVATION TEXAS MAINTAINS A COLLECT	TION OF FURNITURE,	ARTIFACTS
AND A	I, Line 4: PRESERVATION TEXAS MAINTAINS A COLLECTARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMILETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE	Y THAT WERE USED A	T ITS
AND A	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL	C ORGANIZATION, SCH	T ITS OLARS MILY
AND A	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMILETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CEN	Y THAT WERE USED AS ORGANIZATION, SCH	T ITS OLARS MILY
AND A	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL ETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE	Y THAT WERE USED AS ORGANIZATION, SCH	T ITS OLARS MILY
BASSI BASSI AND I	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMILETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CEN	ORGANIZATION, SCH	OLARS MILY TIEMS
BASSI AND I	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL ETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CEN SEVERAL GENERATIONS. STEWARDSHIP OF ARTIFACTS, AR	ORGANIZATION, SCH TRAL TEXAS FARM FA CCHIVES AND SIMILAR CHARTER TO "ACQUI	T ITS OLARS MILY TIEMS RE, PROTECT
BASSI AND I	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL ETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CENSEVERAL GENERATIONS. STEWARDSHIP OF ARTIFACTS, ARE THE ORGANIZATION'S MISSION, AS OUTLINED IN ITS	ORGANIZATION, SCH TRAL TEXAS FARM FA CCHIVES AND SIMILAR CHARTER TO "ACQUI	T ITS COLARS MILY TIEMS RE, PROTECT R TIME
BASSI AND I	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL STATE FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CENSEVERAL GENERATIONS. STEWARDSHIP OF ARTIFACTS, AREA THE ORGANIZATION'S MISSION, AS OUTLINED IN ITS PRESENT HISTORIC AREAS, BUILDINGS, ARTIFACTS AND OUTLINED THE PROPERTY OF THE PUBLIC STATES AND OUTLINED THE PUBLIC STATES AND OUTLINES FOR PUBLIC STA	Y THAT WERE USED AS CORGANIZATION, SCHOOL TEXAS FARM FARCHIVES AND SIMILAR CHARTER TO "ACQUIDED BLECTS." AT A LATE	T ITS COLARS MILY TIEMS RE, PROTECT R TIME
BASSI AND I	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL ETT FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CENSEVERAL GENERATIONS. STEWARDSHIP OF ARTIFACTS, ARE THE ORGANIZATION'S MISSION, AS OUTLINED IN ITS PRESENT HISTORIC AREAS, BUILDINGS, ARTIFACTS AND O	Y THAT WERE USED AS CORGANIZATION, SCHOOL TEXAS FARM FARCHIVES AND SIMILAR CHARTER TO "ACQUIDED BLECTS." AT A LATE	T ITS COLARS MILY TIEMS RE, PROTECT R TIME
BASSI AND I	ARCHIVES ACCUMULATED BY THE BASSETT-SPARKMAN FAMIL STATE FARM PROPERTY. THIS COLLECTION WILL ENABLE THE PUBLIC TO UNDERSTAND THE MATERIAL CULTURE OF A CENSEVERAL GENERATIONS. STEWARDSHIP OF ARTIFACTS, AREA THE ORGANIZATION'S MISSION, AS OUTLINED IN ITS PRESENT HISTORIC AREAS, BUILDINGS, ARTIFACTS AND OUTLINED THE PROPERTY OF THE PUBLIC STATES AND OUTLINED THE PUBLIC STATES AND OUTLINES FOR PUBLIC STA	Y THAT WERE USED AS CORGANIZATION, SCHOOL TEXAS FARM FARCHIVES AND SIMILAR CHARTER TO "ACQUIDED BLECTS." AT A LATE	T ITS OLARS MILY TIEMS RE, PROTECT R TIME

Schedule D (Fo	orm 990) 2021	Page \$
Part XIII	Supplemental Information (continued)	

SCHEDULE O (Form 990)

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.

2021

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Employer identification number Name of the organization 75-2129913 PRESERVATION TEXAS, INC. Pt VI, Line 6: PRESERVATION TEXAS IS A MEMBERSHIP ORGANIZATION. ANYONE MAY JOIN BY PAYING THEIR DUES. Pt VI, Line 11b: THE EXECUTIVE DIRECTOR REVIEWED THE FORM 990 WITH THE TAX PREPARER PRIOR TO ITS FILING. BOARD MEMBERS ARE PROVIDED A COPY BY E-MAIL. Pt VI, Line 12c: THE CONFLICT OF INTEREST POLICY IS REVIEWED AND AGREED UPON ANNUALLY BY BOARD MEMBERS. Pt VI, Line 15a: THE BOARD OF DIRECTORS HAS AN ANNUAL REVIEW TO DETERMINE THE COMPENSATION FOR THE EXECUTIVE DIRECTOR. Pt VI, Line 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. Pt XII, Line 1: THE ORGANIZATION USES THE MODIFIED CASH BASIS OF ACCOUNTING.

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB	No.	1545-0047	

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or fiscal year beginning _____, 2021, and ending _____

► Do not send to the IRS. Keep for your records. ► Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

PRESERVATION TEXAS, INC.
75–2129913

Name and title of officer or person subject to tax

RON SIEBLER, TREASURER

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a**, **2a**, **3a**, **4a**, **5a**, **6a**, **7a**, **8a**, **9a**, or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, **5b**, **7b**, **8b**, **9b**, or **10b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here ▶ 🗵	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _	178,806.
2a	Form 990-EZ check here . ▶ □	b	Total revenue, if any (Form 990-EZ, line 9)	2b _	
3a	Form 1120-POL check here ►	b	Total tax (Form 1120-POL, line 22)	3b _	
4a	Form 990-PF check here . ▶ □	b	Tax based on investment income (Form 990-PF, Part V, line 5) .	4b _	
5a	Form 8868 check here ▶ □	b	Balance due (Form 8868, line 3c)	5b _	
6a	Form 990-T check here . ▶ □	b	Total tax (Form 990-T, Part III, line 4)	6b _	
7a	Form 4720 check here ▶ □	b	Total tax (Form 4720, Part III, line 1)	7b _	
8a	Form 5227 check here ▶ □	b	FMV of assets at end of tax year (Form 5227, Item D)	8b _	
9a	Form 5330 check here ▶ □	b	Tax due (Form 5330, Part II, line 19)	9b _	
10a	Form 8038-CP check here ▶ □	b	Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	
Part	Declaration and Signatum	ıre	Authorization of Officer or Person Subject to Tax		

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity)

(EIN) and that I have examined a copy of the

2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to

electronic funds	withdrawal.
PIN: check one	box only

i. Check one L	OX OILLY									
X I authorize	Allman &	Associates	Inc.	to enter my PIN	7	8	7	1	1	as my signature
		ERO firr	m name						rs, b eros	
					ao n	iot ei	nter	an z	eros	

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fod/State program. I will enter my PIN on the return's displaying consent agrees.

filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as par of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ► Ron Sixblar Treasurer

Date ► October 19-2022

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

		7	0	7	5	3	6	8	2	7	7	0
--	--	---	---	---	---	---	---	---	---	---	---	---

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature >

Date ► 10/19/2022

ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So