** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning $$ JUN $$ 1 , $$ $$ 2 $$ 2 $$ 2 $$ and endi	ing M	AY 31, 202	3
B c	heck if oplicable	C Name of organization		D Employer ident	ification number
	Addres	Houston Symphony Endowment			
	Name change	Doing business as		20-8350	227
	Initial return		m/suite	E Telephone numb	per
	Final return/	615 Louisiana St. 102	2	713-224	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	30,746,634.
	Amende return	Houston, IX 77002		H(a) Is this a group	return
	Applica tion	F Name and address of principal officer: Dames Lee		for subordinat	es? Yes X No
	pending	same as C above		H(b) Are all subordinates	s included? Yes No
<u> 1 T</u>	ax-exe	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," attach	a list. See instructions
	Vebsite			H(c) Group exempt	I
			L Year o	of formation: 2006	M State of legal domicile; $\mathbf{T}\mathbf{X}$
Pa		Summary			
Φ		Briefly describe the organization's mission or most significant activities: The End			
Activities & Governance	1	to support the operations of the Houston Syr			
ř		Check this box if the organization discontinued its operations or disposed or	of more		_
Š		Number of voting members of the governing body (Part VI, line 1a)			3 6
ص ھ		Number of independent voting members of the governing body (Part VI, line 1b)			4 6
es		otal number of individuals employed in calendar year 2022 (Part V, line 2a)			5 0
ĭ₹		otal number of volunteers (estimate if necessary)			6 6
Act		otal unrelated business revenue from Part VIII, column (C), line 12			70,518.
_	<u>d</u>	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····		25,525.
				Prior Year	Current Year
ē		Contributions and grants (Part VIII, line 1h)	.	459,209 0	
ē		Program service revenue (Part VIII, line 2g)			_
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		2,540,974	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		71,451	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,071,634 3,803,962	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,803,902	
		Benefits paid to or for members (Part IX, column (A), line 4)		0	
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0	. 0.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 0 •		0	• 0•
Ä				230,264	. 341,544.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,034,226	4,500,976.
		Revenue less expenses. Subtract line 18 from line 12		-962,592	612,588.
×		nevertue less expenses. Subtract line 10 front line 12	Bed	ginning of Current Yea	
ets c	20 7	otal assets (Part X, line 16)		87,456,110	
Asse Bal	21	otal assets (Part X, line 16) Total liabilities (Part X, line 26)		5,177	
Net Assets or	22 1	Net assets or fund balances. Subtract line 21 from line 20		87,450,933	
	rt II	Signature Block			
Und	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and	stateme	nts, and to the best of	my knowledge and belief, it is
	-	, and complete. Declaration of preparer (other than officer) is based on all information of which pi			
Sign	, [Signature of officer		Date	
Her		James Lee, President			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN
Paid	þ	Barbara Murphy Barbara Murphy	0	4/09/24 self-em	
Prep		Firm's name Blazek & Vetterling		Firm's EIN	76-0269860
Use	Only	Firm's address 2900 Weslayan, Suite 200			
		Houston, TX 77027		Phone no. 7	13-439-5739
May	the IR	S discuss this return with the preparer shown above? See instructions			X Yes No

Page 2

	Check if S	Schedule O cor	ntains a response o	r note to anv li	ine in this Part III				
1	Briefly describe			,					
-			operations	of the	Houston	Symphony	Society.		
	10 buppo	10 0110	operacrons	01 0110	HOUDCOIL	Бушриону	BOCICCY.		
2	Did the organiza	ation undertake	e any significant pro	ogram services	during the year w	hich were not liste	d on the		_
	prior Form 990	or 990-EZ?						Yes ∑	οN
	If "Yes," describ	e these new s	ervices on Schedul	e O.					
3	Did the organiza	ation cease cor	nducting, or make s	significant char	nges in how it con	ducts, any progran	n services?	Yes 2	Nο
			es on Schedule O.	· ·	Ü	, ,, ,		— —	
4				mnlichmente f	or each of its thre	e largeet program s	services, as measured	hy evnences	
7									
					ort the amount of	grants and allocati	ions to others, the tot	ai experises, and	
	revenue, it any,	for each progra	am service reported	d. 4 2 2		4 1 5 0 4 2 4	<u> </u>		
4a	(Code:	_) (Expenses \$	4,159,4	434 includ	ing grants of \$	4,159,434	2 •) (Revenue \$)
							o support t	he	
	<u>operatio</u>	ns of t	he Houstor	ı Sympho	ny Societ	у.			
4b	(Code:) (Expenses \$		includ	ing grants of \$) (Revenue \$		١
	(0000:	_) (Expenses w			ing grants or ψ) (Nevenue		′
	-								
	-								
	-								
	-								
4c	(Code:	_) (Expenses \$		includ	ing grants of \$) (Revenue \$)
	_								
	-								
اب 1	Other pressure	convious (Dass-	ibo on Cobodula O	١					
4d		services (Descr	ribe on Schedule O	•		\			
	(Expenses \$			grants of \$ 4 159 4 3	2.2) (Revenue \$)	
40	Total program c	onico ovnence	20	4 I ገሣ 4 '	1 / ·				

Form 990 (2022) Houston Symphony Endowment Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ا		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		1
8	, ,			X
•	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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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	170		
IJ	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		1
16		46		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			1 37
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

Houston Symphony Endowment 20-8350227 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 Х 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 Х 23 Schedule J 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 Х 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 Х 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 Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 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 Х 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "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 c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Х

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Note: All Form 990 filers are required to complete Schedule O

Form 990 (2022) Houston Symphony Endowment

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	0								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b 3a	Х						
3a	0 , , , , , , , , , , , , , , , , , , ,									
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
4a	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)?									
D	b If "Yes," enter the name of the foreign country See instructions for filling requirements for Fig.CEN Form 114. Papert of Foreign Paper and Fig. Paper and Fig. Paper (FPAP)									
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	—	ōa ōb		X					
	, , , , , , , , , , , , , , , , , , , ,		on oc		<u> </u>					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	· -	oc .							
oa		ء ا	sa i		x					
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	·· -	ъа							
b	were not tax deductible?	ا .	3b							
7	Organizations that may receive deductible contributions under section 170(c).	·								
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payo	r? 7	7a		х					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	" '	~							
	to file Form 8282?	7	7c		x					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7	7e		х					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	" —	7f		Х					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	? 7	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	L	8							
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9	а							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	💆)b							
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	_								
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders	-								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	┥.	_							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1	2a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-								
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	1	3a							
а	Note: See the instructions for additional information the organization must report on Schedule O.	·· '	Sa							
h	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?	1	4a		х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	—	4b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	" <u></u>								
	excess parachute payment(s) during the year?	. 1	15		х					
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	[1	16		Х					
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	[_1	17							
	If "Yes," complete Form 6069.									

Form 990 (2022) Houston Symphony Endowment 20-8350227 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	to line ca, co, or rob scient, accorded the circumstances, proceeded, or changes on conceans c. coo metadoloris.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management		T.,	Γ
			Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year 1a 5	-		
	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 0. Enter the number of voting members included on line 1a. above, who are independent			
b		-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Х
•	officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4		5		X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	6		X
о 7а	Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or	-		
<i>1</i> a		7a	х	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	/a	21	
b	and the other than the annual and the decided	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0	- 22	
а		8a	х	
b	The governing body? Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This Section B requests information about policies not required by the internal nevertide code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	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	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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		X
b	Other officers or key employees of the organization	15b		X
	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		X
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNone			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Elizabeth Condic - 713-238-1465 615 Louisiana St., Ste 102, Houston, TX 77002			
	ULJ HUHLBLAHA DL., DLE IVA, NUUSLUH, IA //VVA			

Form 990 (2022)

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, box 6 of 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do		Pos			one	Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)				n an	compensation	compensation	amount of
	week				u a unector/trustee)			from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	3e or (stee			nsated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru		oyee	nd mc		1099-NEC)	,	and related
	below	/idual	In stit utio nal tru stee	er	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) John Mangum	2.00									
Symphony CEO	40.00			Х				0.	471,656.	48,366.
(2) Elizabeth Condic	2.00]						_		
CFO	40.00			Х				0.	211,426.	34,342.
(3) James Lee	0.50	1						_	_	_
President	4.00	Х		Х				0.	0.	0.
(4) William Dee Hunt	0.50	ļ								_
Trustee	0.00	Х						0.	0.	0.
(5) David Krieger	0.50	ļ								
Trustee	2.00	Х						0.	0.	0.
(6) Lynne Mathre	0.50	l								
Trustee	0.00	Х						0.	0.	0.
(7) Jerome Simon	0.50	ļ								•
Trustee	0.00	Х						0.	0.	0.
(8) Scott Wise	0.50	ļ								•
Trustee	0.00	Х				_		0.	0.	0.
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Total form continuation sheets to Part VII. Section A		Name and title	1	(do not check more than one			one	Reportable Repo		rtable		stimate	ed			
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4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (B) (C) Compensation JP Morgan Chase, 707 Travis St, 11th Floor, Houston, TX 77002 Total number of independent contractors (including but not limited to those listed above) who received more than	3												3		x	
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4															
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation JP Morgan Chase, 707 Travis St, 11th Floor, Houston, TX 77002 Total number of independent contractors (including but not limited to those listed above) who received more than	•	•	•							•	•		4	Х		
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation JP Morgan Chase, 707 Travis St, 11th Floor, Houston, TX 77002 Total number of independent contractors (including but not limited to those listed above) who received more than	5															
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Description of services Compensation JP Morgan Chase, 707 Travis St, 11th Floor, Houston, TX 77002 Total number of independent contractors (including but not limited to those listed above) who received more than		rendered to the organization? If "Yes." com	plete Schedule	e J f	or su	ıch ı	oers	on					5		Х	
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Description of services JP Morgan Chase, 707 Travis St, 11th Floor, Houston, TX 77002 Total number of independent contractors (including but not limited to those listed above) who received more than	Sec	tion B. Independent Contractors	-													
(A) Name and business address Description of services Total number of independent contractors (including but not limited to those listed above) who received more than	1		=	-							· · · · · · · · · · · · · · · · · · ·	pensat	tion fr	om		
Name and business address Description of services Compensation Investment management 130,844.			the calendar ye	ear e	endir	ng w	ith c	or wi	thin		ear.					
JP Morgan Chase, 707 Travis St, 11th Floor, Houston, TX 77002 Total number of independent contractors (including but not limited to those listed above) who received more than			addrass								onvices	0			'n	
Floor, Houston, TX 77002 management 130,844. 2 Total number of independent contractors (including but not limited to those listed above) who received more than	TD			11	+h				\dashv	•	ei vices		ompe	iisalio		
2 Total number of independent contractors (including but not limited to those listed above) who received more than													1 2	n 8	11	
4	1 1	oor, nouscon, ix //ouz								management				0,0		
4																
4																
4																
	2			ot lir	nited	of to			ted	above) who received mo	ore than					

Houston Symphony Endowment

\$100,000 of compensation from the organization

		Chack if Schodula O contain	no o roononoo	or note to any lin	o in this Dort VIII			
		Check if Schedule O contain	ris a response	or note to any iin	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenuè excluded
						function revenue	business revenue	from tax under
			 					sections 512 - 514
nts nts		Federated campaigns			-			
ira ou		Membership dues			-			
s, (Am	С	Fundraising events	1c					
E E	d	Related organizations	1d					
ini	е	Government grants (contribution	ns) 1e					
r Si	f	All other contributions, gifts, grants						
the the		similar amounts not included above	1f 3,	382,449.				
P	g	Noncash contributions included in lines 1a-						
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f			3,382,449.			
				Business Code				
o o	2 a							
ķ	b							
Ser	c							
Z P	d							
gra Re	u 2		_					
Program Service Revenue	4	All other program service revenue						
_	•							
\dashv	<u> </u>	Total. Add lines 2a-2f						
	3			st, and	1,222,254.		-9,827.	1232081.
					1,222,234.		-9,027.	1232001.
	4	Income from investment of tax-e			22,331.			22,331.
	5	Royalties	(i) Real	(ii) Personal	22,331.			44,331.
				(II) Personal				
		Gross rents6a	65,000.		-			
		Less: rental expenses 6b	0.		-			
		` ' —	65,000.		65.000			55 000
					65,000.			65,000.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory 7a 2	26054600					
	b	Less: cost or other basis						
ne		and sales expenses 7b 2	25633070 21,530.					
Revenue	С	Gain or (loss) 7c 4	21,530.					
Re	d	Net gain or (loss)	<u></u>		421,530.		80,345.	341,185.
ЭĒ	8 a	Gross income from fundraising ever	nts (not					
₹		including \$	of					
		contributions reported on line 1	c). See					
		Part IV, line 18	8a					
	b	Less: direct expenses						
	С	Net income or (loss) from fundra						
	9 a	Gross income from gaming activ	-					
		Part IV, line 19	I					
	b	Less: direct expenses						
		Net income or (loss) from gamin						
		Gross sales of inventory, less re						
		and allowances						
	h	Less: cost of goods sold						
		Net income or (loss) from sales						
		Tot moone or hossy norm sales	o. mivoritory	Business Code				
ns	11 a							
e ne								
Miscellaneous Revenue	b					+		
Sce	C							
Ξ̈́		All other revenue						
		Total Add lines 11a-11d			5,113,564.	0	70,518.	1660507
	12	Total revenue. See instructions			O,113,304.	ı U.	. 'A'DTO'	. TOOODD7/•

Form 990 (2022) Houston Symphony Endowment Part IX Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp. Check if Schedule O contains a respons			nplete column (A).	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	_ (D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	4,159,432.	4,159,432.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
^	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	341,544.		341,544.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21 22	Payments to affiliates				
22 23					
23 24	Insurance Other expenses. Itemize expenses not covered				
24	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	· ' '				
b					
c					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,500,976.	4,159,432.	341,544.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2022) Part X Balance Sheet

Га	LA	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			1,752,688.	2	3,264,790.
	3	Pledges and grants receivable, net			3,565,641.	3	4,950,079.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current of	r former	officer, director,			
		trustee, key employee, creator or founder, subs	stantial c	contributor, or 35%			
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqual	lified per	rsons (as defined			
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
<u>s</u>	7	Notes and loans receivable, net				7	1,999,422.
Assets	8	Inventories for sale or use				8	
ğ	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	480,000.			
	b	Less: accumulated depreciation	10b		480,000.	10c	480,000.
	11	Investments - publicly traded securities			50,196,574.	11	45,271,583.
	12	Investments - other securities. See Part IV, line	11		31,461,207.	12	30,488,748.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		0.	15	61,200.	
	16	Total assets. Add lines 1 through 15 (must equ	ual line 3	33)	87,456,110.	16	86,515,822.
	17	Accounts payable and accrued expenses				17	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or form	mer offic	er, director,			
≝		trustee, key employee, creator or founder, subs	stantial c	contributor, or 35%			
Liabilities		controlled entity or family member of any of the	ese perso	ons		22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	ayables	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X	- 4		
		of Schedule D			5,177.		0.
	26	Total liabilities. Add lines 17 through 25			5,177.	26	0.
"		Organizations that follow FASB ASC 958, ch	eck her	e X			
ĕ		and complete lines 27, 28, 32, and 33.			150 600		105 160
<u>la</u>	27	Net assets without donor restrictions			158,688.	27	187,160.
B	28	Net assets with donor restrictions			87,292,245.	28	86,328,662.
ů		Organizations that do not follow FASB ASC 9	958, che	eck here			
Ē		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
Se	30	Paid-in or capital surplus, or land, building, or e				30	
ţΫ́	31	Retained earnings, endowment, accumulated in			00 450 000	31	06 515 000
Se	32	Total net assets or fund balances			87,450,933.	32	86,515,822.
	33	Total liabilities and net assets/fund balances			87,456,110.	33	86,515,822.

Pai	t 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	5,1	.13	, 56	<u> 54.</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,5	00	<u>, 97</u>	<u> 16.</u>		
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 87							
5	Net unrealized gains (losses) on investments	5	-1,5	47	, 69	99.		
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	86,5	15	, 82	22.		
Pai	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X		
				Υ	es	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		🚅	2a		_X_		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		🚅	2b 2	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis Consolidated basis X 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		_X_		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?							
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			Bb				
			Fo	orm 9	90 (2	2022)		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** Houston Symphony Endowment 20-8350227 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Houston Symphony 74-1157373 4,500,976. Society X

0.

4.500.

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.)

Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")									
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3									
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)									
6	Public support. Subtract line 5 from line 4.									
Sec	tion B. Total Support				_	_				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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									
9	Net income from unrelated business									
	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.)									
11	Total support. Add lines 7 through 10									
12	Gross receipts from related activities,	etc. (see instruction	ons)			12				
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)				
	organization, check this box and stop						<u></u>			
	tion C. Computation of Publi									
	Public support percentage for 2022 (I			column (f))		14	<u>%</u>			
	Public support percentage from 2021					15	<u>%</u>			
16a	33 1/3% support test - 2022. If the o	-			14 is 33 1/3% or m	nore, check this box	x and			
_	stop here. The organization qualifies		-							
b	33 1/3% support test - 2021. If the	-								
	and stop here. The organization qual									
17a	7a 10% -facts-and-circumstances test - 2022. 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 fact		•	•	•	VI how the organiz	ation			
	meets the facts-and-circumstances te	-	•		-	47				
b	b 10% -facts-and-circumstances test - 2021. 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 organization									
40	-		-				H			
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 160, 1/a, or 1/k	o, cneck this box a		(Form 000) 2002			

Schedule A (Form 990) 2022 Houston Symphony Endowment Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support		Ī	1	<u> </u>	1	1
alendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6					1	
loa Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3 Total support. (Add lines 9, 10c, 11, and 12.)						
4 First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organization	on,
check this box and stop here	<u></u>	······································	<u></u>	<u></u>	<u></u>	<u></u> [
ection C. Computation of Public	Support Per	centage				
5 Public support percentage for 2022 (lii	ne 8, column (f), d	livided by line 13, o	column (f))		15	
6 Public support percentage from 2021	Schedule A, Part	III, line 15			16	
ection D. Computation of Inves						
7 Investment income percentage for 20	22 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	
8 Investment income percentage from 2	•				18	
9a 33 1/3% support tests - 2022. If the						7 is not
more than 33 1/3%, check this box an						· · ·
b 33 1/3% support tests - 2021. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	
line 18 is not more than 33 1/3%, chec						_
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in:	structions	L

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	V	N.
	Yes	No
1	х	
2		Х
3a		X
3b		
3c		
		v
4a		X
4b		
4c		
5a		X
5b		
5c		
6		Х
7		X
		Х
8		Λ
9a		Х
9b		Х
9c		Х
10a		Х
IVA		
10b		
le A (Forn	n 990)	2022

Pa	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		Х
b	A family member of a person described on line 11a above?	11b		Х
	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		Х
Sec	tion 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			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1	Х	
_	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,	2		х
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	tion of type it dapporting organizations		Vaa	Na
_	Ways a saciality of the appearing time to a structure of the structure of the structure.		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			
800	the supported organization(s). tion D. All Type III Supporting Organizations	1	ш	
566	tion B. 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		<u> </u>
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		<u> </u>
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction	s).	
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	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
b		Ja		
J	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must		·	
Sect	on 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		
Sect	on 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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
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		
Sect	on 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 integrated	Type III supporting orga	nization (see
	instructions).			,

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

232028 12-09-22 Schedule A (Form 990) 2022

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization **Employer identification number** Houston Symphony Endowment 20-8350227 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization Employer identification number

Houston Symphony Endowment

20-8350227

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,500,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,000,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	\$ 231,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>100,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Houston Symphony Endowment

20-8350227

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 36,193.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		5,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions - \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Occupate Part II for noncash contributions.)

Houston Symphony Endowment

20-8350227

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - \$				

Name of organization **Employer identification number** Houston Symphony Endowment 20-8350227 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

Houston Symphony Endowment

Employer identification number 20-8350227

Pai	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, line	e 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds			
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only			
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	conferring			
_						
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recreated	tion or education) Preservation o	f a historically important land area			
	Protection of natural habitat	Preservation o	f a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form				
	day of the tax year.		Held at the End of the Tax Year			
	Total number of conservation easements		1 1			
	Number of conservation easements on a certified historic stru		2c			
d	Number of conservation easements included in (c) acquired a	•				
_	historic structure listed in the National Register					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax			
4	year	somest is leasted				
4	Number of states where property subject to conservation eas					
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements it		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
Ü	ctan and volunteer hours devoted to morntoning, inspecting,	rialitating of violations, and emoroting con-	servation easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation easements during the year			
•	Amount of expenses mounted in monitoring, inspecting, mand	ming of violations, and emoreing conserve	tion casements during the year			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)			
Ū						
9	In Part XIII, describe how the organization reports conservation					
_	balance sheet, and include, if applicable, the text of the footn	·				
	organization's accounting for conservation easements.					
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.			
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	and balance sheet works			
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in fu	urtherance of public			
	service, provide in Part XIII the text of the footnote to its finan					
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sheet works of			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	herance of public service,			
	provide the following amounts relating to these items:		·			
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
			•			
2	If the organization received or held works of art, historical treat					
	the following amounts required to be reported under FASB A					
а	Revenue included on Form 990, Part VIII, line 1	•	\$			
L	Accets included in Form 900. Part V		Φ			

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land	480,000.			480,000.	
b Buildings					
c Leasehold improvements					
d Equipment					
e Other					
Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 Houston S	ymphony Endowmer	nt	20-8350227 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Y		1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of secur	ity) (b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) Private equity funds	30,488,748.	End-of-Year Mark	et Value
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	30,488,748.		
Part VIII Investments - Program Related			
Complete if the organization answered "Y	es" on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Y	es" on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(7)			
(8)			
(9)			
• •	\ line 15 \		
Total. (Column (b) must equal Form 990, Part X, col. (B Part X Other Liabilities.) line 15.)		
Complete if the organization answered "Y	es" on Form 990 Part IV line 1	1e or 11f See Form 990 Part X line	e 25
(a) Description of liability		110 01 1111 000 1 0111 000, 1 4117, 1111	(b) Book value
() ()			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B)			
2. Liability for uncertain tax positions. In Part XIII, pro	vide the text of the footnote to	the organization's financial statemer	its that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

<u>Sche</u>	dule D (Form 990) 2022 Houston Symphony Endowment				8350227	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wit	th Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	3,224,	<u>321.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		i			
а	Net unrealized gains (losses) on investments	2a	-1,547,699.			
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	-1,547,	
3	Subtract line 2e from line 1			3	4,772,	020.
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	341,544.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c	341,	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,113,	564.
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	ents W	ith Expenses per F	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	4,159,	432.
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					
С	Other losses	2c				
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	4,159,	432.
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	341,544.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c	341,	544.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,500,	976.
Pai	t XIII Supplemental Information.					
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines	1b and 2b; Part V, line 4	; Part 2	X, line 2; Part XI	,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional inf	ormation.			

Part V, line 4:

Houston Symphony Endowment (the Endowment) was established to support the operations of the Houston Symphony Society (the Society). The Endowment holds contributed funds in perpetuity, invests those funds, and makes contributions from time to time to the Society. Such contributions must meet the stated restrictions of donors as well as the current policies of the Endowment. The Endowment is governed by a Board of Directors who are elected by the officers of the Board of Directors of the Society.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

name of the organization					Employer identi	fication number
Houston Symphon	v Endowme	ent			20-835022	27
Part I General Infor	mation on A	ctivities Out	side the United States. Comple	te if the organ		
Form 990, Part IV						
			ds to substantiate the amount of its grar			
the grantees' eligibility for	or the grants or a	assistance, and t	the selection criteria used to award the o	grants or assis	stance?	Yes No
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	arante and ot	her assistance out	side the
United States.	TIDE IIII art V tile	organization 3	or occurred for mornioning the use of its	grants and ot	ner assistance out	side trie
	ne following Part	I, line 3 table ca	an be duplicated if additional space is ne	eded.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total expenditures
	offices in the region	employees, agents, and independent	(by type) (such as, fundraising, program services, investments, grants to		gram service, e specific type	for and
	in the region	contractors	recipients located in the region)		(s) in the region	investments in the region
		in the region				in the region
Europe (Including						
Iceland & Greenland)	0	0	Investments			1,011,381.
Central America and						
the Caribbean	0	0	 Investments			10,655,649.
						' ' '
						1
2 a Cubtotal	0	0				11,667,030.
3 a Subtotal b Total from continuation	<u> </u>					11,007,030.
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				11,667,030.

20-8350227

Grants and Other Assistance to Organizations or Entities Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
recipient who received more than \$5,000. Part II can be duplicated if additional space is n	needed.

Houston Symphony Endowment

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ecognized as charities by the f					
exempt 501(c)(3) orga 3 Enter total number of			or counsel has provided a sect	ion 501(c)(3) equ	uvalency letter	>		

Part III Grants and Other Assist			ites. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
Part III can be duplicated (a) Type of grant or assistance	if additional space is neede	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2022 I Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

Name of the organization Houston Symphony Endowment							Employer identification number 20-8350227
Part I General Information on Grants a							
Does the organization maintain records or criteria used to award the grants or assis Describe in Part IV the organization's properties. Part II Grants and Other Assistance to	stance? ocedures for monit Domestic Organia	oring the use of grant	funds in the United	d States. Complete if the organization			X Yes No
1 (a) Name and address of organization or government	\$5,000. Part II can	be duplicated if addit (c) IRC section (if applicable)	(d) Amount of cash grant	ed. (e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Houston Symphony Society 615 Louisiana Houston, TX 77002	74-1157373	501(c)(3)	3,809,565.	0.			Support ongoing operations
Houston Symphony Society 615 Louisiana Houston, TX 77002	74-1157373	501(c)(3)	349,867.	0.			Admin & fundraising expenses
 Enter total number of section 501(c)(3) a Enter total number of other organizations 							•

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete ii tile	organization answ	- Clear Tes Off Tolling	50, 1 art IV, III 6 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, line	e 2; Part III, column	(b); and any other ac	ditional information.	
Part I, Line 2:					
The Endowment Trustees require reg	ılar upda	tes from t	the Houston	Symphony	
-					
Society's management team. The gra				<u> </u>	
based on the Endowment's investment	perform	ance. The	Endowment	Trustees	
have chosen to provide support for	administ	rative and	d fundraisi	ng efforts	
by the Society on behalf of the End	dowment.				

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Attach to Form 990.

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

Houston Symphony Endowment

Employer identification number 20-8350227

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		<u>X</u>
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		v
	The organization?	5a		X
D	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.	5b		
6				
6				
_	contingent on the net earnings of:	60		Х
	The organization? Any related organization?	6a 6b		X
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	OD		-21
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
'	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
0		8		Х
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
9	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) John Mangum	(i)	0.	0.	0.	0.	0.		0.
Symphony CEO	(ii)	421,321.	50,335.	0.	16,784.	31,582.		0.
(2) Elizabeth Condic	(i)	0.	0.	0.	0.	0.		0.
CFO	(ii)	201,426.	10,000.	0.	10,018.	24,324.	245,768.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022	Houston Symphony Endowment	20-8350227	Page 3
Part III Supplemental Informa	tion		
Provide the information, explanat	ion, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and	for Part II. Also complete this part for any additional information	n.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Houston Symphony Endowment

Employer identification number 20-8350227

Form 990, Part VI, Section A, line 7a:

The officers of the Houston Symphony Society (the Society) designate for three-year terms qualified persons to succeed the directors whose terms next expire. At least one of such persons designated annually to serve as director must be a person who is serving as a member of the Board of Trustees of the Society at the time of such person's designation as a director. The President of the Society may not be designated to serve as a voting member of the Board of Directors of the Endowment.

Form 990, Part VI, Section A, line 7b:

The Certificate of Formation may only be amended with the joint approval of the governing body of the Houston Symphony Society and the Houston Symphony Endowment.

Form 990, Part VI, Section B, line 11b:

The Houston Symphony Endowment's Form 990 is reviewed by the Houston

Symphony Society's Controller and CFO. After internal review, the Form 990

is sent to the Board of Directors electronically for their review,

questions, and suggested edits. Once their review is complete, the Form 990

is filed electronically with the IRS.

Form 990, Part VI, Section B, Line 12c:

Each year the Board discusses any potential conflicts of interest that are brought to their attention based on the conflict of interest policy statements signed by Board members.

Schedule O (Form 990) 2022 Page **2**

Name of the organization Houston Symphony Endowment	Employer identification number 20-8350227
Form 990, Part VI, Section C, Line 19:	
The Houston Symphony Endowment makes its financial stateme	nts available on
a consolidated basis with the Houston Symphony Society on	the Houston
Symphony Society website. The 990 is available on the webs	ite for the
Endowment. Financial statements, the conflict of interest	policy and all
governing documents are available upon request.	
Form 990, Part V & VI - Employees and policies	
The Endowment has no employees. All management functions a	re performed
by employees of the Houston Symphony Society. The Society	has all
appropriate policies in place, including whistleblower and	document
retention policies.	
Form 990, Part XII, Line 2 - Change of Oversight or Select	ion Process
The Board of Directors reviews the financial statements an	d Form 990.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

Attach to Form 990.

Houston Symphony Endowment

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

20-8350227

	nouseon sympa	10117 11100 11110110					_		
Part I	Identification of Disregarded Entities. Comp	olete if the organization answered "	Yes" on Form 990, Part IV, line 3	3.					
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-yea		esets Direct c		9
Part II	Identification of Related Tax-Exempt Organ organizations during the tax year.	izations. Complete if the organizat	tion answered "Yes" on Form 990	0, Part IV, line 34,	pecause it had one	or more	related tax-exer	npt	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		(f) et controlling entity	ent	rolled ity?
Houston	n Symphony Society - 74-1157373				301(0)(0))			Yes	No
	isiana, Jones Hall								
Houston	n, TX 77002	Symphony Orchestra	Texas	501(c)(3)	Line 7	N/A			Х

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization (b) Primary activity Primary activity Of related organization (c) Legal domicile (state or foreign country) Primary activity Of related organization (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income Of related, unrelated, excluded from tax under sections 512-514) (g) Share of total income Of rend-of-year assets (h) Disproportionate allocations? Of Schedule K-1 (Form 1065) Yes No (i) General or managing partner? Yes No
Name, address, and EIN of related organization Primary activity Primary activity Primary activity Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Primary
toreign country) State of foreign country excluded from tax under sections 512-514) assets 20 of Schedule Factor Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes Yes
Country Sections 512-514) Yes No K-1 (Form 1065) Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		tion b)(13) rolled tity?
		country)		ŕ				Yes	No
	1								
]								
]								
]								
	1								
]								
	1								

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

Yes No

X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	X		
С	Gift, grant, or capital contribution from related organization(s)				1c		<u>X</u>	
d	Loans or loan guarantees to or for related organization(s)				. 1d	X		
е	Loans or loan guarantees by related organization(s)				. 1e		<u>X</u>	
f	Dividends from related organization(s)				. 1f		_X_	
g	Sale of assets to related organization(s)				. 1g		<u>X</u>	
h	Purchase of assets from related organization(s)				. 1h		X	
i	Exchange of assets with related organization(s)				. 1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>		<u>X</u>	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		<u>X</u>	
I	Performance of services or membership or fundraising solicitations for related organ				11	L	X	
	Performance of services or membership or fundraising solicitations by related organ					X		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			<u>1n</u>	X		
0	o Sharing of paid employees with related organization(s)							
р	Reimbursement paid to related organization(s) for expenses				1 p	X		
q	Reimbursement paid by related organization(s) for expenses				1q	Х		
							77	
							<u>X</u>	
	Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th I	is line, including covered rela	ationships and transaction thresholds.				
	(a) Name of related organization	(b)	(c)	(d)				
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount	invoivea			
		3) p 5 (a 5)						
/ 4 \								
(1)								
(O)								
(2)								
(3)								
(3)								
(4)								
(-7)								
(5)								
/								
(6)								
	09-14-22	1		Sched	ıle R (For	m 990)	2022	
				Comoun				

Schedule R (Form 990) 2022

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
									000) 0000

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

• Go to www.irs.gov/Form926 for instructions and the latest information.

Part I U.S. Transferor Information (see instructions)

Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

ı a	o.e. Transferor information (see instructions)							
Nam	e of transferor		Identifyin	g numb	er (see ins	structions)		
Н	ouston Symphony Endowment							
			20-8	350	227			
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?			Yes	X	No		
2	If the transferor was a corporation, complete questions 2a through 2d.					110		
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by							
	five or fewer domestic corporations?			Yes		No		
b	Did the transferor remain in existence after the transfer?		[X]	Yes		No		
	If not, list the controlling shareholder(s) and their identifying number(s).							
	Controlling shareholder	Ider	ntifying n	umber				
						1		
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation	on?	Ш	Yes		No		
	If not, list the name and employer identification number (EIN) of the parent corporation.							
	Name of parent corporation	EIN of p	parent co	rporati	ion			
					77			
d	Have basis adjustments under section 367(a)(4) been made?		Ш	Yes	X	No		
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under	er section	า 367),					
	complete questions 3a through 3d.							
а	List the name and EIN of the transferor's partnership.							
	Name of partnership	EIN	of partn	ership				
	Did the partner pick up its pre-rate chare of rain on the transfer of partnership secrets?			Yes		Ne		
b	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		├┤		H	No		
С	Is the partner disposing of its entire interest in the partnership?		\square	Yes	Ш	No		
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established							
	securities market?	<u></u> .	. 🔲	Yes		No		
Pa	rt II Transferee Foreign Corporation Information (see instructions)							
4	Name of transferee (foreign corporation)	5a lo	dentifying	g numb	er, if a	ny		
Pl	EG Global PE IX Offshore Special LP							
6	Address (including country)	5h F	Reference	ID num	nber			
	e Capital Place, PO Box 847			.D .iuii				
		יים כו	ССББТ	ν.				
	and Cayman KY1-1103 Cayman Islands	<u> PE</u>	GGPEI	.Λ				
7	Country code of country of incorporation or organization							
_Ci								
8	Foreign law characterization (see instructions)							
_Ca	ayman Limited Partnership							
9	Is the transferee foreign corporation a controlled foreign corporation?		🔲	Yes	X	No		

Part III Information	Regarding Trans	s fer of Property (see i	instructions)		
Section A - Cash		·			
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash Stmt 11		property	date of transier	Dasis	เนารายา
10 Was cash the only pro If "Yes," skip the rema	operty transferred?	o to Part IV.			X Yes No
Section B - Other Pro	perty (other than	n intangible property			
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with					
built-in loss					
					
Totals					
(including a branch the If "Yes," continue to lince Immediately after the transferee foreign corplif "Yes," continue to lince Immediately after the transferred In the transferred In the transferor transfer If "No," skip Section Continue In Immediately after the transferor tr	foreign branch (including the composition of the co	hat transferred substantially rded entity) to a specified 10 nes 12c and 12d, and go to estic corporation a U.S. shame 12d, and go to line 13. in gross income as required ad in section 367(d)(4)?	n disregarded entity) transfe v all of the assets of a foreig 0%-owned foreign corporation line 13. reholder with respect to the	rred to a n branch on?	YesNoYesNoYesNoYesNo
Section C - Intangible	Property Subject	ct to Section 367(d)			-
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length prid on date of transf		(f) Income inclusion for year of transfer
Property described					
in sec. 367(d)(4)					
11 330. 007 (a)(4)					
			+ + +		
			+ + -		
					
Totals					

Form	1926 (Rev. 11-2018) Houston Symphony Endowment	20-8350227	Page 3
14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		140
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$\bigs\\$\$		
45	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
15		□ v _{aa}	N
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	└── No
6	plamental Dout III Information Deguired To Be Departed (and instructions)		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
· u	Traditional mornation mogalitating transfer of tropolity (666 moradonomo)		
40			
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After % TRG Goothican 3.51		
17	Type of nonrecognition transaction (see instructions) ► IRC Section 351		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)		X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987	Yes	X No
19	Did this transfer result from a change in entity classification?		X No
20 a		Yes	X No
	If "Yes," complete lines 20b and 20c.		
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the	🚩 🔻	
·		Yes	No
21		Yes	NO
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation	Yes	X No
	covered by section 367(e)(1)? See instructions	L Tes	LAL INO

Form **926** (Rev. 11-2018)

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

▶ Go to www.irs.gov/Form926 for instructions and the latest information.

Internal Revenue Service Attach to your income tax return for the year of the transfer or distribution.

Part I U.S. Transferor Information (see instructions)

OMB No. 1545-0026

Attachment Sequence No. **128**

Tatti C.C. Italisiero mornaton (see instructions)	T.,
Name of transferor	Identifying number (see instructions)
Houston Symphony Endowment	20 0250007
	20-8350227
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?	Yes X No
2 If the transferor was a corporation, complete questions 2a through 2d.	
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by	
five or fewer domestic corporations?	Yes No
b Did the transferor remain in existence after the transfer?	X Yes No
If not, list the controlling shareholder(s) and their identifying number(s).	
Controlling shareholder	Identifying number
c If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation	n? Yes No
If not, list the name and employer identification number (EIN) of the parent corporation.	
Name of parent corporation	EIN of parent corporation
d Have basis adjustments under section 367(a)(4) been made?	Yes X No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such unde	er section 367),
complete questions 3a through 3d.	,,
a List the name and EIN of the transferor's partnership.	
Name of partnership	EIN of partnership
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	Yes No
c Is the partner disposing of its entire interest in the partnership?	
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	163
securities market?	Yes No
Part II Transferee Foreign Corporation Information (see instructions)	resNO
	For Intentifying numbers if any
4 Name of transferee (foreign corporation)	5a Identifying number, if any
ACE WIII Infractoughung Drivete Investors Offshore CICA	
ASF VIII Infrastructure Private Investors Offshore SICA	+ <u> </u>
6 Address (including country)	5b Reference ID number
c/o JP Morgan Private Investments, 383 Madison Ave	3.00000
New York, NY 10179	ASFVIIIO
7 Country code of country of incorporation or organization	
LU	
8 Foreign law characterization (see instructions)	
Special Limited Partnership	
9 Is the transferee foreign corporation a controlled foreign corporation?	Yes X No

Part III Information	Regarding Trans	fer of Property (see	instruction	ons)		
Section A - Cash						
Type of	(a) Date of	(b) Description of	Fair ma	(c) arket value on	(d) Cost or other	(e) Gain recognized on
property	transfer	property		of transfer	basis	transfer
Cash Stmt 12						
10 Was cash the only pro	operty transferred?	to Part IV.				Yes No
Section B - Other Pro	perty (other than	intangible property	subject t	to section 367	(d))	
Type of	(a)	(b)		(c)	(d)	(e)
property	Date of transfer	Description of property		arket value on of transfer	Cost or other basis	Gain recògnized on transfer
Stock and	1.0.1.0.0.	p. 0 p 0			24010	114110101
securities						
Inventory						
Other property						
(not listed under						
another category)						
Property with						
built-in loss				+		
T-4-1-				+	-	
Totals						
(including a branch the If "Yes," continue to lince Immediately after the transferee foreign corp. If "Yes," continue to lince Immediately after the transferred lince	lomestic corporation that is a foreign disregard ne 12c. If "No," skip lintransfer, was the dome poration? ne 12d. If "No," skip linter 12d. If "No	nat transferred substantialleded entity) to a specified 1 les 12c and 12d, and go to estic corporation a U.S. shame 12d, and go to line 13. In gross income as required in section 367(d)(4)?	y all of the a 0%-owned f o line 13. areholder w	assets of a foreign to a foreign corporation to the ith respect to the	pranch	Yes No Yes No Yes No Yes No
Section 6 - Intangible		t to section sor(u)			Ι	
Type of property	(a) Date of transfer	(b) Description of property		(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described						
in sec. 367(d)(4)						
					1	
					1	
Totals						orm 926 (Rev. 11-2018)
						000 426 (867 11-2018)

Form	1926 (Rev. 11-2018) Houston Symphony Endowment	20-8350227	Page 3
			_
14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	163	140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$\bigs\\$\$		
45	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
15		□ v _{aa}	N
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
6	plamental Dout III Information Deguired To Be Departed (and instructions)		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
· u	Traditional mornation mogalitating transfer of tropolity (coo moradonono)		
40			
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After % TRG Goothican 3.51		
17	Type of nonrecognition transaction (see instructions) ▶ IRC Section 351		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)		X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987	Yes	X No
19	Did this transfer result from a change in entity classification?		X No
20 a		Yes	X No
	If "Yes," complete lines 20b and 20c.		
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the	🚩 🔻	
·		Yes	No
21		Yes	140
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation	Yes	X No
	covered by section 367(e)(1)? See instructions	L Tes	LAL INO

Form **926** (Rev. 11-2018)

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Parti	5.5. Transferor information (see instructions)		
Name of tran	Identifying number (see instructions)		
Housto			
		20-8350227	
	ransferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?	Yes X No	
2 If the tr	ansferor was a corporation, complete questions 2a through 2d.		
a If the tr	ansfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by		
five or	ewer domestic corporations?	Yes No	
b Did the	transferor remain in existence after the transfer?	X Yes No	
If not, I	ist the controlling shareholder(s) and their identifying number(s).		
	Controlling shareholder Id	lentifying number	
	ansferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? ist the name and employer identification number (EIN) of the parent corporation.	Yes No	
	Name of parent corporation EIN c	of parent corporation	
d Have b	asis adjustments under section 367(a)(4) been made?	Yes X No	
u nave b	asis adjustments under section our (a)(4) been made:		
3 If the tr	ansferor was a partner in a partnership that was the actual transferor (but is not treated as such under sect	tion 367).	
	te questions 3a through 3d.	,	
	name and EIN of the transferor's partnership.		
	Name of partnership	IN of partnership	
b Did the	partner pick up its pro rata share of gain on the transfer of partnership assets?	Yes No	
	partner disposing of its entire interest in the partnership?	Yes No	
-	partner disposing of an interest in a limited partnership that is regularly traded on an established	······	
	es market?	Yes No	
	ransferee Foreign Corporation Information (see instructions)		
4 Name	of transferee (foreign corporation) 5a	Identifying number, if any	
HPS SI	P V Private Investors Offshore I SICAV-RAIF SCSp		
		Reference ID number	
c/o JP	Morgan, 390 Madison Ave, Floor 6		
New Yor	k, NY 10017 H	PSSIPV	
	y code of country of incorporation or organization		
LU			
•	law characterization (see instructions)		
Specia	l Limited Partnership		
9 Is the t	ransferee foreign corporation a controlled foreign corporation?	Yes X No	

Part III Information	Regarding Trans	sfer of Property (see	instructions)		
Section A - Cash					
Type of property	(a) Date of transfer	(b) Description of	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash Stmt 13		property	date of transfer	Dasis	transier
10 Was cash the only pro If "Yes," skip the rema	pperty transferred?				X Yes No
Section B - Other Pro	perty (other than	intangible property	subject to section 36	67(d))	
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property					
(not listed under					
another category)					
Property with					
built-in loss					
 Totals					
(including a branch that if "Yes," continue to lince Immediately after the transferee foreign corp. If "Yes," continue to lince Immediately after the transferred of Immediately after the transferred of Immediately Immediat	foreign branch (including). John Stick Corporation to the stick of the stick corporation to the stick of the	hat transferred substantially ded entity) to a specified 10 nes 12c and 12d, and go to estic corporation a U.S. shame 12d, and go to line 13. In gross income as required in section 367(d)(4)?	y all of the assets of a foreig 0%-owned foreign corporati line 13. areholder with respect to th	erred to a	YesNo
Section C - Intangible	Property Subject	ct to Section 367(d)			1
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pri on date of trans	(e) ce Cost or other fer basis	(f) Income inclusion for year of transfer
Property described					
in sec. 367(d)(4)					
Totala					
Totals				<u> </u>	Form 026 (Dov. 11 2019)

Form	1926 (Rev. 11-2018) Houston Symphony Endowment	20-8350227	Page 3
			_
14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		
	reasonably anticipated to exceed 20 years?	Yes	No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		□ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
·	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
ч	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	163	140
u	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
	Regulations section 1.367(d)-1(c)(3)(ii) \$\bigs\\$\$		
45	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
15		□ v _{aa}	N
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
6	plamental Dout III Information Deguired To Be Departed (and instructions)		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
· u	Traditional mornation mogalitating transfer of tropolity (666 moradonomo)		
40			
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After % TRG Goothican 3.51		
17	Type of nonrecognition transaction (see instructions) ▶ IRC Section 351		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)		X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987	Yes	X No
19	Did this transfer result from a change in entity classification?		X No
20 a		Yes	X No
	If "Yes," complete lines 20b and 20c.		
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	> \$	
	Did the domestic corporation not recognize gain or loss on the distribution of property because the	🚩 🔻	
·		Yes	No
21		Yes	140
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation	Yes	X No
	covered by section 367(e)(1)? See instructions	L Tes	LAL INO

Form **926** (Rev. 11-2018)

Form 926	Part III - Information Regarding Transfer of Property	Statement 11
	Cash	
(a) Date of transfer	(c) Fair market value on date of transfer	
08/31/2022 02/28/2023 03/31/2023	220,994. 276,243. 497,388.	
	994,625.	

Form 926	Part III - Information Regarding Transfer of Property	Statement 12
	Cash	
(a) Date of transfer	(c) Fair market value on date of transfer	
08/31/2022 09/30/2022 03/31/2023	18,904. 73,178. 58,330.	
	150,412.	

Form 926	Part III - Information Regarding Transfer of Property	Statement 13
	Cash	
(a) Date of transfer	(c) Fair market value on date of transfer	
09/30/2022 12/31/2022 01/31/2023	500,275. 257,382. 234,203.	
	991,860.	

Forms included in Electronic Filing

Form 990/990-EZ/990-PF	Form 990-T
Exported on 04/09/2024 22:04:23	Exported on 04/09/2024 22:04:48
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