

NOTICE OF SPECIAL TOURISM ADVISORY COMMITTEE MEETING CITY OF TOMBALL, TEXAS



**Tuesday, August 26, 2025
3:00 P.M.**

Notice is hereby given of a meeting of the City of Tomball Tourism Advisory Committee, to be held on Tuesday, August 26, 2025 at 3:00 P.M., City Hall, 401 Market Street, Tomball, Texas 77375, for the purpose of considering the following agenda items. All agenda items are subject to action. The Tourism Advisory Committee reserves the right to meet in a closed session for consultation with attorney on any agenda item should the need arise and if applicable pursuant to authorization by Title 5, Chapter 551, of the Texas Government Code.

- A. Call to Order
- B. Public Comments and Receipt of Petitions; *[At this time, anyone will be allowed to speak on any matter other than personnel matters or matters under litigation, for length of time not to exceed three minutes. No Council/Board discussion or action may take place on a matter until such matter has been placed on an agenda and posted in accordance with law - GC, 551.042.]*
- C. Approval of Minutes
 - 1. Approve Minutes of July 9, 2025, Tourism Advisory Committee meeting.
- D. New Business
 - 2. Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Spring Creek Historical Museum.
 - 3. Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Prevailing Winds Community Band.
 - 4. Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the German Heritage Festival.
 - 5. Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the German Christmas Market.

- [6.](#) Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Annual Holiday Parade.
- [7.](#) Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Visitor Center.
- [8.](#) Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Tomball Night.

E. Adjournment

C E R T I F I C A T I O N

I hereby certify that the above notice of meeting was posted on the bulletin board of City Hall, City of Tomball, Texas, a place readily accessible to the general public at all times, on the 20th day of August 2025 by 5:00 PM, and remained posted for at least 72 continuous hours preceding the scheduled time of said meeting

Thomas Harris III, TRMC
City Secretary

This facility is wheelchair accessible and accessible parking spaces are available. Requests for accommodations or interpretive services must be made 48 hours prior to this meeting. Please contact the City Secretary's office at (281) 290-1019 for further information.

City Council Meeting

Agenda Item

Data Sheet

Meeting Date: August 26, 2025

Topic:

Approve Minutes of July 9, 2025, Tourism Advisory Committee meeting.

Background:

Origination: City Secretary Office

Recommendation:

Approve Minutes

Party(ies) responsible for placing this item on agenda:

Shannon Bennett, Assistant City
Secretary

FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____

If yes, specify Account Number: # _____

If no, funds will be transferred from account # _____

To # _____
account _____

Signed _____

Staff Member

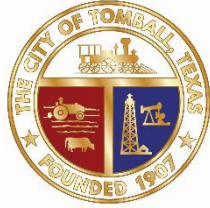
Date _____

Approved by _____

City Manager

Date _____

MINUTES OF SPECIAL TOURISM ADVISORY COMMITTEE MEETING CITY OF TOMBALL, TEXAS



**Wednesday, July 09, 2025
3:00 P.M.**

The City Council of the City of Tomball, Texas, conducted the meeting scheduled for July 09, 2025, 3:00 P.M., at 501 James Street, Tomball, Texas 77375.

- A. Committee Vice Chairman Melanie Sutton called the meeting to order at 3:08 P.M.

Present:

Melanie Sutton
Angie Johnson
Larissa Roberts
Amanda Kelly
Lori Ball
Kelly Violette
Amy Mason

Absent:

Jeffie Cappadona
Katie Whisler
Amanda Trickey
Eric Berger

City Staff Present:

Assistant City Manager- Jessica Rogers
Director of Marketing & Tourism – Chrislord Templonuevo
City Secretary – Thomas Harris III
Assistant City Secretary – Shannon Bennett

- B. Public Comments and Receipt of Petitions; *[At this time, anyone will be allowed to speak on any matter other than personnel matters or matters under litigation, for length of time not to exceed three minutes. No Council/Board discussion or action may take place on a matter until such matter has been placed on an agenda and posted in accordance with law - GC, 551.042.]*

No comments were received.

C. Approval of Minutes

1. Approve Minutes of May 22, 2025, Tourism Advisory Committee meeting.

A motion was made by Amanda Kelly, seconded by Larrisa Roberts to approve the minutes of May 2, 2025.

Voting Yea: Melanie Sutton, Angie Johnson, Larissa Roberts,
Amanda Kelly, Lori Ball

Absent: Jeffie Cappadonna, Katie Whisler, Eric Berger

Motion carried unanimously.

New Business

1. Discussion of findings from Westwood regarding the initial meeting of Tomball Gateway and Wayfinding Committee.

Patrick Owens with Westwood presented a timeline of the conceptual designs.

D. Adjournment

Motion was made by Amanda Kelly, seconded by Angie Johnson to adjourn the meeting at 4:26 P.M.

Voting Yea: Melanie Sutton, Angie Johnson, Larissa Roberts,
Amanda Kelly, Lori Ball

Absent: Jeffie Cappadonna, Katie Whisler, Eric Berger

Motion carried unanimously.

PASSED AND APPROVED this the 26th day of August 2025.

Thomas Harris III, TRMC
City Secretary

Jeffie Cappadonna
Chairman

City Council Meeting Agenda Item Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Spring Creek Historical Museum.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the Spring Creek Historical Museum to illustrate the history, culture and daily life of the Tomball area and north Harris County.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____ If yes, specify Account Number: # _____

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball

Hotel Occupancy Tax Grant Program

Funding Year: October 1, 2025 through September 30, 2026

Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: SPRING CREEK COUNTY HISTORICAL ASSOC.

Street Address: 510 Pine Street

City: Tomball State: TX Zip Code: 77375

Contact Name: Rayford Lynn McCoy

Role with Organization/Business: President, Board of Directors

Phone Number: 281-384-2621 Email: rayford.mccoy@gmail.com

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

Promotion & preservation of objects which establish or illustrate the history, culture & daily life in the area of Tomball and Northern Harris County

Section II: Event/Program Information

Event/Program Name: Tomball Museum Center

Date(s) of Event/Program: Continuously through out year

Location of Event/Program (Provide the address or a general location):

510 Pine Street (Approx. 9 acres)

Website for Event/Program: tomballmuseumcenter.com

Is this a new event/program? ☐ yes ☒ No

If this is not a new event/program, how long has the event/program operated?

since 1965 (60 years continuously)

Provide a detailed description of the event/program.

Museum has scheduled operations three days a week and at other times by appointment. On Valentines Day, the Museum hosts a Weddings event, in conjunction with the City of Tomball and Harris County. This past year, we had 27 couples married at the Historical Museum and television coverage on the Channel 11 evening news. We provide many tours (each approx. 4 school buses in size) for the surrounding elementary schools. The museum also hosts antique car shows and quilting exhibitions. In the Fall/Winter, the host "Candlelight Tours" with Holiday/Christmas decorations. We provide a venue for the Memorial Day celebration at the Museum World War II Memorial.

Estimated Local Attendees at Event/Program: in excess of 5,000

Estimated Out of Town Attendees at Event/Program: ABOUT HALF

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program. \$ 69000

Total operating budget for event/program. \$ 89000

Percent of event/program to be funded by grant. 77 %

Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures. \$ 4000

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

SEE ATTACHED DESCRIPTION(S)

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

☒ Paid Advertising
 ☐ Radio
 ☒ Television
 ☒ Brochures
☒ Social Media
 ☒ Newspaper
 ☒ Online/Digital Ads
 ☒ Press Release
☒ Other (please specify) _____

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

SEE INCLUDED BROCHURES AND ATTACHED DESCRIPTIONS

How will you measure the impact of your event on local overnight accommodations?

SEE ATTACHED DESCRIPTIONS

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☒ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☒ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☒ Encouragement, promotion, improvement, and application of the arts.
☒ Historical restoration or preservation programs.
☒ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization's most recent annual budget.
3. Organization's most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization's balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: _____

Applicant Printed Name: Rayford Lynn McCoy

Date of Application: 6/20/25

TOMBALL MUSEUM CENTER

FY 25-26 HOT REQUEST

<u>CATEGORY</u>	<u>AMOUNT</u>	<u>CATEGORY CUM.</u>
STRUCTURAL REPAIRS		
THEIS HOUSE LEVELING & STABILIZATION	15500	15500
SCHOOL HOUSE SIDING AND ROOF	5500	21000
PROVIDE FOR DRAINAGE ON "PARADE GROUNDS"	3000	24000
MAINTENANCE/PAINTING		
CHURCH PAINTING, SIDING & TERMITE TREATMENT	6000	6000
SCHOOLHOUSE PAINTING, SIDING & TERMITE TREATMENT	4000	10000
FELLOWSHIP HALL PAINTING, SIDING & TERMITE TREATMENT	3500	13500
OIL CAMP HOUSE, REPAIR/REPLACE FRONT & REAR DOORS	1500	15000
COMMUNITY EVENTS		
CANDLELIGHT TOURS (ASSOC. WITH GERMAN FESTIVAL	4500	4500
VALENTINE'S DAY WEDDING EVENT	2500	7000
OTHER ON-SITE MUSEUM EVENTS	1500	8500
(such as Halloween, Quilt and Craft Show, etc.)		
LANDSCAPING		
APPROX. 9 ACRES, BI-WEEKLY	7500	7500
UTILITIES		
ELECTRICITY	8000	8000
CITY OF TOMBALL (4 METERS/BILLS)	4000	12000
ADVERTISING & PUBLIC RELATIONS		
WEBSITE AND PRINTING COSTS	2000	2000
REQUEST TOTAL FOR FY 25_26		69000

ORGANIZED BUDGET FOR 2025-2026

CATEGORY	CITY FUNDS	OTHER FUNDS	TOTAL
STRUCTURAL REPAIRS	24000		24000
MAINTENANCE & PAINTING	15000	1000	16000
COMMUNITY EVENTS	8500	2000	10500
LANDSCAPING	7500	500	8000
UTILITIES	12000	2000	14000
ADVERTISING & PUBLIC RELATIONS	2000	1500	3500
MISCELLANEOUS		1000	1000
PERSONNEL		12000	12000
TOTALS	69000	20000	89000

SPRING CREEK COUNTY HISTORICAL ASSOCIATION

BOARD OF DIRECTORS

<u>INDIVIDUAL</u>	<u>ADDRESS</u>	<u>CITY</u>	<u>ZIP</u>	<u>PHONE</u>	<u>E-MAIL</u>
LYNN MCCOY	31215 HELEN LANE	TOMBALL		77375 281-384-2621	rayford.mccoy@gmail.com
DEE McSHAN	16396 CLEARWATER CIRCLE	MONTGOMERY		77356 281-757-7746	d designs76@yahoo.com
BECKY CLEPPER	713 CLAYTON ST.	TOMBALL		77375 713-702-3513	heartbeckkyc@gmail.com
PAMELA KAISER	815 BAKER DR.	TOMBALL		77375 281-636-1824	pkaiser54@yahoo.com
BOBBY RUSSELL	PO BOX 1862	TOMBALL		77377 281-610-6685	Bearkats73@aol.com
CECILIE LANG	15119 TIMBERSHIRE COURT	MAGNOLIA		77355 281-252-0943	griang@yahoo.com
JOHN McSHAN	16396 CLEARWATER CIRCLE	MONTGOMERY		77356	jmcshan76@yahoo.com
KAITLIN IRELAND	22707 WIXFORD LANE	TOMBALL		77375	kireland731@gmail.com
ROSE HUBBARD	54 CASSENA GROVE PL.	TOMBALL		77375 281-757-0994	heartrosemaryh@gmail.com
MARY McCoy	31215 HELEN LN.	TOMBALL		77375 281-507-8693	marymccoy06@gmail.com
JOANN EHRHARDT	6607 KLEIN CEMETARY RD.	KLEIN		77379 713-376-0188	joann6607@gmail.com

MUSEUM - HOT ATTACHMENT(S)

GRANT FUND USEAGE

Grant funds will be used to maintain and repair the 100+ year old buildings (approximately 9 buildings) located on the Texas Historical Museum site, consisting of 9 acres located within the city limits of Tomball. Typical maintenance and repairs consist of foundation repairs, replacement of wood siding, painting of buildings (both inside and outside), roof repairs, air conditioning replacement, sprinkler repairs, security lighting repairs, repair of vandalism, and drainage and plumbing repairs.

ADVERTISING AND PROMOTION OF MUSEUM

Brochures are maintained in all the local hotels and motels. The Museum maintains a professional website on the internet. This Museum site can be (and is) accessed from all over the world. The Museum also maintains a presence on multiple social networks, including Facebook. We partner with Harris County and the City of Tomball to host the Valentine's Day Wedding Event. This event receives substantial radio and TV (Channel 11) news coverage. We also promote through a booth at local city festivals, as well as various "open house" events on Museum grounds. The Museum maintains one of the top positions on various travel websites advertising "things to do" in Tomball.

IMPACT ON OVERNIGHT ACCOMMODATIONS

We maintain Contacts with the various hotels/motels where we place brochures. We are in regular contact with the Tomball Chamber of Commerce. We provide personalized, guided tours for our guests and visitors at the museum. We discuss their visit and circumstances. We encourage guests and visitors to invite friends and family members. We also monitor the use of credit cards (and associated names and addresses) as we record our monthly activity.



City of Tomball

Hotel Occupancy Tax Grant Program

Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov

Spring Creek County Historical Association

Tomball Museum Center.com
510 North Pine
Tomball, TX 77375
281-255-2148

August 14, 2025

To whom it may concern at The City of Tomball,

This is to inform you that there has been a change in the office of President for The Tomball Museum Center effective August 11, 2025. Becky Clepper has been appointed President of The Tomball Museum.

Respectfully,



Pamela Kaiser
Secretary
Tomball Museum Center

Spring Creek County Historical Association

Item 2.

Profit and Loss by Class

January - December 2024

	CITY OF TOMBALL	NOT SPECIFIED	TOTAL
Income			
Building Use Income		2,260.00	\$2,260.00
Donations		12,867.27	\$12,867.27
Donations - Designated		2,000.00	\$2,000.00
Donations - Undesignated		687.69	\$687.69
Memorial Donations		3,115.00	\$3,115.00
Photography Donations		996.00	\$996.00
Total Donations - Undesignated		4,798.69	\$4,798.69
Total Donations		19,665.96	\$19,665.96
Grant - City of Tomball	43,853.00	1,147.00	\$45,000.00
Program Income			\$0.00
Candlelight Tour Income		488.90	\$488.90
Membership Dues Income		979.00	\$979.00
Tea and Chat Income		425.00	\$425.00
Tours Income		3,394.57	\$3,394.57
Total Program Income		5,287.47	\$5,287.47
Quilt Show		1,917.00	\$1,917.00
Sales of Product Income			\$0.00
Books		348.00	\$348.00
Fans		297.00	\$297.00
Total Sales of Product Income		645.00	\$645.00
Total Income	\$43,853.00	\$30,922.43	\$74,775.43
GROSS PROFIT	\$43,853.00	\$30,922.43	\$74,775.43
Expenses			
Bank Service Charges		120.00	\$120.00
Depreciation Expense		507.00	\$507.00
Docent Expense	100.00		\$100.00
Dues & Subscriptions	250.00	0.00	\$250.00
Events Expense	32.32		\$32.32
Antique Car Show Expenses	421.63	357.73	\$779.36
Candlelight Tour Expense	250.00	332.90	\$582.90
Quilt Show	670.00		\$670.00
Total Events Expense	1,373.95	690.63	\$2,064.58
Insurance	935.00		\$935.00
Insurance -COMMERCIAL LIABILITY	1,321.00		\$1,321.00
Merchant Fees		218.13	\$218.13
Office Expenses	592.62	630.75	\$1,223.37
Operations	232.55	123.92	\$356.47
Advertising and Publicity	99.75		\$99.75
Postage, Mailing Service	39.00	216.00	\$255.00
Printing and Copying	1,184.55		\$1,184.55

Spring Creek County Historical Association

Item 2.

Profit and Loss by Class

January - December 2024

	CITY OF TOMBALL	NOT SPECIFIED	TOTAL
Supplies	332.98	697.26	\$1,030.24
Total Operations	1,888.83	1,037.18	\$2,926.01
Repairs & Maintenance	290.49	600.00	\$890.49
Buildings & Grounds Maintenance	28,043.68	4,861.12	\$32,904.80
Cleaning	1,800.00	148.69	\$1,948.69
Lawn Service	4,200.00		\$4,200.00
Total Repairs & Maintenance	34,334.17	5,609.81	\$39,943.98
Salaries		6,954.47	\$6,954.47
Security	150.00		\$150.00
Storage Unit	400.00		\$400.00
Taxes			\$0.00
Payroll Taxes		348.84	\$348.84
Royalty Taxes		119.87	\$119.87
Total Taxes		468.71	\$468.71
Telephone	261.62	1,136.02	\$1,397.64
Utilities	1,980.81	4,608.90	\$6,589.71
Website	265.00		\$265.00
Total Expenses	\$43,853.00	\$21,981.60	\$65,834.60
NET OPERATING INCOME	\$0.00	\$8,940.83	\$8,940.83
Other Income			
Bank Rewards		120.00	\$120.00
Interest Income - CD		11,612.94	\$11,612.94
Royalty Income		1,588.28	\$1,588.28
Americo Energy Resources		2,403.22	\$2,403.22
Total Royalty Income		3,991.50	\$3,991.50
Total Other Income	\$0.00	\$15,724.44	\$15,724.44
NET OTHER INCOME	\$0.00	\$15,724.44	\$15,724.44
NET INCOME	\$0.00	\$24,665.27	\$24,665.27

Simmons 1546 (Split of Texas xx46), Period Ending 12/31/2024

RECONCILIATION REPORT

Reconciled on: 01/17/2025
Reconciled by: Florine Ellis

Item 2.

any changes made to transactions after this date aren't included in this report.

Summary

Statement beginning balance	USD
Interest earned	76,295.72
Checks and payments cleared (13)	10.00
Deposits and other credits cleared (5)	-13,199.50
Statement ending balance	593.63
	63,699.85

Register balance as of 12/31/2024 63,699.85

Details

Checks and payments cleared (13)

DATE	TYPE	REF NO.	PAYEE	AMOUNT (USD)
12/23/2024	Check	1985	Comcast	-407.39
12/23/2024	Check	1987	Mary McCoy	-960.79
12/24/2024	Check	1988	Kasie Kimbrell	-100.00
01/01/2024	Check	1989	Rene Velasquez	-900.00
04/04/2024	Check	1990	Kasie Kimbrell	-100.00
05/05/2024	Check		Simmons Bank	-10.00
11/11/2024	Check		Union Standard	-2,846.00
12/12/2024	Check	1995	Conroe Chem Cans	-250.00
12/12/2024	Check	1993	Tomball City Public Works	-547.82
12/12/2024	Check	1994	Reliant	-381.31
15/15/2024	Check	1996	Mary McCoy	-960.79
15/15/2024	Check	1997	Kasie Kimbrell	-300.00
12/20/2024	Check		TWFG	-5,435.40

Total -13,199.50

Deposits and other credits cleared (5)

DATE	TYPE	REF NO.	PAYEE	AMOUNT (USD)
05/05/2024	Check		Simmons Bank	0.00
02/02/2024	Deposit			34.66
09/09/2024	Deposit			535.00
23/23/2024	Deposit			23.97
31/2024	Journal	109		0.00

Total 593.63

Date 12/31/24 Page 1
 Primary Account XXXXXXXXXXXXX1546
 Enclosures 11

Pine Bluff, AR 71611-7009

Simmons Bank
501 Main Street
Pine Bluff, AR 71601-4398
www.simmonsbank.com

Spring Creek County Historical Associati
 PO Box 457
 Tomball TX 77377

Customer Service:
870 541 1266 Direct Dial
866 246 2400 Toll Free

CHECKING ACCOUNTS

Simply Business 250 Checking		Number of Enclosures	11
Account Number XXXXXXXXXXXXX1546		Statement Dates 12/02/24 thru 12/31/24	
Previous Balance	76,295.72	Days in the statement period	30
4 Deposits/Credits	603.63	Average Ledger	69,614.57
13 Checks/Debits	13,199.50	Average Collected	69,614.57
Service Charge	.00		
Interest Paid	.00		
Current Balance	63,699.85		

Deposits and Additions

Date	Description	Amount
12/02	Dep 11/30 GoDaddy Payments a50e7884-027a-4	34.66
12/09	Deposit	535.00
12/23	Dep 12/22 GoDaddy Payments a50e7884-027a-4	23.97
12/27	RelationshipRwds Cash Back	10.00

Checks and Withdrawals

Date	Description	Amount
12/05	Account Analysis Charge	10.00-
12/11	WEB PAY UnionStdIns	2,846.00-
	UnionInsur	
12/20	WEBPAYMENT TWFGINSURANCESER	5,435.40-
	WEB	

--- CHECKS IN NUMBER ORDER ---

Date	Check No	Amount	Date	Check No	Amount	Date	Check No	Amount
12/03	1985	407.39	12/05	1990	100.00	12/23	1996	960.79
12/11	1987*	960.79	12/27	1993*	547.82	12/17	1997	300.00
12/02	1988	100.00	12/19	1994	381.31			
12/02	1989	900.00	12/19	1995	250.00			

* Denotes skip in sequential check numbers

Daily Balance Information

Date	Balance	Date	Balance	Date	Balance
12/02	75,330.38	12/11	71,541.20	12/23	64,237.67
12/03	74,922.99	12/17	71,241.20	12/27	63,699.85
12/05	74,812.99	12/19	70,609.89		
12/09	75,347.99	12/20	65,174.49		

DEPOSIT TICKET

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/9/2024

DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL

SIMMONS BANK

535.00

Amount \$535.00 Date 12/9/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 11/23/2024

PAY TO THE ORDER OF ANGUST 8777 07 158-0437207 \$ 407.39

FOUR HUNDRED SEVENTY SEVEN & 39/100

SIMMONS BANK

MEMO Angust

Check 1985 Amount \$407.39 Date 12/3/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 11/23/2024

PAY TO THE ORDER OF MARY MCCOY \$ 960.79

NINE HUNDRED SIXTY & 79/100

SIMMONS BANK

MEMO SALARY

BOCHU CONWAY

Check 1987 Amount \$960.79 Date 12/11/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 11/24/2024

PAY TO THE ORDER OF KASIE KIMBRELL \$ 100.00

ONE HUNDRED & 00/100

SIMMONS BANK

MEMO CLEANING

Check 1988 Amount \$100.00 Date 12/2/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/1/2024

PAY TO THE ORDER OF RENE VELASQUEZ \$ 900.00

NINE HUNDRED & 00/100

SIMMONS BANK

MEMO LAWN MOWING

Check 1989 Amount \$900.00 Date 12/2/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/4/2024

PAY TO THE ORDER OF KASIE KIMBRELL \$ 100.00

ONE HUNDRED & 00/100

SIMMONS BANK

MEMO CLEANING

Check 1990 Amount \$100.00 Date 12/5/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/2/2024

PAY TO THE ORDER OF CITY OF TOMBALL \$ 547.82

FIVE HUNDRED FORTY SEVEN & 82/100

SIMMONS BANK

MEMO PROCTS

Check 1993 Amount \$547.82 Date 12/27/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/12/2024

PAY TO THE ORDER OF RENT \$ 381.31

THREE HUNDRED EIGHTY ONE & 31/100

SIMMONS BANK

MEMO PROCTS

Check 1994 Amount \$381.31 Date 12/19/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/12/2024

PAY TO THE ORDER OF CONROE CHEM CAN/TANKS ALLOT \$ 250.00

TWO HUNDRED FIFTY & 00/100

SIMMONS BANK

MEMO CANWRIGHT

Check 1995 Amount \$250.00 Date 12/19/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/15/2024

PAY TO THE ORDER OF MARY MCCOY \$ 960.79

NINE HUNDRED SIXTY & 79/100

SIMMONS BANK

MEMO SALARY

Check 1996 Amount \$960.79 Date 12/23/2024

SPRING CREEK COUNTY HISTORICAL
PO BOX 457
TOMBALL, TX 77377

DATE 12/15/2024

PAY TO THE ORDER OF KASIE KIMBRELL \$ 300.00

THREE HUNDRED & 00/100

SIMMONS BANK

MEMO CANWRIGHT

Check 1997 Amount \$300.00 Date 12/17/2024

Item 2.
Customer S CREEK HISTORI
SPRING CREEK HISTORICAL

Accounts

SPRING CREEK HISTORICAL 510 N PINE ST TOMBALL TX 77375		TIN 32 0202279		
		Date of Birth		
		Email		
		MARYMCCOY06@GMAIL.COM		
		Cell Phone	(281)507-8693	
Delivery Point	Additional			
CIF Comments				
Ownership		Status	View Collateral	
Account View	Primary and Secondary	Open and Closed	No	

Demand Deposits	0.00
Certificates	204,789.41
Escrow	0.00
Total Deposits	204,789.41
Loans In-house	0.00
Sold	0.00
Total Loans	0.00
Customer Net	204,789.41

Loan Int Paid YTD	0.00
Dep Earn Paid YTD	4,789.41

Module	i	Account/Seq	Status	Owner	Description	Sec/Prm Cust	Interest	Balance	Purp
*CDA		60115828	Active	Primary	12 MO JUMBO	MCCOY MARY C	646.35	102,394.73	
CDA		60115834	Active	Primary	12 MO JUMBO	MCCOY MARY C	646.35	102,394.68	

TOMBALL MUSEUM CENTER - NOTIONAL BUDGET

FY 25-26 HOT REQUEST

<u>CATEGORY</u>	<u>AMOUNT (HOT FUNDS)</u>	<u>OTHER FUNDS</u>	<u>TOTAL</u>
STRUCTURAL REPAIRS			
THEIS HOUSE LEVELING & STABILIZATION	15500		
SCHOOL HOUSE SIDING AND ROOF	5500		
PROVIDE FOR DRAINAGE ON "PARADE GROUNDS"	3000		
CATEGORY SUB-TOTAL	24000	0	24000
MAINTENANCE/PAINTING			
CHURCH PAINTING, SIDING & TERMITE TREATMENT	6000		
SCHOOLHOUSE PAINTING, SIDING & TERMITE TREATMENT	4000		
FELLOWSHIP HALL PAINTING, SIDING & TERMITE TREATMENT	3500		
OIL CAMP HOUSE, REPAIR/REPLACE FRONT & REAR DOORS	1500		
CATEGORY SUB-TOTAL	15000	1000	16000
COMMUNITY EVENTS			
CANDLELIGHT TOURS (ASSOC. WITH GERMAN FESTIVAL	4500		
VALENTINES DAY WEDDING EVENT	2500		
OTHER ON-SITE MUSEUM EVENTS	1500		
(such as Halloween, Quilt and Craft Show, etc.)			
CATEGORY SUB-TOTAL	8500	2000	10500
LANDSCAPING			
APPROX. 9 ACRES, BI-WEEKLY	7500		
CATEGORY SUB-TOTAL	7500	500	8000
UTILITIES			
ELECTRICITY	8000		
CITY OF TOMBALL (4 METERS/BILLS)	4000		
CATEGORY SUB-TOTAL	12000	2000	14000
ADVERTISING & PUBLIC RELATIONS			
WEBSITE AND PRINTING COSTS	2000	1500	3500
MISCELLANEOUS			
		1000	1000
PERSONNEL			
		12000	12000
ANTICIPATED EXPENDITURES	69000	20000	89000

From: [Rayford McCoy](#)
To: [Perla Carrasco](#)
Cc: [Mary McCoy](#)
Subject: Re: Requested Museum info
Date: Thursday, July 3, 2025 4:27:53 PM

Caution: This is an external email and may be malicious. Please take care when clicking links or opening attachments.

The one you have is the most recent we have.

On Thu, Jul 3, 2025, 3:43 PM Perla Carrasco <pcarrasco@tomballtx.gov> wrote:

I reviewed the document you provided titled "Tomball Museum Center - Notional Budget FY 25-26 HOT Request" but this is only the budget for the requested grant funds. We need the most recent complete annual budget for the Spring Creek County Historical Association. See the attached document provided in 2023.

-----Original Message-----

From: Rayford McCoy <rayford.mccoy@gmail.com>

Sent: Thursday, July 3, 2025 2:11 PM

To: Perla Carrasco <pcarrasco@tomballtx.gov>; rayford.mccoy@gmail.com; Mary McCoy <marymccoy06@gmail.com>

Subject: Requested Museum info

Caution: This is an external email and may be malicious. Please take care when clicking links or opening attachments.

Perla,

Please confirm receipt. Thanks again for all your assistance.

Lynn

Balance Sheet

Item 2.

Spring Creek County Historical Association

As of December 31, 2024

DISTRIBUTION ACCOUNT	TOTAL
Assets	
Current Assets	
Bank Accounts	
CD	0
CD First State Bank of TX	200,000.00
CD Spirit of TX xx19	35,540.17
Total for CD	\$235,540.17
Operating Account 1546	63,699.85
Total for Bank Accounts	\$299,240.02
Accounts Receivable	
Other Current Assets	
Prepaid Expenses	26,995.00
Total for Other Current Assets	\$26,995.00
Total for Current Assets	\$326,235.02
Fixed Assets	
Fixed Assets	0
Accumulated Depreciation	-261,908.00
Alarm System	1,900.00
Buildings	156,923.98
Furniture & Equipment	55,377.15
Gazebo	2,552.10
Jail	3,105.50
Land	70,055.79
Lighting Grounds	21,837.20
Sawmill	4,380.00
Sidewalk	10,388.50
Sprinkler System	5,398.01
Windmill	5,500.00
Total for Fixed Assets	\$75,510.23
Total for Fixed Assets	\$75,510.23
Other Assets	
Total for Assets	\$401,745.25

Balance Sheet

Item 2.

Spring Creek County Historical Association

As of December 31, 2024

DISTRIBUTION ACCOUNT	TOTAL
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
Credit Cards	
Other Current Liabilities	
Payroll Tax Liabilities	900.84
Total for Other Current Liabilities	\$900.84
Total for Current Liabilities	\$900.84
Long-term Liabilities	
Total for Liabilities	\$900.84
Equity	
Retained Earnings	376,179.14
Net Income	24,665.27
Total for Equity	\$400,844.41
Total for Liabilities and Equity	\$401,745.25

City Council Meeting Agenda Item Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Prevailing Winds Community Band.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the Prevailing Winds Community Band to perform 4-6 free concerts to the Tomball community.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

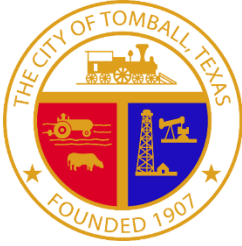
FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____ If yes, specify Account Number: # _____

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

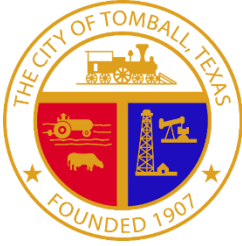
Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026
Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: The Prevailing Winds

Street Address: 10953 Vista Lake Court

City: Navasota State: TX Zip Code: 77868-6981

Contact Name: Todd Burrer

Role with Organization/Business: Director

Phone Number: 936-285-1817 Email: info@theprevailingwinds.org

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

The Prevailing Winds (TPW) is a community band that rehearses and performs at Lone Star College - Tomball in the Performing Arts Center. Concerts are offered 4-6 times per year and are free to all audience members. We exist to deliver quality performances, to share our passion for music, and to inspire others. We provide a venue for musicians to perform and connect; our passion is to keep music alive. We serve our members, our community, and future music lovers.

Section II: Event/Program Information

Event/Program Name: The Prevailing Winds concerts

Date(s) of Event/Program: 9/20/25, 11/01/25, 12/20/25, 2/28/26, 5/25/26, 7/4/26

Location of Event/Program (Provide the address or a general location):

Lone Star College - Tomball; Performing Arts Center (PAC)

Website for Event/Program: www.theprevailingwinds.org

Is this a new event/program? ☐ Yes ☒ No

If this is not a new event/program, how long has the event/program operated?

TPW formed as a 501c3 in January of 2024.

Provide a detailed description of the event/program.

The Prevailing Winds (TPW) is a nonprofit community wind ensemble dedicated to enriching Tomball's cultural landscape through dynamic, accessible musical performances. Our free concert series showcases the power of live instrumental music to build community, attract visitors, and elevate the city as a vibrant destination for the arts. These concerts are designed not only to entertain but also to promote Tomball and can support the local hotel and hospitality industry by drawing audiences from across the region. TPW's performance calendar includes between four to six concerts annually, each tailored to highlight different musical styles and seasonal themes. In the fall, our pops style concert features familiar and family-friendly selections from film, television, and Broadway—perfect for drawing a wide audience, including first-time concertgoers and out-of-town guests. Our Christmas Concert, typically held in early December, celebrates the holiday season with a joyful mix of classical holiday works, popular carols, and new seasonal arrangements, helping to attract festive tourism to Tomball during the winter shopping and travel season. TPW presents what we call our "Big Kid Concert," a musically ambitious program showcasing challenging works by contemporary and classic composers. In May, we host a Memorial Day Concert, honoring those who served with patriotic selections and solemn tributes, drawing civic-minded attendees and veterans from across Texas. Finally, our summer July 4th Concert, compliments and leads seamlessly into Tomball's celebration. And, this past year, TPW collaborated with the Lone Star College music department in their production of "Hello, Dolly" to provide a live band during three nights of four total performances. This was the first time many of the college students had performed with live musicians. Twenty musicians donated over 40 hours of rehearsal and performance time each for the musical. TPW concerts are free and open to the public, reducing barriers to arts participation and encouraging regional visitors to stay, dine, and shop locally. Many of our volunteer musicians are Tomball residents with out of town family and friends to attend concerts. TPW also distributes print fliers and utilizes social media to advertise concerts.

Estimated Local Attendees at Event/Program: 100/concert

Estimated Out of Town Attendees at Event/Program: 100/concert

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program.	\$ 2,000
Total operating budget for event/program.	\$ 12,660
Percent of event/program to be funded by grant.	15.79 %
Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures.	\$ 600

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

Funds will be used for usage of Lone Star College - Tomball Performing Arts Center.

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

<input checked="" type="checkbox"/> Paid Advertising	<input type="checkbox"/> Radio	<input type="checkbox"/> Television	<input checked="" type="checkbox"/> Brochures
<input checked="" type="checkbox"/> Social Media	<input type="checkbox"/> Newspaper	<input checked="" type="checkbox"/> Online/Digital Ads	<input type="checkbox"/> Press Release
<input type="checkbox"/> Other (please specify) _____			

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

TPW advertises and promotes through social media, paid digital ads, and print media. There are currently 275 followers, with 4/5 being outside Tomball. As TPW does not live-stream concerts, family and friends travel from across the region to attend concerts.

How will you measure the impact of your event on local overnight accommodations?

TPW will count total attendees at each performance--with over 200 at our Memorial Day concert. TPW will also survey band members for each concert, asking for a count of out of town audience members..

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☐ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☐ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☒ Encouragement, promotion, improvement, and application of the arts.
☐ Historical restoration or preservation programs.
☐ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization’s most recent annual budget.
3. Organization’s most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization’s balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: Laura Laabs  Digitally signed by Laura Laabs
Date: 2025.06.26 19:25:44 -05'00'

Applicant Printed Name: Laura Laabs, Vice President

Date of Application: 26 June 2025

The Prevailing Winds August 2024 – July 2025 Budget

Salaries and Benefits	\$0
Rehearsal space	\$5,200
Performance space	\$2,000
Music for concerts	\$4,000
Supplies and postage	\$500
Marketing and advertising	\$600
Liability insurance	\$360
	\$12,660

Itemized budget request of grant funds

Rehearsal space	\$1,000
Performance space	\$500
Music for concerts	\$350
Marketing and advertising	\$150
	\$2,000

The Prevailing Winds

info@theprevailingwinds.org

Todd Burrer	Director	936-285-1817
Katy Mayo	President	281-630-5917
Laura Laabs	Vice-President	
Kyle Manuel	Secretary	
Marguerite Cranford	Treasurer	
Steve Schmid	Member at Large	
Judy Van Norman	Immediate Past President	
Rick Ilari	Member at Large (elect)	
Joanna Vickery	Member at Large (elect)	
Travis Fisk	Member at Large (elect)	

Recent social media:

**The Prevailing Winds**
June 23 at 7:58 PM · 🌐

  Get ready, Tomball—*The Prevailing Winds* are back to kick off your July 4th in style! 

Join us at ****4:00 p.m.**** at the ****Lone Star College–Tomball Performing Arts Center**** for a ****free patriotic concert**** filled with bold brass, stirring marches, and beloved American classics. From Sousa to service tributes, we'll set the tone for a day of celebration and remembrance.

 But the fun doesn't stop there!

Aft... [See more](#)



A CONCERT FOR INDEPENDENCE

FESTIVAL OF FREEDOM

July 4th at 4pm
Lone Star College, Tomball
Performing Arts Center

The Prevailing Winds
Musician/band

 [Send message](#)

**The Prevailing Winds**

March 29 · 🌐



🌟 Enjoy this powerful performance from The Prevailing Winds! 🌟

Here's Give Us This Day: Short Symphony for Wind Ensemble by David Maslanka, performed under the direction of our Assistant Director, Adam Haskett.

This moving and dynamic piece was a highlight of our Symphonic Sound Scape concert — we hope it resonates with you as much as it did with us.

🎵 Turn up the volume and let the music speak.

[#ThePrevailingWinds](#) [#DavidMaslanka](#) [#GiveUsThisDay](#) [#SymphonicSoundScape](#) [#CommunityBand](#) [#AdamHaskett](#) [#CommunityMusic](#) [#JoinTheBand](#) [#TomballTX](#) [#TomballEvents](#) [#saturday](#) [#GiveUsThisDay](#) [#symphonic](#) [#LiveConcert](#) [#houston](#) [#musiceducation](#) [#MusicLoversUnite](#) [#FreeConcert](#) [#band](#) [#CommunityConcert](#) [#SupportLocalMusic](#) [#ClassicalMusic](#)





The Prevailing Winds

December 21, 2024 · 🌐



The Prevailing Winds

December 19, 2024 · 🌐

🎵 Join us for A Night Before Christmas! 🌲

This Saturday, let the Prevailing Winds fill your hearts with the sound of the season in a majestic symphonic fashion. ☀️

🎺 Festival Fanfare For Christmas

🎵 O Magnum Mysterium

🎬 The Polar Express

📖 A Night Before Christmas featuring the captivating narration of Rev. Dr. Sterling Allen ...and so much more!

📍 Lone Star Tomball Performing Arts Center

🎫 Admission is free, and donations are welcome.

Gather your loved ones and immerse yourself in the spirit of Christmas with music that will inspire and delight. 🎶🌟

We can't wait to see you there! ❤️

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**The Prevailing Winds**

October 22, 2024 · 🌐



The music of John Powell to John Williams! From Space ships to Pirate ships!
FREE THIS SATURDAY!!!

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[end]

Statement of Activity

Item 3.

The Prevailing Winds
August 1, 2024-May 16, 2025

DISTRIBUTION ACCOUNT	TOTAL
Income	
Contributed income	\$8,915.23
Contributed Income - Music	60.00
Total for Contributed income	\$8,975.23
Uncategorized Income	
Total for Income	\$8,975.23
Cost of Goods Sold	
Gross Profit	\$8,975.23
Expenses	
Advertising & marketing	576.20
Bank fees	33.45
Insurance	0
Liability insurance	1,019.02
Total for Insurance	\$1,019.02
Meals	550.00
Music	1,861.76
Occupancy	0
Concert Venue	425.00
Rent	230.60
Total for Occupancy	\$655.60
Office expenses	\$31.55
Bank fees & service charges	30.00
Memberships & subscriptions	290.00
Office supplies	215.14
Total for Office expenses	\$566.69
Photography	1,100.00
Total for Expenses	\$6,362.72
Net Operating Income	\$2,612.51
Other Income	
Other Expenses	
Net Other Income	0
Net Income	\$2,612.51



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

Date:
09/11/2024

THE PREVAILING WINDS
C/O TODD BURRER
10953 VISTA LAKE COURT
NAVASOTA, TX 77868-6981

Dear Applicant:

In your letter dated May 13, 2024, you requested a reclassification of foundation status as a public charity.

Our records indicate you are classified as a private foundation. You claim you're erroneously classified as a private foundation and are requesting correction of the error.

Based on the information you provided, we determined you meet the requirements for classification as a public charity described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi) and updated our records.

Because your tax-exempt status wasn't under consideration, you continue to be classified as an organization exempt from federal income tax under IRC Section 501(c)(3).

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

This letter could help resolve questions on your foundation status. Keep it for your records.

Sincerely,

A handwritten signature in cursive script that reads "Stephen A. Martin".

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Item 3.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	The Prevailing Winds	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>	
5 Address (number, street, and apt. or suite no.). See instructions. 10953 Vista Lake Court	Requester's name and address (optional)	
6 City, state, and ZIP code Navasota, TX 77868		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-				-		
or									
Employer identification number									
9	9	-	0	7	5	4	1	1	7

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid).
- Form 1099-DIV (dividends, including those from stocks or mutual funds).
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds).
- Form 1099-NEC (nonemployee compensation).
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers).
- Form 1099-S (proceeds from real estate transactions).
- Form 1099-K (merchant card and third-party network transactions).
- Form 1098 (home mortgage interest), 1098-E (student loan interest), and 1098-T (tuition).
- Form 1099-C (canceled debt).
- Form 1099-A (acquisition or abandonment of secured property).

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

Caution: If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding; or
3. Claim exemption from backup withholding if you are a U.S. exempt payee; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See *What Is FATCA Reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441–1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(l)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester;
2. You do not certify your TIN when required (see the instructions for Part II for details);
3. The IRS tells the requester that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under “*By signing the filled-out form*” above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

• **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note for ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

• **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or "doing business as" (DBA) name on line 2.

• **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

• **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.

• **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner's name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For

example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or	Individual/sole proprietor.
• Sole proprietorship	
• LLC classified as a partnership for U.S. federal tax purposes or	Limited liability company and enter the appropriate tax classification:
• LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	P = Partnership, C = C corporation, or S = S corporation.
• Partnership	Partnership.
• Trust/estate	Trust/estate.

Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

Note: A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

Line 4 Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

- 2—The United States or any of its agencies or instrumentalities.
- 3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5—A corporation.
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission.
- 8—A real estate investment trust.
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940.
- 10—A common trust fund operated by a bank under section 584(a).
- 11—A financial institution as defined under section 581.
- 12—A middleman known in the investment community as a nominee or custodian.
- 13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
• Interest and dividend payments	All exempt payees except for 7.
• Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
• Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.
• Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5. ²
• Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.

¹ See Form 1099-MISC, Miscellaneous Information, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).

B—The United States or any of its agencies or instrumentalities.

C—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.

G—A real estate investment trust.

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.

I—A common trust fund as defined in section 584(a).

J—A bank as defined in section 581.

K—A broker.

L—A trust exempt from tax under section 664 or described in section 4947(a)(1).

M—A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/EIN. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))**	The grantor*

For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(i)(B))**	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

* **Note:** The grantor must also provide a Form W-9 to the trustee of the trust.

** For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Go to www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

Statement of Financial Position

Item 3.

The Prevailing Winds

As of May 16, 2025

DISTRIBUTION ACCOUNT	TOTAL
Assets	
Current Assets	
Bank Accounts	
Frost Business Checking (3779)	3,367.96
Total for Bank Accounts	\$3,367.96
Accounts Receivable	
Other Current Assets	
Total for Current Assets	\$3,367.96
Fixed Assets	
Other Assets	
Total for Assets	\$3,367.96
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
Credit Cards	
Other Current Liabilities	
Total for Current Liabilities	0
Long-term Liabilities	
Total for Liabilities	0
Equity	
Retained Earnings	755.45
Net Income	2,612.51
Total for Equity	\$3,367.96
Total for Liabilities and Equity	\$3,367.96

Form 990-N (e-Postcard)

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.

Tax Period:

2023 (08/01/2023-
07/31/2024)

EIN:

99-0754117

**Organization Name
(Doing Business as):**
PREVAILING WINDS

Mailing Address:

10953 Vista Lake Court
Navasota, TX 77868
United States

**Principal Officer's
Name and Address:**

Marguerite Cranford
19510 Country Lake
Drive
Magnolia, TX 77355
United States

**Gross receipts not greater
than:**

\$50,000

**Organization has
terminated:**

No

Website URL:

<https://theprevailingwinds.org/>

City Council Meeting Agenda Item Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the German Heritage Festival.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the German Heritage Festival.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

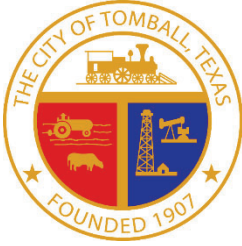
FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____ If yes, specify Account Number: # _____

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

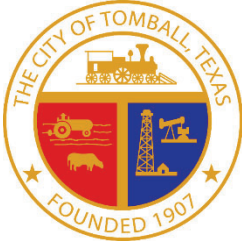
Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026
Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: Tomball Sister City

Street Address: PO BOX 1131

City: Tomball State: TX Zip Code: 77377

Contact Name: Craig Bogner

Role with Organization/Business: GM- Tomball German Festivals

Phone Number: 832-715-6291 Email: Craig@Tomballgermanfest.org

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

To keep the German culture and Heritage of Tomball.
 Support a Exchange student program from our sister city program

Section II: Event/Program Information

Event/Program Name: Tomball German Heritage Festival

Date(s) of Event/Program: March 27,28,29 2026

Location of Event/Program (Provide the address or a general location):

100,200,300,400 Blocks of Market Street

Website for Event/Program: Tomballgermanfest.org

Is this a new event/program? ☐ Yes ☒ No

If this is not a new event/program, how long has the event/program operated?

25 Years

Provide a detailed description of the event/program.

3 Day German Festival. 4 Music Stages, 150 + vendors, carnival, Kids area.
Free Admission, parking and shuttle for all.
To promote Tomball German Heritage and to bring visitors to Tomball.

Estimated Local Attendees at Event/Program: 40K

Estimated Out of Town Attendees at Event/Program: 20K

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program. \$ 80,000

Total operating budget for event/program. \$ 248,692

Percent of event/program to be funded by grant. 32 %

Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures. \$ 30K

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

22,000 Payroll, 30,000 Advertising 90,000 for Generators, light towers, Pot a cans&Buses

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

☒ Paid Advertising
 ☒ Radio
 ☒ Television
 ☒ Brochures
☒ Social Media
 ☒ Newspaper
 ☒ Online/Digital Ads
 ☐ Press Release
☐ Other (please specify) _____

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

All Hotels will have a link on website. Vendors hotel link during the application process

How will you measure the impact of your event on local overnight accommodations?

The city has Meeting with Hotels. The hotels that come most give a room count the days.

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☐ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☒ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☐ Encouragement, promotion, improvement, and application of the arts.
☐ Historical restoration or preservation programs.
☐ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization’s most recent annual budget.
3. Organization’s most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization’s balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: 

Applicant Printed Name: Craig Bogner

Date of Application: 6/18/25

Statement of Activity

Item 4.

The Tomball Sister Cities Organization

October 1, 2023-September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Income	
Interest	-143.30
Rewards	3,958.42
TGCM Income	\$80,000.00
Festival	76,606.86
Sponsors	20,000.00
Vendors	153,455.36
Total for TGCM Income	\$330,062.22
TGHF Income	\$80,000.00
Festival	69,800.00
Sponsors	20,000.00
Vendors	83,572.40
Total for TGHF Income	\$253,372.40
Uncategorized Income	1,000.00
Total for Income	\$588,249.74
Cost of Goods Sold	
Gross Profit	\$588,249.74
Expenses	
Accounting	4,500.00
Administration	\$3,099.32
Auto	\$865.95
Fuel	1,851.67
Vehicle Insurance	2,370.38
Total for Auto	\$5,088.00
Bank Charges	924.95
Donations	1,783.84
Dues and Subscriptions	3,805.22
Insurance	6,309.48
Internet	2,323.91
Meals	5,633.96
Postage	293.35
Sister City Visit	\$92.63
Food	950.82
Travel	16,547.21
Total for Sister City Visit	\$17,590.66
Storage	1,300.00
Telephone	3,573.07
Tolls	144.23
Website	766.25
Total for Administration	\$52,636.24

Statement of Activity

Item 4.

The Tomball Sister Cities Organization

October 1, 2023-September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Bookkeeping	1,150.00
Exchange Students - Expenses	\$2,817.56
Meals and Entertainment	2,072.22
Travel	5.00
Total for Exchange Students - Expenses	\$4,894.78
Heritage Dinner	3,139.83
Hospitality Events	\$1,422.54
Meals	1,508.54
Total for Hospitality Events	\$2,931.08
Interest Paid	312.86
Payroll	0
Payroll Service Fee	2,322.08
Payroll Tax Expenses	3,867.04
Salary and Wages	50,550.04
Workers Compensation	238.99
Total for Payroll	\$56,978.15
Taxes	3,051.78
TGCM Expenses	\$8,609.16
Advertising	\$12,785.00
Buttonstar	247.15
Community Impace	9,043.23
Das Fenster	600.00
Kulp Radio	152.00
Kwik Kopy	3,645.46
Photography	1,545.61
The Rural Connection	284.50
Tomball Chamber	117.30
Total for Advertising	\$28,420.25
Distributors	\$90,843.89
Buses	9,120.25
Porta Potties	4,800.00
Total for Distributors	\$104,764.14
Entertainment	\$1,885.00
Entertainers	54,075.00
Hotels	6,872.58
Total for Entertainment	\$62,832.58
Hospitality	\$1,289.80
Meals	1,109.20
Total for Hospitality	\$2,399.00
Insurance	1,296.98
Security	5,120.00

Statement of Activity

Item 4.

The Tomball Sister Cities Organization

October 1, 2023-September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Volunteers	1,734.06
Total for TGCM Expenses	\$215,176.17
TGHF Expenses	\$3,052.94
Advertising	\$10,452.63
Button Star	381.13
Community Impact	8,696.25
Houston Chronicle	10,825.00
Kwik Kopy	36.79
Photography	1,292.75
Tomball Chamber	1,390.00
Total for Advertising	\$33,074.55
Distributors	\$25,549.32
Buses	8,341.90
Porta Potties	4,800.00
Total for Distributors	\$38,691.22
Entertainment	\$45,225.00
Entertainers	13,050.00
Hotels	5,997.42
Total for Entertainment	\$64,272.42
Equipment Rental	63,986.58
Hospitality	\$1,543.40
Meals	940.88
Total for Hospitality	\$2,484.28
Security	4,640.00
Total for TGHF Expenses	\$210,201.99
Uncategorized Expense	1,095.00
Total for Expenses	\$556,067.88
Net Operating Income	\$32,181.86
Other Income	
Other Expenses	
Net Other Income	0
Net Income	\$32,181.86

Tomball Sister City Organization, Inc.
P. O. Box 1131, Tomball, TX 77377
AS OF 9/26/20024

Officers and Board of Directors

NAME & ADDRESS	PHONE	EMAIL	TERM EXPIRES
Grady Martin, Chair 8118 Spring Stuebner Road Spring, Texas 77379	713-829-7116	gradsand@yahoo.com	2027
Kit Pfeiffer, Vice Chair 31214 Helen Lane Tomball, Texas 77375	281-460-7630	kitpfeiffer@yahoo.com	2027
Sandra Martin 8118 Spring Stuebner Road Spring, Texas 77379	713-829-0313	gradsand@yahoo.com	2027
Craig Bogner Treasurer, General Manager 31226 Antonia Lane Tomball, Texas 77375	832-715-6291	craigbogner@gmail.com craig@tomballgermanfest.org	2026
Amy Mason 26003 Di-jon Tomball, Texas 77377	713-412-1882	amyamason@yahoo.com	2025
Alicia Engleke 31214 Alice Lane Tomball, Texas 77375	713-857-8146	alicia.eichhorn@att.net	2025
Sonja Love 11907 Julia Lane Magnolia, Texas 77354	832-236-5412	larry.sonja@sbcglobal.net	2027
Wesley Burke 11918 Painted Canyon Dr. Tomball, Texas 77377	832-347-0699	wesleyjburke.com	2026
Nora Stovall, Secetary 307 Florence Street Tomball, Texas 77375	281-541-1449	norastovall@sbcglobal.net	2026
Shawn Mason 26003 Di-jon Tomball, Texas 77377	281-799-9292	shama_go14@yahoo.com	2027
Mark Barnett 2 Blue Bungalow Drive Spring, Texas 77389	832-326-8141	mjbarnett76@yahoo.com	2025
Dennis Wilkins 12515 Fort Isabella Drive Tomball, Texas 77375	713-447-1930	Dennis@thewwtech.com	2025

Statement of Financial Position

Item 4.

The Tomball Sister Cities Organization

As of September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Assets	
Current Assets	
Bank Accounts	
Amegy Checking (main) - 1450	
Amegy Checking (SPONSOR)- 6566	
Amegy Payroll Account - 7769	
Amegy - Savings Acct - 3263	14,046.27
Forst Checking 0899 - Payroll	10,484.51
Forst Checking 0910 - Savings	6,000.00
Frost Checking (0398)	170,106.74
Frost Checking 0902 - Sponsors	5,656.75
Total for Bank Accounts	\$206,294.27
Accounts Receivable	
Other Current Assets	
Other receivables	
Total for Other Current Assets	0
Total for Current Assets	\$206,294.27
Fixed Assets	
Accumulated Depreciation	-6,756.00
Computer	3,357.09
Trailer	8,248.00
Total for Fixed Assets	\$4,849.09
Other Assets	
Total for Assets	\$211,143.36
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	
Total for Accounts Payable	0
Credit Cards	
Amy CC	3,515.15
Craig CC	6,222.20
Sandra CC	107.80
Tomball Sister City CC	
VISA 5071	
Visa 7970	-107.14
Visa 8630	153.35

Statement of Financial Position

Item 4.

The Tomball Sister Cities Organization

As of September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Total for Credit Cards	\$9,891.36
Other Current Liabilities	
Exchange Student Fund Balance	8,134.32
Payroll Liability	
Total for Other Current Liabilities	\$8,134.32
Total for Current Liabilities	\$18,025.68
Long-term Liabilities	
Total for Liabilities	\$18,025.68
Equity	
Retained Earnings	158,485.82
Net Income	32,181.86
Opening Bal Equity	2,450.00
Total for Equity	\$193,117.68
Total for Liabilities and Equity	\$211,143.36

The Tomball Sister City Organization

Independent Accountants' Review Report and
Financial Statements for the Fiscal Year Ended September 30, 2024
(with comparative totals for 2023)



Tipton & Company
CERTIFIED PUBLIC ACCOUNTANTS

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Tipton & Company

CERTIFIED PUBLIC ACCOUNTANTS

Item 4.

Tipton & Company LLC
134 Vintage Park Blvd. Ste. A #106
Houston, TX 77070
www.nonprofitacctg.com

INDEPENDENT ACCOUNTANTS' REVIEW REPORT

To the Board of Directors of
The Tomball Sister City Organization
Tomball, Texas

We have reviewed the accompanying financial statements of The Tomball Sister City Organization (a nonprofit organization), which comprise the statement of financial position as of September 30, 2024, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of entity management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

Accountants' Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

We are required to be independent of the Organization and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our review.

Accountant's Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously reviewed The Tomball Sister City Organization's 2023 financial statements dated May 23, 2024. The summarized comparative information presented herein as of and for the year ended September 30, 2023, is consistent, in all material respects, with the reviewed financial statements from which it has been derived.

Tipton & Company LLC

Tipton & Company
Certified Public Accountants
Houston, Texas

December 27, 2024

The Tomball Sister City Organization

Statement of Financial Position

Item 4.

<i>As of September 30, (with comparative totals for 2023)</i>	2024	2023
Assets		
Cash and cash equivalents	\$ 226,287	\$ 215,218
Property and equipment, net	2,597	3,723
Total Assets	\$ 228,884	\$ 218,941
Liabilities and Net Assets		
Liabilities		
Deferred revenue	\$ 47,440	\$ 40,125
Accrued expenses	18,025	10,754
Total Liabilities	65,465	50,879
Net Assets		
Without donor restriction	163,419	168,062
Total Net Assets	163,419	168,062
Total Liabilities and Net Assets	\$ 228,884	\$ 218,941

See accompanying notes and independent accountants' review report.

The Tomball Sister City Organization

Item 4.

Statement of Activities

Year ended September 30, <i>(with comparative totals for 2023)</i>	2024 Total	2023 Total
Without Donor Restrictions		
Public Support and Revenues		
Public Support		
Tomball German Heritage Festival grant	\$ 80,000	\$ 80,000
Tomball German Christmas Market grant	80,000	80,000
Revenue		
Tomball German Heritage Festival sponsorship and fees	173,372	183,202
Tomball German Christmas Market sponsorship and fees	214,363	161,058
Other income	4,816	268
Total Public Support and Revenues	552,551	504,528
Expenses		
Program Activities		
Tomball German Heritage Festival	220,151	211,373
Tomball German Christmas Market	214,202	212,337
Total Program Activities	434,353	423,710
Supporting Activities		
Management and general	81,283	61,065
Fundraising	41,558	47,883
Total Supporting Activities	122,841	108,948
Total Expenses	557,194	532,658
Change in Net Assets	(4,643)	(28,130)
Net Assets, Beginning of Year	168,062	196,192
Net Assets, End of Year	\$ 163,419	\$ 168,062

See accompanying notes and independent accountants' review report.

The Tomball Sister City Organization

Item 4.

Statement of Functional Expenses

Year ended September 30, (with comparative totals for 2023)	Program Activities			Supporting Activities			2024 Total	2023 Total
	Tomball German Heritage Festival	Tomball Christmas Market	Total Program Activities	Management & General	Fundraising	Total Supporting Activities		
Salaries and related expenses								
Salaries and wages	\$ 12,638	\$ 12,638	\$ 25,276	\$ 15,165	\$ 10,110	\$ 25,275	\$ 50,551	\$ 49,884
Payroll taxes	967	967	1,934	1,160	773	1,933	3,867	3,967
Employee benefits	60	60	120	72	48	120	240	231
Total salaries and related expenses	13,665	13,665	27,330	16,397	10,931	27,328	54,658	54,082
Other Expenses								
Advertising	15,356	16,586	31,942	-	29,553	29,553	61,495	73,210
Auto	-	-	-	2,717	-	2,717	2,717	1,454
Depreciation	-	-	-	1,126	-	1,126	1,126	1,126
Distributors	104,764	38,691	143,455	-	-	-	143,455	199,491
Donations	-	-	-	1,784	-	1,784	1,784	3,861
Dues	-	-	-	3,805	-	3,805	3,805	5,257
Equipment rental	-	63,987	63,987	-	-	-	63,987	-
Exchange students	5,480	5,480	10,960	-	-	-	10,960	7,718
Hospitality	2,399	2,484	4,883	-	-	-	4,883	3,186
Insurance	1,297	-	1,297	8,680	-	8,680	9,977	7,670
Interest	-	-	-	313	-	313	313	-
Maintenance	-	-	-	-	-	-	-	2,023
Miscellaneous	-	-	-	7,793	-	7,793	7,793	3,295
Postage	-	-	-	293	-	293	293	235
Professional fees	-	-	-	4,500	-	4,500	4,500	5,000
Security	5,120	4,640	9,760	-	-	-	9,760	7,000
Service fees	580	581	1,161	1,621	464	2,085	3,246	2,222
Storage	-	-	-	1,300	-	1,300	1,300	1,246
Supplies	6,160	3,053	9,213	-	-	-	9,213	11,762
Taxes	763	763	1,526	917	610	1,527	3,053	403
Travel and entertainment	64,567	64,272	128,839	23,374	-	23,374	152,213	134,419
Utilities	-	-	-	5,897	-	5,897	5,897	6,143
Volunteers	-	-	-	-	-	-	-	683
Website	-	-	-	766	-	766	766	1,172
Total Other Expenses	206,486	200,537	407,023	64,886	30,627	95,513	502,536	478,576
Total Expenses	\$ 220,151	\$ 214,202	\$ 434,353	\$ 81,283	\$ 41,558	\$ 122,841	\$ 557,194	\$ 532,658

See accompanying notes and independent accountants' review report.

The Tomball Sister City Organization

Item 4.

Statement of Cash Flows

Year ended September 30, (with comparative totals for 2023)	2024	2023
Cash Flows from Operating Activities		
Change in Net Assets	\$ (4,643)	\$ (28,130)
Adjustments to reconcile change in net assets to net cash from operating activities:		
Depreciation expense	1,126	1,126
Change in operating assets and liabilities:		
Deferred revenue	7,315	(8,127)
Accrued expenses	7,271	(5,343)
Total Adjustments	15,712	(12,344)
Net Change from Operating Activities	11,069	(40,474)
Net Change in Cash and Cash Equivalents	11,069	(40,474)
Cash and Cash Equivalents, beginning of year	215,218	255,692
Cash and Cash Equivalents, end of year	\$ 226,287	\$ 215,218

See accompanying notes and independent accountants' review report.

NOTE 1 – NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations – The Tomball Sister City Organization, (the Organization), is a nonprofit corporation founded in 2003 under the laws of the State of Texas for the purpose of the establishment, sponsorship, promotion and support of cultural, business, educational, diplomatic and other exchanges with Tomball's sister city – Telgte, Germany.

To this end the corporation endeavors to promote and heighten public interest in and appreciation of the culture, business, education, products, people or language of sister cities of the City of Tomball, Texas, and to develop programs and provide activities that highlight such culture, business, education, products, people or language, and to assist its members in the development of such programs and the provisions of such activities.

The following programs and services are supported by The Tomball Sister City Organization:

- *Tomball German Heritage Festival* – traditionally held in Tomball during the last weekend in March. It is a Music/Street festival celebrating German and ethnic heritage with four stages of live music entertainment, ethnic and festival food, beer, wine, street vendors, all kinds of German souvenirs and clothing, arts crafts, antiques, Heritage Center, German church service, fireworks, carnival, pony ride, petting zoo, strolling music makers, street performers, and much more.
- *Tomball German Christmas Market* – traditionally held in Tomball on the second weekend in December and includes live music and an open-air market. During this event, street vendors line Market and S. Walnut Streets, selling German Christmas items, arts and crafts, and much more. The event is sponsored by the City of Tomball, Tomball Sister City Organization, and German Heritage Festival.

Basis of Accounting – The financial statements of The Tomball Sister City Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation – The Organization reports information regarding its financial position and activities according to two classes of net assets that are based upon the existence or absence of restrictions on use that are placed by its donors: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions are resources available to support operations and not subject to donor restrictions. The only limits on the use of net assets without donor restrictions are the broad limits resulting from the nature of the Organization, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations. Assets restricted solely through the actions of the Board of Directors are reported as net assets without donor restrictions, board-designated.

Net assets with donor restrictions are resources that are subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or use for a purpose specified by the donor. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-restricted endowment earnings are released when those earnings are appropriated with spending policies and are used for the specified purpose.

Cash and Cash Equivalents – The Organization considers all monies in banks and highly liquid investments with maturities of three months or less from the date of purchase to be cash and cash equivalents. The carrying values

The Tomball Sister City Organization

Item 4.

Notes to Financial Statements

of any cash and cash equivalents are deemed to approximate their fair values because of the short maturities of those financial instruments.

Property and Equipment – Property and equipment are stated at cost or fair value at date of donation. Depreciation is provided using the straight-line method over the estimated useful lives of the assets as follows:

Computers	2 years
Trailers	5 - 15 years

Additions and betterments of \$2,500 or more are capitalized, while maintenance and repairs that do not improve or extend the useful lives of the respective assets are expensed currently.

Property and equipment are reviewed for impairment if the use of the asset significantly changes or another indicator of possible impairment is noted. If the carrying amount for the asset is not recoverable, the value is written down to the asset's fair value.

Grants – Grants are recognized when cash, or other assets, an unconditional promise to give, or notification of a beneficial interest is received. Conditional promises to give are not recognized until the conditions on which they depend have been substantially met or the donor has explicitly released the condition.

Contributed Nonfinancial Assets – Contributed nonfinancial assets are recognized as contributions at fair value when an unconditional commitment is received from the donor. The related expense is recognized as the item is used. Contributed services are recognized as support at their estimated fair value only when the services received create or enhance nonfinancial assets or require specialized skills possessed by the individuals providing the service, and the service would typically need to be purchased if not donated.

Deferred Revenue – Fees charged to vendors participating in the Christmas Market which are received prior to a fiscal year-end but which relate to the following fiscal year are deferred and recognized as revenue in that following fiscal year, once the Christmas Market is held.

Revenue Recognition – Revenue is recognized when earned. Heritage Festival and Christmas Market sponsorship and fees revenue are deferred to the applicable period in which the related event is held.

Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. The significant estimates included in the financial statements are the estimates of useful lives used for depreciating property and equipment items.

Functional Allocation of Expense – The costs of providing the various programs and activities have been summarized on a functional basis in the statement of activities. The financial statements report certain categories of expenses that are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The Organization allocates these expenses based on time and effort. Expenses that can be identified with a specific program or supporting service are allocated directly according to their natural expenditure classification.

Income Taxes – The Organization is a nonprofit corporation that is exempt from federal income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code ("Code") and comparable State law, and contributions to it are tax deductible within the limitations prescribed by the Code. The Organization did not conduct any unrelated

business activities in the current fiscal year. Therefore, the Organization has made no provision for federal income taxes in the accompanying financial statements.

The Organization applies the provisions of FASB ASC Topic 740, *Income Taxes*, which prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Topic 740 also provides guidance on de-recognition, classification, interest and penalties, accounting in interim periods, disclosures and transition.

The Organization believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.

Advertising – Advertising costs are expensed as incurred. Advertising expense for the year ended September 30, 2024 and 2023 was \$61,495 and \$73,210, respectively.

NOTE 2 – LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of September 30, 2024, are comprised of cash and cash equivalents amounting to \$226,287.

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Organization considers all expenditures related to its ongoing program activities, as well as the conduct of services undertaken to support those activities, to be general expenditures.

The Organization is primarily funded by grants and festival revenue. The Organization has a goal to maintain financial assets on hand to meet two festivals' operating expenses, which are, on average, approximately \$100,000. The majority of the funds needed to meet the festival operating expenses is maintained in a savings account with Amegy Bank.

NOTE 3 – CONCENTRATIONS

The Organization maintains cash balances at one financial institution located in Texas. The accounts are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At September 30, 2024 and 2023, the Organization had no uninsured balances.

For the year ended September 30, 2024, one grantor accounted for twenty-seven percent (27%) of total public support and revenue. For the year ended September 30, 2023, one grantor accounted for thirty-one percent (31%) of total public support and revenue.

The Organization also conducts its operations solely in the Tomball area, and, therefore, is subject to risks from changes in local economic conditions. A downturn in the local economy could cause a decrease in grants and negatively impact festival revenues.

The Tomball Sister City Organization

Item 4.

Notes to Financial Statements

NOTE 4 – PROPERTY AND EQUIPMENT

As of September 30, 2024 and 2023, property and equipment consist of the following:

	2024	2023
Computers	\$3,357	\$3,357
Trailers	8,248	8,248
Subtotal property and equipment	11,605	11,605
Less: accumulated depreciation	(9,008)	(7,882)
Total property and equipment, net	\$2,597	\$3,723

Depreciation expense for the years ended September 30, 2024 and 2023 was \$1,126 in both years.

NOTE 5 – SUBSEQUENT EVENTS

Management has evaluated subsequent events through December 27, 2024, the date the financial statements were available to be issued. No additional events were identified that are required to be disclosed or would have a material impact on reported net assets or changes in net assets.

Consolidated

Accounts	Budget totals
Income	
Uncategorized Income	
Billable Expense Income	
Exchange Students - Income	
Donations	
Total Exchange Students - Income	\$0.00
Interest	
Markup	
Rewards	
Sales of Product Income	
TGCM Income	\$80000.00
Festival	\$60000.00
Sponsors	\$20000.00
Vendors	\$100000.00
Total TGCM Income	\$260000.00
TGHF Income	\$80000.00
Festival	\$60000.00
Sponsors	\$20000.00
Vendors	\$100000.00
Total TGHF Income	\$260000.00
Total Income	\$520000.00
Cost of Goods Sold	
Cost of Goods Sold	
Total Cost of Goods Sold	
Expense	
Reconciliation Discrepancies	
Accounting	
Administration	
Auto	
Fuel	
Taxes/Registration	
Vehicle Insurance	
Total Auto	\$0.00
Bank Charges	
Credit Card Fees	
Total Bank Charges	\$0.00
Donations	
Dues and Subscriptions	
Insurance	
Internet	
Meals	
Postage	
Préventive Maintenance	
Sister City Visit	
Food	
Travel	
Total Sister City Visit	\$0.00
Storage	
Telephone	
Tolls	
Travel	

Accounts	
Website	
Total Administration	\$0.00
Bookkeeping	
Deprecation	
Equipment	
Van	
Maintenance	
Total Van	\$0.00
Total Equipment	\$0.00
Exchange Students - Expenses	
Insurance	
Meals and Entertainment	
Travel	
Total Exchange Students - Expenses	\$0.00
Heritage Dinner	
Hospitality Events	
Meals	
Total Hospitality Events	\$0.00
Interest Paid	
Payroll	\$0.00
Payroll Service Fee	\$2000.00
Payroll Tax Expenses	\$4000.00
Salary and Wages	\$49000.00
Workers Compensation	\$237.00
Total Payroll	\$55237.00
Purchases	
Repairs	
Taxes	
TGCM Expenses	\$0.00
Advertising	\$35000.00
Buttonstar	
Champions	
Community Impace	
Das Fenster	
Horsebay	
Houston Chronicle	
Kulp Radio	
Kwik Kopy	
Neighborhood Publishing	
Photography	\$3500.00
Polka	
Star Montrose	
The Rural Connection	
Tomball Chamber	
Townsquare Publications	
Total Advertising	\$38500.00
Distributors	\$90000.00
Buses	
Porta Potties	
Total Distributors	\$90000.00
Entertainment	\$80000.00
Entertainers	
Hotels	
Total Entertainment	\$80000.00
Hospitality	
Meals	

		Item 4.
Accounts		
Total Hospitality		\$0.00
Insurance		\$4500.00
Security		\$8000.00
Volunteers		
Snacks		
Total Volunteers		\$0.00
Total TGCM Expenses		\$221000.00
TGHF Expenses		\$0.00
Advertising		\$35000.00
American Classifieds		
Blanco County News		
Button Star		
Community Impact		
Das Fenster		
Hello Woodlands		
Horshoebay		
Houston Chronicle		
Houston Livestock Show & Rodeo		
KStar		
Kulp Radio		
Kwik Kopy		
Neighborhood Publication		
Photography		
Polka		
Printing Materials		
ButtonStar		
FastSigns		
Total Printing Materials		\$0.00
SP Merchandise		
Star Montrose		
Team		
The Rural Connection		
Tomball Chamber		
Townsquare Publications		
Zoogee World		
Total Advertising		\$35000.00
Distributors		\$90000.00
Buses		
Porta Potties		
Total Distributors		\$90000.00
Entertainment		\$80000.00
Entertainers		
Hotels		
Total Entertainment		\$80000.00
Equipment Rental		
Hospitality		\$1700.00
Meals		
Total Hospitality		\$1700.00
Insurance		\$4500.00
Security		\$8000.00
Volunteers		\$1300.00
Snacks		
Total Volunteers		\$1300.00
Total TGHF Expenses		\$220500.00
Unapplied Cash Bill Payment Expense		
Uncategorized Expense		

		Item 4.
Accounts		
Total Expense		\$496737.00
Other Income		
Other Expense		
Reconciliation Discrepancies-1		
Total Other Expense		
Total Net Income		\$23263.00

Thursday, June 19, 2025 at 3:31 PM CDT

Company name: The Tomball Sister Cities Organization

Budget name: Budget of expenditures for grant funds.

Budget type: Profit and loss

Period: FY 2025 (Oct 2024 - Sep 2025)

Item 4.

Consolidated

Accounts	Budget totals
Income	
Uncategorized Income	
Billable Expense Income	
Exchange Students - Income	
Donations	
Total Exchange Students - Income	\$0.00
Interest	
Markup	
Rewards	
Sales of Product Income	
TGCM Income	
Festival	
Sponsors	
Vendors	
Total TGCM Income	\$0.00
TGHF Income	
Festival	
Sponsors	
Vendors	
Total TGHF Income	\$0.00
Total Income	\$0.00
Cost of Goods Sold	
Cost of Goods Sold	
Total Cost of Goods Sold	
Expense	
Reconciliation Discrepancies	
Accounting	
Administration	
Auto	
Fuel	
Taxes/Registration	
Vehicle Insurance	
Total Auto	\$0.00
Bank Charges	
Credit Card Fees	
Total Bank Charges	\$0.00
Donations	
Dues and Subscriptions	
Insurance	
Internet	
Meals	
Postage	
Preventive Maintenance	
Sister City Visit	
Food	
Travel	
Total Sister City Visit	\$0.00
Storage	
Telephone	
Tolls	
Travel	

Accounts	Budget
Website	
Total Administration	\$0.00
Bookkeeping	
Deprecation	
Equipment	
Van	
Maintenance	
Total Van	\$0.00
Total Equipment	\$0.00
Exchange Students - Expenses	
Insurance	
Meals and Entertainment	
Travel	
Total Exchange Students - Expenses	\$0.00
Heritage Dinner	
Hospitality Events	
Meals	
Total Hospitality Events	\$0.00
Interest Paid	
Payroll	\$0.00
Payroll Service Fee	
Payroll Tax Expenses	
Salary and Wages	
Workers Compensation	
Total Payroll	\$0.00
Purchases	
Repairs	
Taxes	
TGCM Expenses	\$0.00
Advertising	\$35000.00
Buttonstar	
Champions	
Community Impace	
Das Fenster	
Horsebay	
Houston Chronicle	
Kulp Radio	
Kwik Kopy	
Neighborhood Publishing	
Photography	
Polka	
Star Montrose	
The Rural Connection	
Tomball Chamber	
Townsquare Publications	
Total Advertising	\$35000.00
Distributors	\$37000.00
Buses	
Porta Potties	
Total Distributors	\$37000.00
Entertainment	
Entertainers	
Hotels	
Total Entertainment	\$0.00
Hospitality	
Meals	

Accounts	Budget
Total Hospitality	\$0.00
Insurance	
Security	\$8000.00
Volunteers	
Snacks	
Total Volunteers	\$0.00
Total TGCM Expenses	\$80000.00
TGHF Expenses	\$0.00
Advertising	\$35000.00
American Classifieds	
Blanco County News	
Button Star	
Community Impact	
Das Fenster	
Hello Woodlands	
Horshoebay	
Houston Chronicle	
Houston Livestock Show & Rodeo	
KStar	
Kulp Radio	
Kwik Kopy	
Neighborhood Publication	
Photography	
Polka	
Printing Materials	
ButtonStar	
FastSigns	
Total Printing Materials	\$0.00
SP Merchandise	
Star Montrose	
Team	
The Rural Connection	
Tomball Chamber	
Townsquare Publications	
Zoogee World	
Total Advertising	\$35000.00
Distributors	\$37000.00
Buses	
Porta Potties	
Total Distributors	\$37000.00
Entertainment	
Entertainers	
Hotels	
Total Entertainment	\$0.00
Equipment Rental	
Hospitality	
Meals	
Total Hospitality	\$0.00
Insurance	
Security	\$8000.00
Volunteers	
Snacks	
Total Volunteers	\$0.00
Total TGHF Expenses	\$80000.00
Unapplied Cash Bill Payment Expense	
Uncategorized Expense	

Accounts		Budget	Item 4.
Total Expense		\$160000.00	
Other Income			
Other Expense			
Reconciliation Discrepancies-1			
Total Other Expense			
Total Net Income		\$-160000.00	

Friday, June 20, 2025 at 1:17 PM CDT

City Council Meeting Agenda Item Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the German Christmas Market.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the German Christmas Market.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

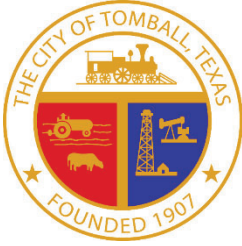
FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: No: If yes, specify Account Number: #

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

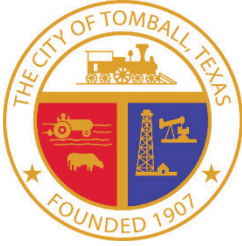
Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026
Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: Tomball Sister City

Street Address: PO BOX 1131

City: Tomball State: Tx Zip Code: 77377

Contact Name: Craig Bogner

Role with Organization/Business: GM- Tomball German Festivals

Phone Number: 832-715-6291 Email: Craig@Tomballgermanfest.org

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

To keep the German culture and Heritage of Tomball.
 Support a Exchange student program from our sister city program.

Section II: Event/Program Information

Event/Program Name: Tomball German Christmas Market

Date(s) of Event/Program: December 12,13 &14 2025

Location of Event/Program (Provide the address or a general location):

100,200,300,400 Blocks of Market street

Website for Event/Program: Tomballgermanfest.org

Is this a new event/program? ☐ Yes ☒ No

If this is not a new event/program, how long has the event/program operated?

16Years

Provide a detailed description of the event/program.

3 Day German Festival. 4 Music Stages, 150 + vendors, carnival, Kids area.
Free Admission, parking and shuttle for all.
To promote Tomball German Heritage and Christmas and to bring visitors to Tomball

Estimated Local Attendees at Event/Program: 40 K

Estimated Out of Town Attendees at Event/Program: 20K

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program. \$ 80,000

Total operating budget for event/program. \$ 248,692

Percent of event/program to be funded by grant. 32 %

Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures. \$ 30000

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

22,000 Payroll, 30,000 Advertising 90,000 for Generators, light towers, Pot a cans&Buses

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

☒ Paid Advertising
 ☒ Radio
 ☒ Television
 ☒ Brochures
☒ Social Media
 ☒ Newspaper
 ☒ Online/Digital Ads
 ☒ Press Release
☐ Other (please specify) _____

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

All Hotels will have a link on website. Vendors hotel link during the application process.

How will you measure the impact of your event on local overnight accommodations?

The city has Meeting with Hotels. The hotels that come most give a room count the days.

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☐ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☒ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☐ Encouragement, promotion, improvement, and application of the arts.
☐ Historical restoration or preservation programs.
☐ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization’s most recent annual budget.
3. Organization’s most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization’s balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: _____

Applicant Printed Name: Craig Bogner

Date of Application: 6/18/2025

Statement of Financial Position

Item 5.

The Tomball Sister Cities Organization

As of September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Assets	
Current Assets	
Bank Accounts	
Amegy Checking (main) - 1450	
Amegy Checking (SPONSOR)- 6566	
Amegy Payroll Account - 7769	
Amegy - Savings Acct - 3263	14,046.27
Forst Checking 0899 - Payroll	10,484.51
Forst Checking 0910 - Savings	6,000.00
Frost Checking (0398)	170,106.74
Frost Checking 0902 - Sponsors	5,656.75
Total for Bank Accounts	\$206,294.27
Accounts Receivable	
Other Current Assets	
Other receivables	
Total for Other Current Assets	0
Total for Current Assets	\$206,294.27
Fixed Assets	
Accumulated Depreciation	-6,756.00
Computer	3,357.09
Trailer	8,248.00
Total for Fixed Assets	\$4,849.09
Other Assets	
Total for Assets	\$211,143.36
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	
Total for Accounts Payable	0
Credit Cards	
Amy CC	3,515.15
Craig CC	6,222.20
Sandra CC	107.80
Tomball Sister City CC	
VISA 5071	
Visa 7970	-107.14
Visa 8630	153.35

Statement of Financial Position

The Tomball Sister Cities Organization

As of September 30, 2024

Item 5.

DISTRIBUTION ACCOUNT	TOTAL
Total for Credit Cards	\$9,891.36
Other Current Liabilities	
Exchange Student Fund Balance	8,134.32
Payroll Liability	
Total for Other Current Liabilities	\$8,134.32
Total for Current Liabilities	\$18,025.68
Long-term Liabilities	
Total for Liabilities	\$18,025.68
Equity	
Retained Earnings	158,485.82
Net Income	32,181.86
Opening Bal Equity	2,450.00
Total for Equity	\$193,117.68
Total for Liabilities and Equity	\$211,143.36

Tomball Sister City Organization, Inc.
P. O. Box 1131, Tomball, TX 77377
AS OF 9/26/20024

Officers and Board of Directors

NAME & ADDRESS	PHONE	EMAIL	TERM EXPIRES
Grady Martin, Chair 8118 Spring Stuebner Road Spring, Texas 77379	713-829-7116	gradsand@yahoo.com	2027
Kit Pfeiffer, Vice Chair 31214 Helen Lane Tomball, Texas 77375	281-460-7630	kitpfeiffer@yahoo.com	2027
Sandra Martin 8118 Spring Stuebner Road Spring, Texas 77379	713-829-0313	gradsand@yahoo.com	2027
Craig Bogner Treasurer, General Manager 31226 Antonia Lane Tomball, Texas 77375	832-715-6291	craigbogner@gmail.com craig@tomballgermanfest.org	2026
Amy Mason 26003 Di-jon Tomball, Texas 77377	713-412-1882	amyamason@yahoo.com	2025
Alicia Engleke 31214 Alice Lane Tomball, Texas 77375	713-857-8146	alicia.eichhorn@att.net	2025
Sonja Love 11907 Julia Lane Magnolia, Texas 77354	832-236-5412	larry.sonja@sbcglobal.net	2027
Wesley Burke 11918 Painted Canyon Dr. Tomball, Texas 77377	832-347-0699	wesleyjburke.com	2026
Nora Stovall, Secetary 307 Florence Street Tomball, Texas 77375	281-541-1449	norastovall@sbcglobal.net	2026
Shawn Mason 26003 Di-jon Tomball, Texas 77377	281-799-9292	shama_go14@yahoo.com	2027
Mark Barnett 2 Blue Bungalow Drive Spring, Texas 77389	832-326-8141	mjbarnett76@yahoo.com	2025
Dennis Wilkins 12515 Fort Isabella Drive Tomball, Texas 77375	713-447-1930	Dennis@thewwtech.com	2025

Consolidated

Accounts	Budget totals
Income	
Uncategorized Income	
Billable Expense Income	
Exchange Students - Income	
Donations	
Total Exchange Students - Income	\$0.00
Interest	
Markup	
Rewards	
Sales of Product Income	
TGCM Income	\$80000.00
Festival	\$60000.00
Sponsors	\$20000.00
Vendors	\$100000.00
Total TGCM Income	\$260000.00
TGHF Income	\$80000.00
Festival	\$60000.00
Sponsors	\$20000.00
Vendors	\$100000.00
Total TGHF Income	\$260000.00
Total Income	\$520000.00
Cost of Goods Sold	
Cost of Goods Sold	
Total Cost of Goods Sold	
Expense	
Reconciliation Discrepancies	
Accounting	
Administration	
Auto	
Fuel	
Taxes/Registration	
Vehicle Insurance	
Total Auto	\$0.00
Bank Charges	
Credit Card Fees	
Total Bank Charges	\$0.00
Donations	
Dues and Subscriptions	
Insurance	
Internet	
Meals	
Postage	
Préventive Maintenance	
Sister City Visit	
Food	
Travel	
Total Sister City Visit	\$0.00
Storage	
Telephone	
Tolls	
Travel	

Accounts	
Website	
Total Administration	\$0.00
Bookkeeping	
Deprecation	
Equipment	
Van	
Maintenance	
Total Van	\$0.00
Total Equipment	\$0.00
Exchange Students - Expenses	
Insurance	
Meals and Entertainment	
Travel	
Total Exchange Students - Expenses	\$0.00
Heritage Dinner	
Hospitality Events	
Meals	
Total Hospitality Events	\$0.00
Interest Paid	
Payroll	\$0.00
Payroll Service Fee	\$2000.00
Payroll Tax Expenses	\$4000.00
Salary and Wages	\$49000.00
Workers Compensation	\$237.00
Total Payroll	\$55237.00
Purchases	
Repairs	
Taxes	
TGCM Expenses	\$0.00
Advertising	\$35000.00
Buttonstar	
Champions	
Community Impace	
Das Fenster	
Horsebay	
Houston Chronicle	
Kulp Radio	
Kwik Kopy	
Neighborhood Publishing	
Photography	\$3500.00
Polka	
Star Montrose	
The Rural Connection	
Tomball Chamber	
Townsquare Publications	
Total Advertising	\$38500.00
Distributors	\$90000.00
Buses	
Porta Potties	
Total Distributors	\$90000.00
Entertainment	\$80000.00
Entertainers	
Hotels	
Total Entertainment	\$80000.00
Hospitality	
Meals	

		Item 5.
Accounts		
Total Hospitality		\$0.00
Insurance		\$4500.00
Security		\$8000.00
Volunteers		
Snacks		
Total Volunteers		\$0.00
Total TGCM Expenses		\$221000.00
TGHF Expenses		\$0.00
Advertising		\$35000.00
American Classifieds		
Blanco County News		
Button Star		
Community Impact		
Das Fenster		
Hello Woodlands		
Horshoebay		
Houston Chronicle		
Houston Livestock Show & Rodeo		
KStar		
Kulp Radio		
Kwik Kopy		
Neighborhood Publication		
Photography		
Polka		
Printing Materials		
ButtonStar		
FastSigns		
Total Printing Materials		\$0.00
SP Merchandise		
Star Montrose		
Team		
The Rural Connection		
Tomball Chamber		
Townsquare Publications		
Zoogee World		
Total Advertising		\$35000.00
Distributors		\$90000.00
Buses		
Porta Potties		
Total Distributors		\$90000.00
Entertainment		\$80000.00
Entertainers		
Hotels		
Total Entertainment		\$80000.00
Equipment Rental		
Hospitality		\$1700.00
Meals		
Total Hospitality		\$1700.00
Insurance		\$4500.00
Security		\$8000.00
Volunteers		\$1300.00
Snacks		
Total Volunteers		\$1300.00
Total TGHF Expenses		\$220500.00
Unapplied Cash Bill Payment Expense		
Uncategorized Expense		

		Item 5.
Accounts		
Total Expense		\$496737.00
Other Income		
Other Expense		
Reconciliation Discrepancies-1		
Total Other Expense		
Total Net Income		\$23263.00

Thursday, June 19, 2025 at 3:31 PM CDT

The Tomball Sister City Organization

Independent Accountants' Review Report and
Financial Statements for the Fiscal Year Ended September 30, 2024
(with comparative totals for 2023)



Tipton & Company
CERTIFIED PUBLIC ACCOUNTANTS

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Tipton & Company

CERTIFIED PUBLIC ACCOUNTANTS

Tipton & Company LLC
 134 Vintage Park Blvd. Ste. A #106
 Houston, TX 77070
www.nonprofitacctg.com

INDEPENDENT ACCOUNTANTS' REVIEW REPORT

To the Board of Directors of
 The Tomball Sister City Organization
 Tomball, Texas

We have reviewed the accompanying financial statements of The Tomball Sister City Organization (a nonprofit organization), which comprise the statement of financial position as of September 30, 2024, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of entity management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

Accountants' Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

We are required to be independent of the Organization and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our review.

Accountant's Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously reviewed The Tomball Sister City Organization's 2023 financial statements dated May 23, 2024. The summarized comparative information presented herein as of and for the year ended September 30, 2023, is consistent, in all material respects, with the reviewed financial statements from which it has been derived.

Tipton & Company LLC

Tipton & Company
 Certified Public Accountants
 Houston, Texas

December 27, 2024

The Tomball Sister City Organization

Statement of Financial Position

Item 5.

As of September 30, (with comparative totals for 2023)	2024	2023
Assets		
Cash and cash equivalents	\$ 226,287	\$ 215,218
Property and equipment, net	2,597	3,723
Total Assets	\$ 228,884	\$ 218,941
Liabilities and Net Assets		
Liabilities		
Deferred revenue	\$ 47,440	\$ 40,125
Accrued expenses	18,025	10,754
Total Liabilities	65,465	50,879
Net Assets		
Without donor restriction	163,419	168,062
Total Net Assets	163,419	168,062
Total Liabilities and Net Assets	\$ 228,884	\$ 218,941

See accompanying notes and independent accountants' review report.

The Tomball Sister City Organization

Item 5.

Statement of Activities

Year ended September 30, <i>(with comparative totals for 2023)</i>	2024 Total	2023 Total
Without Donor Restrictions		
Public Support and Revenues		
Public Support		
Tomball German Heritage Festival grant	\$ 80,000	\$ 80,000
Tomball German Christmas Market grant	80,000	80,000
Revenue		
Tomball German Heritage Festival sponsorship and fees	173,372	183,202
Tomball German Christmas Market sponsorship and fees	214,363	161,058
Other income	4,816	268
Total Public Support and Revenues	552,551	504,528
Expenses		
Program Activities		
Tomball German Heritage Festival	220,151	211,373
Tomball German Christmas Market	214,202	212,337
Total Program Activities	434,353	423,710
Supporting Activities		
Management and general	81,283	61,065
Fundraising	41,558	47,883
Total Supporting Activities	122,841	108,948
Total Expenses	557,194	532,658
Change in Net Assets	(4,643)	(28,130)
Net Assets, Beginning of Year	168,062	196,192
Net Assets, End of Year	\$ 163,419	\$ 168,062

See accompanying notes and independent accountants' review report.

The Tomball Sister City Organization

Item 5.

Statement of Functional Expenses

Year ended September 30, (with comparative totals for 2023)	Program Activities			Supporting Activities			2024 Total	2023 Total
	Tomball German Heritage Festival	Tomball Christmas Market	Total Program Activities	Management & General	Fundraising	Total Supporting Activities		
Salaries and related expenses								
Salaries and wages	\$ 12,638	\$ 12,638	\$ 25,276	\$ 15,165	\$ 10,110	\$ 25,275	\$ 50,551	\$ 49,884
Payroll taxes	967	967	1,934	1,160	773	1,933	3,867	3,967
Employee benefits	60	60	120	72	48	120	240	231
Total salaries and related expenses	13,665	13,665	27,330	16,397	10,931	27,328	54,658	54,082
Other Expenses								
Advertising	15,356	16,586	31,942	-	29,553	29,553	61,495	73,210
Auto	-	-	-	2,717	-	2,717	2,717	1,454
Depreciation	-	-	-	1,126	-	1,126	1,126	1,126
Distributors	104,764	38,691	143,455	-	-	-	143,455	199,491
Donations	-	-	-	1,784	-	1,784	1,784	3,861
Dues	-	-	-	3,805	-	3,805	3,805	5,257
Equipment rental	-	63,987	63,987	-	-	-	63,987	-
Exchange students	5,480	5,480	10,960	-	-	-	10,960	7,718
Hospitality	2,399	2,484	4,883	-	-	-	4,883	3,186
Insurance	1,297	-	1,297	8,680	-	8,680	9,977	7,670
Interest	-	-	-	313	-	313	313	-
Maintenance	-	-	-	-	-	-	-	2,023
Miscellaneous	-	-	-	7,793	-	7,793	7,793	3,295
Postage	-	-	-	293	-	293	293	235
Professional fees	-	-	-	4,500	-	4,500	4,500	5,000
Security	5,120	4,640	9,760	-	-	-	9,760	7,000
Service fees	580	581	1,161	1,621	464	2,085	3,246	2,222
Storage	-	-	-	1,300	-	1,300	1,300	1,246
Supplies	6,160	3,053	9,213	-	-	-	9,213	11,762
Taxes	763	763	1,526	917	610	1,527	3,053	403
Travel and entertainment	64,567	64,272	128,839	23,374	-	23,374	152,213	134,419
Utilities	-	-	-	5,897	-	5,897	5,897	6,143
Volunteers	-	-	-	-	-	-	-	683
Website	-	-	-	766	-	766	766	1,172
Total Other Expenses	206,486	200,537	407,023	64,886	30,627	95,513	502,536	478,576
Total Expenses	\$ 220,151	\$ 214,202	\$ 434,353	\$ 81,283	\$ 41,558	\$ 122,841	\$ 557,194	\$ 532,658

See accompanying notes and independent accountants' review report.

The Tomball Sister City Organization

Item 5.

Statement of Cash Flows

Year ended September 30, (with comparative totals for 2023)	2024	2023
Cash Flows from Operating Activities		
Change in Net Assets	\$ (4,643)	\$ (28,130)
Adjustments to reconcile change in net assets to net cash from operating activities:		
Depreciation expense	1,126	1,126
Change in operating assets and liabilities:		
Deferred revenue	7,315	(8,127)
Accrued expenses	7,271	(5,343)
Total Adjustments	15,712	(12,344)
Net Change from Operating Activities	11,069	(40,474)
Net Change in Cash and Cash Equivalents	11,069	(40,474)
Cash and Cash Equivalents, beginning of year	215,218	255,692
Cash and Cash Equivalents, end of year	\$ 226,287	\$ 215,218

See accompanying notes and independent accountants' review report.

NOTE 1 – NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations – The Tomball Sister City Organization, (the Organization), is a nonprofit corporation founded in 2003 under the laws of the State of Texas for the purpose of the establishment, sponsorship, promotion and support of cultural, business, educational, diplomatic and other exchanges with Tomball's sister city – Telgte, Germany.

To this end the corporation endeavors to promote and heighten public interest in and appreciation of the culture, business, education, products, people or language of sister cities of the City of Tomball, Texas, and to develop programs and provide activities that highlight such culture, business, education, products, people or language, and to assist its members in the development of such programs and the provisions of such activities.

The following programs and services are supported by The Tomball Sister City Organization:

- *Tomball German Heritage Festival* – traditionally held in Tomball during the last weekend in March. It is a Music/Street festival celebrating German and ethnic heritage with four stages of live music entertainment, ethnic and festival food, beer, wine, street vendors, all kinds of German souvenirs and clothing, arts crafts, antiques, Heritage Center, German church service, fireworks, carnival, pony ride, petting zoo, strolling music makers, street performers, and much more.
- *Tomball German Christmas Market* – traditionally held in Tomball on the second weekend in December and includes live music and an open-air market. During this event, street vendors line Market and S. Walnut Streets, selling German Christmas items, arts and crafts, and much more. The event is sponsored by the City of Tomball, Tomball Sister City Organization, and German Heritage Festival.

Basis of Accounting – The financial statements of The Tomball Sister City Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation – The Organization reports information regarding its financial position and activities according to two classes of net assets that are based upon the existence or absence of restrictions on use that are placed by its donors: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions are resources available to support operations and not subject to donor restrictions. The only limits on the use of net assets without donor restrictions are the broad limits resulting from the nature of the Organization, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations. Assets restricted solely through the actions of the Board of Directors are reported as net assets without donor restrictions, board-designated.

Net assets with donor restrictions are resources that are subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or use for a purpose specified by the donor. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-restricted endowment earnings are released when those earnings are appropriated with spending policies and are used for the specified purpose.

Cash and Cash Equivalents – The Organization considers all monies in banks and highly liquid investments with maturities of three months or less from the date of purchase to be cash and cash equivalents. The carrying values

The Tomball Sister City Organization

Item 5.

Notes to Financial Statements

of any cash and cash equivalents are deemed to approximate their fair values because of the short maturities of those financial instruments.

Property and Equipment – Property and equipment are stated at cost or fair value at date of donation. Depreciation is provided using the straight-line method over the estimated useful lives of the assets as follows:

Computers	2 years
Trailers	5 - 15 years

Additions and betterments of \$2,500 or more are capitalized, while maintenance and repairs that do not improve or extend the useful lives of the respective assets are expensed currently.

Property and equipment are reviewed for impairment if the use of the asset significantly changes or another indicator of possible impairment is noted. If the carrying amount for the asset is not recoverable, the value is written down to the asset's fair value.

Grants – Grants are recognized when cash, or other assets, an unconditional promise to give, or notification of a beneficial interest is received. Conditional promises to give are not recognized until the conditions on which they depend have been substantially met or the donor has explicitly released the condition.

Contributed Nonfinancial Assets – Contributed nonfinancial assets are recognized as contributions at fair value when an unconditional commitment is received from the donor. The related expense is recognized as the item is used. Contributed services are recognized as support at their estimated fair value only when the services received create or enhance nonfinancial assets or require specialized skills possessed by the individuals providing the service, and the service would typically need to be purchased if not donated.

Deferred Revenue – Fees charged to vendors participating in the Christmas Market which are received prior to a fiscal year-end but which relate to the following fiscal year are deferred and recognized as revenue in that following fiscal year, once the Christmas Market is held.

Revenue Recognition – Revenue is recognized when earned. Heritage Festival and Christmas Market sponsorship and fees revenue are deferred to the applicable period in which the related event is held.

Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. The significant estimates included in the financial statements are the estimates of useful lives used for depreciating property and equipment items.

Functional Allocation of Expense – The costs of providing the various programs and activities have been summarized on a functional basis in the statement of activities. The financial statements report certain categories of expenses that are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The Organization allocates these expenses based on time and effort. Expenses that can be identified with a specific program or supporting service are allocated directly according to their natural expenditure classification.

Income Taxes – The Organization is a nonprofit corporation that is exempt from federal income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code ("Code") and comparable State law, and contributions to it are tax deductible within the limitations prescribed by the Code. The Organization did not conduct any unrelated

The Tomball Sister City Organization

Item 5.

Notes to Financial Statements

business activities in the current fiscal year. Therefore, the Organization has made no provision for federal income taxes in the accompanying financial statements.

The Organization applies the provisions of FASB ASC Topic 740, *Income Taxes*, which prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Topic 740 also provides guidance on de-recognition, classification, interest and penalties, accounting in interim periods, disclosures and transition.

The Organization believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.

Advertising – Advertising costs are expensed as incurred. Advertising expense for the year ended September 30, 2024 and 2023 was \$61,495 and \$73,210, respectively.

NOTE 2 – LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of September 30, 2024, are comprised of cash and cash equivalents amounting to \$226,287.

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Organization considers all expenditures related to its ongoing program activities, as well as the conduct of services undertaken to support those activities, to be general expenditures.

The Organization is primarily funded by grants and festival revenue. The Organization has a goal to maintain financial assets on hand to meet two festivals' operating expenses, which are, on average, approximately \$100,000. The majority of the funds needed to meet the festival operating expenses is maintained in a savings account with Amegy Bank.

NOTE 3 – CONCENTRATIONS

The Organization maintains cash balances at one financial institution located in Texas. The accounts are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At September 30, 2024 and 2023, the Organization had no uninsured balances.

For the year ended September 30, 2024, one grantor accounted for twenty-seven percent (27%) of total public support and revenue. For the year ended September 30, 2023, one grantor accounted for thirty-one percent (31%) of total public support and revenue.

The Organization also conducts its operations solely in the Tomball area, and, therefore, is subject to risks from changes in local economic conditions. A downturn in the local economy could cause a decrease in grants and negatively impact festival revenues.

The Tomball Sister City Organization

Item 5.

Notes to Financial Statements

NOTE 4 – PROPERTY AND EQUIPMENT

As of September 30, 2024 and 2023, property and equipment consist of the following:

	2024	2023
Computers	\$3,357	\$3,357
Trailers	8,248	8,248
Subtotal property and equipment	11,605	11,605
Less: accumulated depreciation	(9,008)	(7,882)
Total property and equipment, net	\$2,597	\$3,723

Depreciation expense for the years ended September 30, 2024 and 2023 was \$1,126 in both years.

NOTE 5 – SUBSEQUENT EVENTS

Management has evaluated subsequent events through December 27, 2024, the date the financial statements were available to be issued. No additional events were identified that are required to be disclosed or would have a material impact on reported net assets or changes in net assets.

Company name: The Tomball Sister Cities Organization

Budget name: Budget of expenditures for grant funds.

Budget type: Profit and loss

Period: FY 2025 (Oct 2024 - Sep 2025)

Item 5.

Consolidated

Accounts	Budget totals
Income	
Uncategorized Income	
Billable Expense Income	
Exchange Students - Income	
Donations	
Total Exchange Students - Income	\$0.00
Interest	
Markup	
Rewards	
Sales of Product Income	
TGCM Income	
Festival	
Sponsors	
Vendors	
Total TGCM Income	\$0.00
TGHF Income	
Festival	
Sponsors	
Vendors	
Total TGHF Income	\$0.00
Total Income	\$0.00
Cost of Goods Sold	
Cost of Goods Sold	
Total Cost of Goods Sold	
Expense	
Reconciliation Discrepancies	
Accounting	
Administration	
Auto	
Fuel	
Taxes/Registration	
Vehicle Insurance	
Total Auto	\$0.00
Bank Charges	
Credit Card Fees	
Total Bank Charges	\$0.00
Donations	
Dues and Subscriptions	
Insurance	
Internet	
Meals	
Postage	
Preventive Maintenance	
Sister City Visit	
Food	
Travel	
Total Sister City Visit	\$0.00
Storage	
Telephone	
Tolls	
Travel	

Accounts	
Website	
Total Administration	\$0.00
Bookkeeping	
Deprecation	
Equipment	
Van	
Maintenance	
Total Van	\$0.00
Total Equipment	\$0.00
Exchange Students - Expenses	
Insurance	
Meals and Entertainment	
Travel	
Total Exchange Students - Expenses	\$0.00
Heritage Dinner	
Hospitality Events	
Meals	
Total Hospitality Events	\$0.00
Interest Paid	
Payroll	\$0.00
Payroll Service Fee	
Payroll Tax Expenses	
Salary and Wages	
Workers Compensation	
Total Payroll	\$0.00
Purchases	
Repairs	
Taxes	
TGCM Expenses	\$0.00
Advertising	\$35000.00
Buttonstar	
Champions	
Community Impace	
Das Fenster	
Horsebay	
Houston Chronicle	
Kulp Radio	
Kwik Kopy	
Neighborhood Publishing	
Photography	
Polka	
Star Montrose	
The Rural Connection	
Tomball Chamber	
Townsquare Publications	
Total Advertising	\$35000.00
Distributors	\$37000.00
Buses	
Porta Potties	
Total Distributors	\$37000.00
Entertainment	
Entertainers	
Hotels	
Total Entertainment	\$0.00
Hospitality	
Meals	

Accounts	Budget
Total Hospitality	\$0.00
Insurance	
Security	\$8000.00
Volunteers	
Snacks	
Total Volunteers	\$0.00
Total TGCM Expenses	\$80000.00
TGHF Expenses	\$0.00
Advertising	\$35000.00
American Classifieds	
Blanco County News	
Button Star	
Community Impact	
Das Fenster	
Hello Woodlands	
Horshoebay	
Houston Chronicle	
Houston Livestock Show & Rodeo	
KStar	
Kulp Radio	
Kwik Kopy	
Neighborhood Publication	
Photography	
Polka	
Printing Materials	
ButtonStar	
FastSigns	
Total Printing Materials	\$0.00
SP Merchandise	
Star Montrose	
Team	
The Rural Connection	
Tomball Chamber	
Townsquare Publications	
Zoogee World	
Total Advertising	\$35000.00
Distributors	\$37000.00
Buses	
Porta Potties	
Total Distributors	\$37000.00
Entertainment	
Entertainers	
Hotels	
Total Entertainment	\$0.00
Equipment Rental	
Hospitality	
Meals	
Total Hospitality	\$0.00
Insurance	
Security	\$8000.00
Volunteers	
Snacks	
Total Volunteers	\$0.00
Total TGHF Expenses	\$80000.00
Unapplied Cash Bill Payment Expense	
Uncategorized Expense	

Accounts		Budget	Item 5.
Total Expense		\$160000.00	
Other Income			
Other Expense			
Reconciliation Discrepancies-1			
Total Other Expense			
Total Net Income		\$-160000.00	

Friday, June 20, 2025 at 1:17 PM CDT

Statement of Activity

Item 5.

The Tomball Sister Cities Organization

October 1, 2023-September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Income	
Interest	-143.30
Rewards	3,958.42
TGCM Income	\$80,000.00
Festival	76,606.86
Sponsors	20,000.00
Vendors	153,455.36
Total for TGCM Income	\$330,062.22
TGHF Income	\$80,000.00
Festival	69,800.00
Sponsors	20,000.00
Vendors	83,572.40
Total for TGHF Income	\$253,372.40
Uncategorized Income	1,000.00
Total for Income	\$588,249.74
Cost of Goods Sold	
Gross Profit	\$588,249.74
Expenses	
Accounting	4,500.00
Administration	\$3,099.32
Auto	\$865.95
Fuel	1,851.67
Vehicle Insurance	2,370.38
Total for Auto	\$5,088.00
Bank Charges	924.95
Donations	1,783.84
Dues and Subscriptions	3,805.22
Insurance	6,309.48
Internet	2,323.91
Meals	5,633.96
Postage	293.35
Sister City Visit	\$92.63
Food	950.82
Travel	16,547.21
Total for Sister City Visit	\$17,590.66
Storage	1,300.00
Telephone	3,573.07
Tolls	144.23
Website	766.25
Total for Administration	\$52,636.24

Statement of Activity

Item 5.

The Tomball Sister Cities Organization

October 1, 2023-September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Bookkeeping	1,150.00
Exchange Students - Expenses	\$2,817.56
Meals and Entertainment	2,072.22
Travel	5.00
Total for Exchange Students - Expenses	\$4,894.78
Heritage Dinner	3,139.83
Hospitality Events	\$1,422.54
Meals	1,508.54
Total for Hospitality Events	\$2,931.08
Interest Paid	312.86
Payroll	0
Payroll Service Fee	2,322.08
Payroll Tax Expenses	3,867.04
Salary and Wages	50,550.04
Workers Compensation	238.99
Total for Payroll	\$56,978.15
Taxes	3,051.78
TGCM Expenses	\$8,609.16
Advertising	\$12,785.00
Buttonstar	247.15
Community Impace	9,043.23
Das Fenster	600.00
Kulp Radio	152.00
Kwik Kopy	3,645.46
Photography	1,545.61
The Rural Connection	284.50
Tomball Chamber	117.30
Total for Advertising	\$28,420.25
Distributors	\$90,843.89
Buses	9,120.25
Porta Potties	4,800.00
Total for Distributors	\$104,764.14
Entertainment	\$1,885.00
Entertainers	54,075.00
Hotels	6,872.58
Total for Entertainment	\$62,832.58
Hospitality	\$1,289.80
Meals	1,109.20
Total for Hospitality	\$2,399.00
Insurance	1,296.98
Security	5,120.00

Statement of Activity

Item 5.

The Tomball Sister Cities Organization

October 1, 2023-September 30, 2024

DISTRIBUTION ACCOUNT	TOTAL
Volunteers	1,734.06
Total for TGCM Expenses	\$215,176.17
TGHF Expenses	\$3,052.94
Advertising	\$10,452.63
Button Star	381.13
Community Impact	8,696.25
Houston Chronicle	10,825.00
Kwik Kopy	36.79
Photography	1,292.75
Tomball Chamber	1,390.00
Total for Advertising	\$33,074.55
Distributors	\$25,549.32
Buses	8,341.90
Porta Potties	4,800.00
Total for Distributors	\$38,691.22
Entertainment	\$45,225.00
Entertainers	13,050.00
Hotels	5,997.42
Total for Entertainment	\$64,272.42
Equipment Rental	63,986.58
Hospitality	\$1,543.40
Meals	940.88
Total for Hospitality	\$2,484.28
Security	4,640.00
Total for TGHF Expenses	\$210,201.99
Uncategorized Expense	1,095.00
Total for Expenses	\$556,067.88
Net Operating Income	\$32,181.86
Other Income	
Other Expenses	
Net Other Income	0
Net Income	\$32,181.86

City Council Meeting

Agenda Item

Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Annual Holiday Parade.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Annual Holiday Parade.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

FUNDING (IF APPLICABLE)

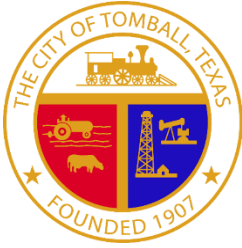
Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____

If yes, specify Account Number: # _____

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

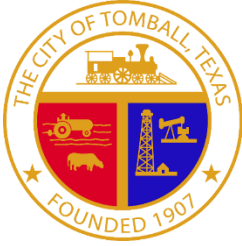
Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026
Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: Greater Tomball Area Chamber of Commerce

Street Address: 29201 Quinn Road, Ste. B

City: Tomball State: TX Zip Code: 77375

Contact Name: Brandy Beyer

Role with Organization/Business: Vice President

Phone Number: 281.351.7222 Email: bbeyer@tomballchamber.org

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

The Greater Tomball Area Chamber of Commerce provides resources and fosters relationships that empower businesses to prosper in Tomball and its surrounding communities.

Section II: Event/Program Information

Event/Program Name: Tomball Holiday Parade

Date(s) of Event/Program: November 22, 2025

Location of Event/Program (Provide the address or a general location):

Main Street

Website for Event/Program: www.tomballchamber.org

Is this a new event/program? ☐ Yes ☒ No

If this is not a new event/program, how long has the event/program operated?

This will be the 60th annual Tomball Holiday Parade.

Provide a detailed description of the event/program.

annual parade with over 150 entries including bands, classic cars, dignitaries and floats

Estimated Local Attendees at Event/Program: 25,000

Estimated Out of Town Attendees at Event/Program: 10,000

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program.	\$ 20,000
Total operating budget for event/program.	\$ 55,900
Percent of event/program to be funded by grant.	36 %
Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures.	\$ 5,000

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

security, advertising, portapotties, dignitary breakfast and band participation

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

<input checked="" type="checkbox"/> Paid Advertising	<input checked="" type="checkbox"/> Radio	<input type="checkbox"/> Television	<input type="checkbox"/> Brochures
<input checked="" type="checkbox"/> Social Media	<input checked="" type="checkbox"/> Newspaper	<input checked="" type="checkbox"/> Online/Digital Ads	<input checked="" type="checkbox"/> Press Release
<input type="checkbox"/> Other (please specify) _____			

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

This event draws crowds from all around - as part of our larger mission, we always encourage participants and attendees to stay in the area and discover Tomball. We request that local business owners promote the parade and themselves as to keep visitors in Tomball and to make a weekend adventure for them and their families.

How will you measure the impact of your event on local overnight accommodations?

Many entries come from out of town for the parade and will choose to stay in Tomball either the night prior to the early morning event, or after to enjoy their visit to Tomball. Our Miss Tomball contestants, who participate in the parade, have many out of town family members that will come to town to support them. They will stay the evening prior and the following evening, as the pageant follows the parade.

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☐ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☒ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☐ Encouragement, promotion, improvement, and application of the arts.
☐ Historical restoration or preservation programs.
☐ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization’s most recent annual budget.
3. Organization’s most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization’s balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: Brandy Beyer  Digitally signed by Brandy Beyer
Date: 2025.07.08 16:33:10 -05'00'

Applicant Printed Name: Brandy Beyer

Date of Application: 7/8/2025

2025 Tomball Holiday Parade Budget

Candy for children	200.00
Breakfast for special guests	2,000.00
Clean-Up	900.00
Port-o-Pottie	1,400.00
Advertising	5,000.00
Security	6,000.00
Debriefing Meeting	300.00
Supplies	1,000.00
Coins	1,100.00
Personnel	30,000.00
Entertainment	8,000.00

Total Expenses:	<u>55,900.00</u>
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Grant Request	20,000.00
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Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 6.

	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	TOTAL Jan - Dec 25
Ordinary Income/Expense													
Income													
Income													
Rent Income	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	74,592.00
Capital Campaign	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	36,000.00
Health & Wellness	1,500.00	1,000.00		1,500.00	3,000.00	4,000.00	1,000.00	3,000.00	2,000.00	3,000.00			20,000.00
Hotel/Motel Tax									45,000.00				45,000.00
First Friday	3,500.00	3,500.00	3,500.00	3,000.00	3,000.00	3,000.00	2,000.00	3,000.00	3,500.00	3,000.00	3,000.00	3,000.00	37,000.00
Networking Breakfast	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	450.00	450.00	500.00	500.00	5,100.00
Women's Committee	0.00	1,000.00	1,500.00	1,500.00	1,000.00	1,000.00	0.00	0.00	13,000.00	0.00	0.00	1,000.00	20,000.00
Interest Income	2,500.00	200.00	200.00	3,000.00	200.00	200.00	3,000.00	200.00	200.00	3,000.00	200.00	200.00	13,100.00
Membership Dues													
New	10,000.00	10,000.00	7,000.00	7,000.00	7,000.00	7,000.00	7,000.00	10,000.00	10,000.00	10,000.00	10,000.00	5,000.00	100,000.00
Allowance Non-Renewal	-6,227.83	-7,412.58	-3,473.08	-4,129.33	-2,466.83	-3,250.08	-3,133.58	-3,578.08	-4,010.33	-4,900.58	-3,271.83	-2,961.58	-48,815.75
Renewal	62,278.33	74,125.83	34,730.83	41,293.33	24,668.33	32,500.83	31,335.83	35,780.83	40,103.33	49,005.83	32,718.33	29,615.83	488,157.46
Total Membership Dues	66,050.50	76,713.25	38,257.75	44,164.00	29,201.50	36,250.75	35,202.25	42,202.75	46,093.00	54,105.25	39,446.50	31,654.25	539,341.71
Miscellaneous Income	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	2,640.00
Publications/Products													
Magazine/Map/Website		400.00		1,000.00	15,000.00		500.00	6,000.00		4,000.00	1,100.00		28,000.00
Total Publications	0.00	400.00	0.00	1,000.00	15,000.00	0.00	500.00	6,000.00	0.00	4,000.00	1,100.00	0.00	28,000.00
Special Events													
Banquet	10,000.00	20,000.00											30,000.00
Golf Classic		10,000.00	20,000.00	5,000.00		5,000.00							40,000.00
Family Reunion					5,000.00								
Tomball Night						10,000.00	22,000.00	5,000.00					37,000.00
Holiday Parade						15,000.00			3,000.00	15,000.00	12,000.00		45,000.00
Miss Tomball Pageant									2,000.00	15,000.00	13,000.00		30,000.00
Total Special Events	10,000.00	30,000.00	20,000.00	5,000.00	5,000.00	30,000.00	22,000.00	5,000.00	5,000.00	30,000.00	25,000.00	0.00	187,000.00
Total Income	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Total Income	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Gross Profit	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Expense													
Building Expense													
Cleaning	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	8,880.00
Electricity	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	12,660.00
Building Interest	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	17,700.00
Reimbursed by tenants	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-20,736.00
Repairs/Maintenance	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	12,000.00
Total Building Expense	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	30,000.00

Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 6.

	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	TOTAL Jan - Dec 25
Accounting Expense	4,000.00	7,500.00	4,000.00			2,500.00							18,000.00
Advertising							2,000.00	3,000.00		1,000.00	4,000.00		10,000.00
Bad Debt Expense	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	10,000.00	4,000.00	20,000.00	70,000.00
Health & Wellness		1,500.00			1,500.00			5,000.00	2,000.00	4,000.00			14,000.00
First Friday	3,000.00	3,500.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,500.00	3,000.00	3,000.00	37,000.00
Networking Breakfast	200.00	200.00	200.00	100.00	150.00	200.00	100.00	100.00	200.00	200.00	150.00	200.00	2,000.00
Women's Committee		500.00	500.00	500.00	500.00	1,000.00	0.00	0.00	2,000.00	0.00	0.00	10,500.00	15,500.00
Young Professionals	200.00			200.00			200.00			200.00			800.00
Bank Fees	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	16,200.00
Board of Directors	500.00								3,000.00	3,700.00	300.00		7,500.00
Dues and Subscriptions	1,150.00				500.00			750.00				1,112.00	3,512.00
Employee Expense													
SUTA	1,700.00	600.00											2,300.00
Development	600.00	1,600.00		3,000.00	0.00	4,000.00	3,000.00	1,000.00	300.00	1,500.00			15,000.00
FUTA	140.00	30.00											170.00
Group Insurance	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	4,000.00	4,000.00	4,000.00	4,000.00	43,600.00
Cell Phone Allowance	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	5,040.00
Payroll Services	550.00	600.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	6,650.00
Payroll Taxes	2,080.00	2,100.00	2,100.00	2,080.00	2,080.00	2,080.00	2,080.00	2,100.00	2,080.00	2,080.00	2,150.00	3,200.00	26,210.00
Salaries													
TACC	36,166.25	37,716.25	36,166.25	37,716.25	36,166.25	36,166.25	36,166.25	37,716.25	36,166.25	36,166.25	38,716.25	36,166.25	441,195.00
Bonus												18,265.00	18,265.00
Total Salaries	36,166.25	37,716.25	36,166.25	37,716.25	36,166.25	36,166.25	36,166.25	37,716.25	36,166.25	36,166.25	38,716.25	54,431.25	459,460.00
Total Employee Expense	45,106.25	46,516.25	42,686.25	47,216.25	42,666.25	46,666.25	45,666.25	45,236.25	43,516.25	44,716.25	45,836.25	62,601.25	558,430.00
Insurance													
Worker's Compensation	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	570.96
Officer & Director Liability	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	1,761.96
General Liab.	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	8,552.04
Total Insurance	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	10,884.96
Membership/Misc. Expense	10,000.00	5,000.00	2,500.00	2,000.00	800.00	500.00	1,000.00	1,000.00	500.00	600.00	800.00	4,000.00	28,700.00
Office Equipment Expense													
Database	6,250.00												6,250.00
Computer Maintenance	400.00	400.00	1,000.00	400.00	400.00	1,500.00	400.00	400.00	400.00	400.00	400.00	400.00	6,500.00
Copier Lease	600.00	800.00	800.00	700.00	700.00	700.00	500.00	600.00	400.00	800.00	800.00	600.00	8,000.00
Pitney Bowes			600.00			600.00			600.00			600.00	2,400.00
Total Office Equip Expense	7,250.00	1,200.00	2,400.00	1,100.00	1,100.00	2,800.00	900.00	1,000.00	1,400.00	1,200.00	1,200.00	1,600.00	23,150.00
Office Supplies	700.00	5,000.00	500.00	700.00	500.00	500.00	600.00	800.00	250.00	500.00	250.00	200.00	10,500.00
Postage & Delivery	500.00	0.00	1,000.00	0.00	0.00	0.00	500.00	500.00	0.00	0.00	0.00	0.00	2,500.00
Property Tax Expense	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	17,469.00
Income Tax Expense	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	7,600.00

Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 6.

	TOTAL												
	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan - Dec 25
Rent	145.00	145.00	145.00	145.00	145.00	145.00	160.00	160.00	160.00	160.00	160.00	160.00	1,830.00
Special Events													
Banquet		12,000.00	1,000.00										13,000.00
Golf Classic			1,000.00	18,000.00									19,000.00
Family Reunion					5,000.00								
Tomball Night							1,000.00	11,000.00					12,000.00
Holiday Parade									1,000.00	1,000.00	21,000.00	1,000.00	24,000.00
Miss Tomball Pageant													
Scholarship Expense											13,000.00		13,000.00
Pageant - Other											5,000.00	2,000.00	7,000.00
Total Miss Tomball										0.00	18,000.00	2,000.00	20,000.00
Total Special Events	0.00	12,000.00	2,000.00	18,000.00	5,000.00	0.00	1,000.00	11,000.00	1,000.00	1,000.00	39,000.00	3,000.00	93,000.00
Telephone Expenses	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	6,720.00
Travel & Entertainment	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	960.00
Total Expense	84,279.50	94,589.50	70,459.50	84,489.50	67,389.50	68,839.50	66,654.50	83,074.50	68,554.50	78,304.50	106,224.50	113,901.50	986,761.00
Net Ordinary Income	9,107.00	28,059.75	2,834.25	-15,489.50	-1,152.00	15,447.25	6,883.75	-13,835.75	56,124.50	28,686.75	-27,542.00	-68,111.25	21,012.71
Principal Building Payment	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	45,000.00
xDepreciation Expense	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	21,756.00
Net Income	3,544.00	22,496.75	-2,728.75	-21,052.50	-6,715.00	9,884.25	1,320.75	-19,398.75	50,561.50	23,123.75	-33,105.00	-73,674.25	-45,743.29

Greater Tomball Area Chamber of Commerce

Independent Auditors' Report and Financial Statements
for the Year Ended December 31, 2024 (Audited)
(with comparative totals for 2023 - Reviewed)



Tipton & Company
CERTIFIED PUBLIC ACCOUNTANTS

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Tipton & Company

CERTIFIED PUBLIC ACCOUNTANTS

Tipton & Company LLC
 134 Vintage Park Blvd. Ste. A #106
 Houston, TX 77070
www.nonprofitacctg.com

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
 Greater Tomball Area Chamber of Commerce
 Tomball, Texas

We have audited the accompanying financial statements of Greater Tomball Area Chamber of Commerce (a nonprofit organization), which comprise the statement of financial position as of December 31, 2024, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Greater Tomball Area Chamber of Commerce as of December 31, 2024, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Greater Tomball Area Chamber of Commerce and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Greater Tomball Area Chamber of Commerce's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Greater Tomball Area Chamber of Commerce's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Greater Tomball Area Chamber of Commerce's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Report on Summarized Comparative Information

The 2023 financial statements were reviewed by us and our report thereon, dated March 4, 2024, stated we were not aware of any material modifications that should be made to those financial statements for them to be in conformity with accounting principles generally accepted in the United States of America. However, a review is substantially less in scope than an audit and does not provide a basis for the expression of an opinion on the financial statements. The summarized comparative information presented herein as of and for the year ended December 31, 2023, is consistent, in all material respects, with the reviewed financial statements from which it has been derived.

Tipton & Company LLC

Tipton & Company LLC
Certified Public Accountants
Houston, Texas

March 12, 2025

Greater Tomball Area Chamber of Commerce

Statement of Financial Position

Item 6.

As of December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Assets		
Cash and cash equivalents	\$ 132,986	\$ 223,989
Certificate of deposit	320,289	309,821
Accounts receivable, net	64,847	44,907
Prepaid expenses	10,677	10,291
Property and equipment, net	796,220	825,005
Total Assets	\$ 1,325,019	\$ 1,414,013
Liabilities and Net Assets		
Liabilities		
Accrued expenses	\$ 30,248	\$ 31,031
Deferred revenues	192,315	192,315
Note payable	240,362	381,706
Deposits	4,150	8,300
Total Liabilities	467,075	613,352
Net Assets		
Without donor restrictions	857,944	800,661
Total Net Assets	857,944	800,661
Total Liabilities and Net Assets	\$ 1,325,019	\$ 1,414,013

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Statement of Activities

Item 6.

Year ended December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Without Donor Restrictions		
Revenue and Support		
Membership dues	\$ 513,014	\$ 483,928
Special events revenue	208,974	204,015
Direct benefit to donor	(26,578)	(22,952)
Capital improvement campaign	30,000	36,000
First Friday luncheon	33,225	42,420
Networking Breakfast	5,245	5,375
Women's Committee	15,712	26,350
City of Tomball hotel tax revenue	45,000	35,000
Rental income	66,285	64,624
Tenant reimbursements	15,086	12,386
Ads and ad commission	18,334	25,400
Contributed nonfinancial assets	9,470	29,008
Interest and investment income	12,494	12,619
Other income	49,187	16,733
Total Revenue and Support	995,448	970,906
Expenses		
Program Services		
Business resources	339,930	325,812
Advocacy	335,393	328,349
Total Program Services	675,323	654,161
Supporting Services		
General and administrative	123,028	127,020
Fundraising	139,814	137,210
Total Supporting Services	262,842	264,230
Total Expenses	938,165	918,391
Change in Net Assets	57,283	52,515
Net Assets, Beginning of Year	800,661	748,146
Net Assets, End of Year	\$ 857,944	\$ 800,661

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Item 6.

Statement of Functional Expenses

Year ended December 31, (with comparative totals for 2023)	Program Services			Supporting Services			Audited 2024 Total	Reviewed 2023 Total
	Business Resources	Advocacy	Total Program Services	General and Administrative	Fundraising	Total Supporting Services		
Payroll and related expenses								
Salaries	\$ 138,831	\$ 138,831	\$ 277,662	\$ 34,708	\$ 34,708	\$ 69,416	\$ 347,078	\$ 312,048
Payroll taxes	11,473	11,473	22,946	2,868	2,868	5,736	28,682	26,044
Employee benefits	16,974	16,974	33,948	4,244	4,244	8,488	42,436	37,278
Total payroll and related expenses	167,278	167,278	334,556	41,820	41,820	83,640	418,196	375,370
Other expenses								
Advertising	1,194	1,194	2,388	1,194	8,355	9,549	11,937	26,922
Bad debt	19,043	19,043	38,086	19,043	19,042	38,085	76,171	69,471
Bank fees	1,457	1,457	2,914	5,829	5,829	11,658	14,572	13,532
Board expenses	-	-	-	8,824	-	8,824	8,824	6,305
Computer maintenance	2,638	2,638	5,276	659	659	1,318	6,594	4,642
Contract labor	22,596	22,596	45,192	5,649	5,649	11,298	56,490	66,448
Depreciation	11,514	11,514	23,028	2,878	2,879	5,757	28,785	30,115
Dues and subscriptions	1,454	1,454	2,908	364	364	728	3,636	4,870
Employee development	6,606	6,606	13,212	1,651	1,651	3,302	16,514	12,264
Equipment lease	4,480	4,480	8,960	1,120	1,120	2,240	11,200	12,212
First Friday	33,831	-	33,831	-	-	-	33,831	37,020
Health committee	13,281	-	13,281	-	-	-	13,281	11,046
Insurance	4,200	4,200	8,400	1,050	1,050	2,100	10,500	10,306
Interest	8,536	8,536	17,072	2,134	2,133	4,267	21,339	16,940
Miscellaneous	6,321	7,460	13,781	5,595	-	5,595	19,376	21,062
Networking breakfast	2,580	-	2,580	-	-	-	2,580	1,617
Office supplies	2,222	2,222	4,444	556	556	1,112	5,556	5,692
Payroll service	2,581	2,581	5,162	645	645	1,290	6,452	5,880
Postage and delivery	572	286	858	286	763	1,049	1,907	2,888
Professional fees	-	-	-	10,100	-	10,100	10,100	16,005
Rent	665	665	1,330	166	166	332	1,662	1,482
Repairs and maintenance	7,191	7,191	14,382	1,798	1,798	3,596	17,978	25,194
Software	2,291	2,291	4,582	572	572	1,144	5,726	5,986
Special events	2,514	36,626	39,140	-	67,620	67,620	106,760	95,802
Taxes - income	-	-	-	6,613	-	6,613	6,613	10,542
Taxes - property	6,988	6,988	13,976	1,747	1,746	3,493	17,469	15,796
Telephone	2,787	2,787	5,574	697	697	1,394	6,968	7,014
Travel and entertainment	-	-	-	760	-	760	760	720
Utilities	5,110	5,110	10,220	1,278	1,278	2,556	12,776	12,452
Womens Committee	-	10,190	10,190	-	-	-	10,190	15,748
Total other expenses	172,652	168,115	340,767	81,208	124,572	205,780	546,547	565,973
Subtotal	339,930	335,393	675,323	123,028	166,392	289,420	964,743	941,343
Less: Direct benefit to donor	-	-	-	-	(26,578)	(26,578)	(26,578)	(22,952)
Total Expenses	\$ 339,930	\$ 335,393	\$ 675,323	\$ 123,028	\$ 139,814	\$ 262,842	\$ 938,165	\$ 918,391

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Statement of Cash Flows

Item 6.

Year Ended December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Cash Flows From Operating Activities		
Change in net assets	\$ 57,283	\$ 52,515
Adjustments to reconcile change in net assets to net change in operating activities:		
Unrealized (gain)/loss on certificate of deposit	289,530	(9,821)
Depreciation	28,785	30,115
Bad debt expense	76,171	69,471
Changes in assets and liabilities:		
Accounts receivable	(96,111)	(79,129)
Prepaid expenses	(386)	(193)
Accrued expenses	(783)	2,302
Deferred revenues	-	16,517
Other Liabilities	(4,150)	-
Total Adjustments	293,056	29,262
Net Change in Operating Activities	350,339	81,777
Cash Flows From Investing Activities		
Purchases of certificate of deposit	(300,000)	(300,000)
Purchases of property and equipment	-	-
Net Change in Investing Activities	(300,000)	(300,000)
Cash Flows From Financing Activities		
Payments on note payable	(141,345)	(145,876)
Net Change in Financing Activities	(141,345)	(145,876)
Net Change in Cash and Cash Equivalents	(91,006)	(364,099)
Cash and Cash Equivalents, beginning of year	223,989	588,088
Cash and Cash Equivalents, end of year	\$ 132,983	\$ 223,989
Supplemental Disclosures:		
Interest paid	\$ 21,339	\$ 16,940
Federal income taxes paid	\$ 6,613	\$ 10,542

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

NOTE 1 – NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

The Greater Tomball Area Chamber of Commerce (the “Chamber”) is a not-for-profit organization of citizens who are investing their time and money in a community development program working together to improve the economic, civic, and cultural fortitude of the region, community, or area. The Chamber’s mission is to provide resources and foster relationships that empower businesses to prosper in Tomball and its surrounding communities.

The Chamber is supported through membership dues, contributions, rental income and other miscellaneous revenue. The Chamber conducts the following programs:

- *Business resources* – The Business Resources Division is dedicated to providing and promoting value added, quality networking events to the Chamber’s diverse membership, by ensuring inclusion through new member mentorship programs and by presenting opportunities for personal and business growth. This division invites members to become involved in the Chamber’s programs that will allow relationships to be formed and sustained through a variety of networking events.
- *Advocacy* – The Advocacy Division is committed to being a strong voice for the Chamber’s members and the greater Tomball area community. This will be accomplished by addressing public policy issues with participation from the public, members and elected officials, and holding open discussions about issues that affect the business community including: economic development, education, workforce development, energy and healthcare.

Basis of Accounting

The financial statements of the Chamber have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

The Chamber reports information regarding its financial position and activities according to two classes of net assets that are based upon the existence or absence of restrictions on use that are placed by its donors: net assets without donor restrictions and net assets with donor restrictions.

- *Net assets without donor restrictions* are resources available to support operations and not subject to donor restrictions. The only limits on the use of net assets without donor restrictions are the broad limits resulting from the nature of the Chamber, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations. Assets restricted solely through the actions of the Board of Directors are reported as net assets without donor restrictions, board-designated.
- *Net assets with donor restrictions* are resources that are subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or use for a purpose specified by the donor. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-restricted endowment earnings are

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

released when those earnings are appropriated with spending policies and are used for the specified purpose.

Cash and Cash Equivalents

The Chamber considers all monies in banks and highly liquid investments with maturities of three months or less from the date of purchase to be cash and cash equivalents. The carrying values of any cash and cash equivalents are deemed to approximate their fair values because of the short maturities of those financial instruments.

Certificates of Deposit

The Chamber has a certificate of deposit, bearing interest at 3.00%, maturing January 2025 with an early withdrawal penalty of 360 days of interest. It was renewed again in January 2025 with the same interest rate, maturing January 2026. The total balance of the certificate of deposit at December 31, 2024 and 2023 is \$320,289 and \$309,821, respectively.

Accounts Receivable

Accounts receivable are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through a provision for bad debt expense and an adjustment to a valuation allowance based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. At December 31, 2024 and 2023, the allowance for bad debts was \$7,021 in both years.

Property and Equipment

The Chamber capitalizes all expenditures for property, plant and equipment in excess of \$500. Maintenance and repairs are charged to operations when incurred. Major improvements and renewals that extend the life of the asset are capitalized. Purchased property, plant and equipment are carried at cost and are depreciated using the straight-line method based on their estimated useful lives as follows:

Buildings and improvements	39 years
Computers and software	3-5 years
Office equipment	5-7 years
Furniture and fixtures	5-7 years

Contributed Nonfinancial Assets

Donated goods are recognized at fair value as contributions when an unconditional commitment is received from the donor. The related expense is recognized as the item is used or sold. All donated goods were utilized by the Organization's programs and supporting services. There were no donor-imposed restrictions associated with the donated services and assets. Contributions of services are recognized when services received (a) create or enhance nonfinancial assets or (b) require specialize skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

Deferred Revenue

Income from membership dues and subscription fees received in advance is deferred and recognized over the periods to which the dues and fees relate.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. The significant estimates included in the financial statements are the estimates of useful lives used for depreciating property and equipment items.

Membership Dues

Membership dues are recognized as revenue ratably over the term of the membership period. Any unearned amounts are included in deferred revenue at the end of each accounting period.

Functional Allocation of Expenses

Expenses are categorized in the Statement of Activities as program services, management and general and fundraising. The Chamber's expenses are allocated on a functional basis among these benefited categories:

- Program service expenses: include direct and indirect (allocated) expenses for the various programs offered by the Chamber to fulfill member investment expectations. Expenses that can be identified with a specific program and support services are allocated directly according to their natural expenditure classification. Other expenses, that are common to several functions, are allocated to program services based on time and effort.
- Management and general expenses: include those expenses, ranging from office management to financial services, that are not directly identifiable with any other specific function but provide for the overall support and direction of the Chamber. Those expenses include the basic necessities to be an accredited, well rounded, and effective organization.
- Fundraising expenses: represent costs incurred in connection with fundraising efforts to continue the Chamber's mission. The membership dues alone are not adequate enough to accomplish the Chamber's goals; therefore, fundraising events are held to fill the gap between membership dues and total expenses.

Income Taxes

The Chamber is operating as a not-for-profit corporation, under Section 501(c)(6) of the Internal Revenue Code, and is not subject to income taxes with the exception of unrelated business income. The Chamber conducted unrelated business activities during the current year. Therefore, the Chamber paid \$6,613 and \$10,542 for federal income taxes in the years ended December 31, 2024 and 2023, respectively.

The Chamber applies the provisions of FASB ASC Topic 740, Income Taxes, which prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Topic 740 also provides guidance on de-recognition, classification, interest and penalties, accounting in interim periods, disclosures and transition. As of December 31, 2024 and 2023, no uncertain tax positions were identified.

Leases

The Chamber accounts for leases in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 842, *Leases*. Leases are evaluated using the criteria in FASB ASC 842 to determine whether they will be classified as operating leases or finance leases. The Chamber determines if an arrangement is a lease, or contains a lease, at inception of a contract and when terms of an existing contract are

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

changed. The Chamber determines if an arrangement conveys the right to use an identified asset and whether the Chamber obtains substantially all of the economic benefits from and has the ability to direct the use of the asset. The Chamber recognizes a lease liability and right-of-use (ROU) asset at the commencement date of the lease. The Chamber has elected to not recognize ROU assets and lease liabilities for short-term leases that have an initial lease term of 12 months or less and for leases that management deems immaterial.

Lease liabilities - Lease liabilities are measured based on the present value of future lease payments using the risk-free rate.

Right of use (ROU) assets - ROU assets are recognized at the present value of the lease payments at inception of the lease adjusted, as appropriate, for certain other payments and allowances related to obtaining the lease and placing the asset in service. Lease expense is recognized on a straight-line basis as rent expense in the statement of functional expenses.

Advertising Cost

Advertising costs are expensed when incurred. Advertising costs for the years ended December 31, 2024 and 2023 amounted to \$11,937 and \$26,922, respectively.

NOTE 2 – LIQUIDITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of December 31, 2024, comprise the following:

Financial assets:	
Cash and cash equivalents	\$132,986
Certificate of deposit	320,289
Accounts receivable, net	64,847
Financial assets available to meet cash needs for general expenditures within one year	\$518,122

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Chamber considers all expenditures related to its ongoing program activities, as well as the conduct of services undertaken to support those activities, to be general expenditures. None of the financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the statement of financial position date. The Chamber sets a goal of having financial assets on hand to meet a minimum of 90 days of normal operating expenses, which are, on average, around \$70,000. As part of its liquidity management, the Chamber has a policy to structure its financial assets to be available as general expenditures, liabilities, and other obligations become due.

NOTE 3 – CONCENTRATION OF CREDIT RISKS

The Chamber maintains its cash and certificate of deposit balances in a local bank. These balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. Management periodically assesses the financial condition of the financial institutions and believes that any possible credit risk is minimal. As of December 31, 2024 and 2023, the Chamber had approximately \$203,000 and \$284,000, respectively, of cash certificate of deposit balances that were not insured by the FDIC. The Chamber has not experienced any losses in such accounts and believes the risk of future loss is mitigated by monitoring the balances and the financial institutions where the cash is deposited.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

NOTE 4 – PROPERTY AND EQUIPMENT

As of December 31, 2024 and 2023, property, plant and equipment consisted of the following:

	Audited 2024	Reviewed 2023
Building and improvements	\$1,112,383	\$1,112,383
Computers and software	17,517	17,517
Office equipment	14,321	14,321
Furniture and fixtures	17,990	17,990
Land	145,000	145,000
Total property and equipment, gross	1,307,211	1,307,211
Less: Accumulated depreciation	(510,991)	(482,206)
Total property and equipment, net	\$796,220	\$825,005

Depreciation expense for the years ended December 31, 2024 and 2023 was \$28,785 and \$30,115, respectively.

NOTE 5 – RENTAL INCOME

The Chamber generates rental income from leasing its office space to lessees. As the lessor, the Chamber is required to first determine whether the lease is an operating lease or a finance lease. A finance lease is one in which the risks and rewards inherent in the asset are transferred to the lessee. An operating lease is one in which the risks and rewards inherent in the asset are not transferred to the lessee. Only finance leases are required to be capitalized on the statement of financial position.

The Chamber leases office space to three other organizations as follows and as the risks and reward inherent in the asset are not transferred to the lessee, it has been determined that these leases are operating leases, so these leases have not been capitalized on the statement of financial position:

	Current monthly rent	Lease initiation	Lease expiration	Lease renewal	Renewal expiration
TEDC	\$1,506	9/1/2008	10/31/2013	11/1/2013	10/31/2018
				11/1/2023	10/31/2024
	\$4,560	11/1/2018	10/31/2023	11/1/2024	10/31/2029
TRHF	\$3,869	11/1/2017	10/31/2022	11/1/2022	10/31/2024
	\$1,506			11/1/2024	10/31/2025
Envirocon	\$150	4/1/2016	3/31/2020	4/1/2020	3/31/2024 ¹

For the years ended December 31, 2024 and 2023, rental income was \$66,285 and \$64,624 respectively.

Future minimum rentals expected to be collected are as follows:

For the years ending December 31,

2025	\$ 69,780
2026	\$ 54,720
2027	\$ 54,720
2028	\$ 54,720
2029	\$ 45,600
Thereafter	-
Total	\$ 279,540

¹ Note that Envirocon continues to lease space at \$150 monthly on a month-to-month basis.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

NOTE 6 – LEASE AGREEMENTS

The Chamber has entered into noncancelable operating leases that expire in 2024 and 2026. For the years ended December 31, 2024 and 2023, the total rental expense under these leases was \$12,862 and \$13,694, respectively. The Chamber's lease arrangements are not recognized in the statement of financial position as they are immaterial. Future minimum lease payments are as follows:

For the years ending December 31,	
2025	\$1,969
2026	656
Thereafter	-
Total	\$2,625

NOTE 7 – NOTE PAYABLE

The Chamber had a note payable due in monthly installments to a financial institution for an office building in the amount of \$6,729 for 83 months beginning January 10, 2010 through November 10, 2016. This note was secured by the Quinn Road office building, with interest at 5% through October 9, 2021. On December 10, 2016, a balloon payment of any unpaid principal and interest became due and payable, at which time the loan was modified to require monthly installments of \$5,595 at the same interest rate and terms and to become due and payable on December 10, 2023. Effective October 10, 2021, the interest rate was modified to 4%, requiring the same monthly installments and due date. In December 2023, the interest rate was modified to 7% and the note is due and payable on demand. If demand is not earlier made, the note shall be due and payable in monthly payments of principal and interest of \$5,224, commencing on January 10, 2024 through December 10, 2026, when the entire amount remaining unpaid shall be due and payable.

As of December 31, 2024 and 2023, the balance was \$240,362 and \$381,706, respectively. Future scheduled maturities of the note payable are as follows:

For the years ending December 31,	
2025	\$240,362
Thereafter	-
Total	\$240,362

NOTE 8 – CONCENTRATIONS

For both years ended December 31, 2024 and 2023, approximately fifty percent (50%) of the Chamber's total revenue and support came from membership dues.

The Chamber conducts its operations solely in the greater Tomball area, and, therefore, is subject to risks from changes in local economic conditions. A downturn in the local economy could cause a decrease in membership dues and revenue.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 6.

NOTE 9 – CONTRIBUTED NONFINANCIAL ASSETS

For the years ended December 31, 2024 and 2023, the Chamber's contributed nonfinancial assets consist of the following:

	Audited 2024	Reviewed 2023
Advertising	\$ 2,520	\$22,720
Repairs and maintenance	6,600	6,600
Supplies	4,500	4,500
Venues	6,300	6,300
Miscellaneous	3,160	3,348
Total contributed nonfinancial assets	\$23,080	\$43,468

Contributed advertising and repairs and maintenance are used in the Chamber's administrative activities. Contributed supplies are used in the Chamber's fundraising activities. Contributed venue costs are used in the Chamber's program activities and fundraising activities. Other miscellaneous donated assets are used across all Chamber activities. All contributed nonfinancial assets are valued at fair market value at the date of donation.

NOTE 10 – SUBSEQUENT EVENTS

Management has evaluated subsequent events through March 12, 2025, the date the financial statements were available to be issued. No events were identified that are required to be disclosed or would have a material impact on reported net assets or changes in net assets.

**GREATER TOMBALL AREA CHAMBER OF COMMERCE
2025 BOARD OF DIRECTORS**

Item 6.

CHAIR OF THE BOARD

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Item 6.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Item 6.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Greater Tomball Area Chamber of Commerce	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
5 Address (number, street, and apt. or suite no.). See instructions. PO Box 516		Requester's name and address (optional)
6 City, state, and ZIP code Tomball, TX 77377		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.


Social security number								
			-				-	
or								
Employer identification number								
7	4	-	1	4	9	5	1	2

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date 5/6/25
-----------	--	--------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

FOR TAX YEAR 2023

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

PE CPA PLLC

32938 TAMINA ROAD STE 202

MAGNOLIA, TX 77354

(281)826-4272

**Acknowledgement and General Information for
Entities That File Returns Electronically**

Item 6.

2023

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

-*5125

Entity address

PO BOX 516

TOMBALL, TX 77377

Thank you for participating in IRS e-file.

1. ☒ 2023 8868-01 income tax return for Federal was filed electronically.
The electronic filing services were provided by PE CPA PLLC.
2. ☒ 8868-01 income tax return was accepted on 05-10-2024 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature.
The submission ID assigned to this return is XXXXXXXXXXXX.

**PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE
IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

**Acknowledgement and General Information for
Entities That File Returns Electronically**

Item 6.

2023

Name(s) as shown on return

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Tax ID Number

-*5125

Entity address

PO BOX 516

TOMBALL, TX 77377

Thank you for participating in IRS e-file.

1. ☒ 2023 8868-07 income tax return for Federal was filed electronically.
The electronic filing services were provided by PE CPA PLLC.
2. ☒ 8868-07 income tax return was accepted on 05-10-2024 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature.
The submission ID assigned to this return is XXXXXXXXXX.

**PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE
IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

Item 6.

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning , 2023, and ending , 20		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 516 City or town, state or province, country, and ZIP or foreign postal code TOMBALL, TX 77377 F Name and address of principal officer:	D Employer identification number 74-1495125 E Telephone number (281) 351-7222 G Gross receipts \$ 932,466 H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: N/A		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1965 M State of legal domicile: TX

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE GREATER TOMBALL AREA CHAMBER OF COMMERCE PROVIDES RESOURCES AND FOSTERS RELATIONSHIPS THAT EMPOWER BUSINESSES TO PROSPER IN TOMBALL AND ITS SURROUNDING COMMUNITIES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	19
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	4
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 108,943	Current Year 100,008
	9 Program service revenue (Part VIII, line 2g)	608,640	717,843
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,424	12,619
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	93,933	101,996
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	812,940	932,466
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	280,211	371,963
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	402,021	463,482
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	682,232	835,445
	19 Revenue less expenses. Subtract line 18 from line 12	130,708	97,021
	20 Total assets (Part X, line 16)	Beginning of Current Year 1,453,306	End of Year 1,369,105
	21 Total liabilities (Part X, line 26)	564,025	421,112
	22 Net assets or fund balances. Subtract line 21 from line 20	889,281	947,993

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	BRUCE HILLEGEIST Signature of officer	Date			
	BRUCE HILLEGEIST, PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name MP ENCALADE CPA	Preparer's signature MP ENCALADE CPA	Date 07-30-2024	Check <input type="checkbox"/> if self-employed	PTIN XXXXXXXXXX
	Firm's name PE CPA PLLC	Firm's EIN			
	Firm's address 32938 TAMINA ROAD STE 202 MAGNOLIA TX 77354	Phone no. 281-826-4272			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE GREATER TOMBALL AREA CHAMBER OF COMMERCE PROVIDES RESOURCES AND FOSTERS RELATIONSHIPS THAT EMPOWER BUSINESSES TO PROSPER IN TOMBALL AND ITS SURROUNDING COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 835,445 including grants of \$) (Revenue \$ 932,466)

THE CHAMBER PROMOTED LOCAL BUSINESS GROWTH AND THE QUALITY OF COMMUNICATION AND LIFE IN THE COMMUNITY THROUGH BUSINESS EDUCATION, ENHANCING COMMUNITY IMAGE, AND DEVELOPING THE LINES OF COMMUNICAITON BETWEEN THE LOCAL BUSINESSES, AND GOVERNMENT. MEMBERSHIP WAS AT 725 BY THE END OF 2016.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 835,445

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	X
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 X	
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	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in 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	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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 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.		
a 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
c 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
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e X	
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	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X
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	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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? <i>If "Yes," complete Schedule J.</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
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 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
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?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
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? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	19													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.														
b Enter the number of voting members included in line 1a, above, who are independent		19												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2										X	
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?				3										X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					4									X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						5								X
6 Did the organization have members or stockholders?							6							X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								7a						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									7b					X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										8a			X	
b 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 organization's mailing address? If "Yes," provide the names and addresses on Schedule O												9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b													
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a											X	
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									X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						12b								X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done							12c							X	
13 Did the organization have a written whistleblower policy?								13						X	
14 Did the organization have a written document retention and destruction policy?									14						X
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?															
a 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		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed _____
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ 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, and financial 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.

BRUCE HILLEGEIST (281)351-7222, PO BOX 516, TOMBALL, TX 77377

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee, and Independent ContractorsCheck 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRUCE HILLEGEIST PRESIDENT	50.00			X				125,244	0	0
(2) KIM LAURENCE SALSER DIRECTOR	2.00	X						0	0	0
(3) SCOTT MARQUARDT DIRECTOR	2.00	X						0	0	0
(4) URIAH ORTIZ DIRECTOR	2.00	X						0	0	0
(5) DR MARTHA SALAZAR-ZAMORA DIRECTOR	2.00	X						0	0	0
(6) KEITH BARBER DIRECTOR	2.00	X						0	0	0
(7) AL HERRERA DIRECTOR	2.00	X						0	0	0
(8) DAWNA DYSON DIRECTOR	2.00	X						0	0	0
(9) KYLE BERTRAND DIRECTOR	2.00	X						0	0	0
(10) MIKELYN CORKRAN DIRECTOR	2.00	X						0	0	0
(11) RAYMOND FRANCOIS DIRECTOR	2.00	X						0	0	0
(12) JANNA HOGLUND DIRECTOR	2.00	X						0	0	0
(13) KELLY VIOLETTE EX OFFICIO	2.00	X						0	0	0
(14) DYANNA MCCOY EX OFFICIO	2.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (d)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)ALLISON MUNDY DIRECTOR	2.00	X						0	0	0
(16)ROB MARMERSTEIN DIRECTOR	2.00	X						0	0	0
(17)CURTIS MORRIS DIRECTOR	2.00	X						0	0	0
(18)LANDON REED DIRECTOR	2.00	X						0	0	0
(19)RENEE LESLIE DIRECTOR	2.00	X						0	0	0
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								125,244	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

1

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual.*
- 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.*
- 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.*

	Yes	No
3		X
4		X
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) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII**Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	35,000				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	65,008				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 29,008				
	h	Total. Add lines 1a-1f		100,008				
Program Service Revenue	Business Code							
	2a	MEMBERSHIP DUES	900099	400,278	400,278			
	b	BANQUET	722320	40,016	40,016			
	c	GOLF CLASSIC	713990	59,601	59,601			
	d	FIRST FRIDAY	722210	41,857	41,857			
	e	TOMBALL PAGEANT	711300	33,470	33,470			
	f	All other program service revenue	900099	142,621	142,621			
	g	Total. Add lines 2a-2f		717,843				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		12,619	12,619			
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		22,433	22,433			
	6a	Gross rents	(i) Real	(ii) Personal				
				77,010				
	6b	Less: rental expenses	6b					
	6c	Rental income or (loss)	6c	77,010				
	d	Net rental income or (loss)		77,010	77,010			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	7b	Less: cost or other basis and sales expenses	7b					
	7c	Gain or (loss)	7c					
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
8b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events							
9a	Gross income from gaming activities. See Part IV, line 19							
9b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances							
10b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code							
	11a	OTHER REVENUE	511140	2,553	2,553			
	b							
	c							
	d	All other revenue						
e	Total. Add lines 11a-11d		2,553					
12	Total revenue. See instructions			932,466	832,458	0		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . .				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	125,244	125,244		
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	183,692	183,692		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .				
9 Other employee benefits	37,277	37,277		
10 Payroll taxes	25,750	25,750		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	21,886	21,886		
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . .	21,067	21,067		
12 Advertising and promotion	26,923	26,923		
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	38,464	38,464		
17 Travel	720	720		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,433	6,433		
20 Interest	10,164	10,164		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	20,163	20,163		
23 Insurance	2,342	2,342		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT RENTAL AND MAINT	22,914	22,914		
b TELEPHONE	7,015	7,015		
c BANK AND MERCHANT FEES	13,534	13,534		
d SUPPLIES	5,693	5,693		
e All other expenses	266,164	266,164		
25 Total functional expenses. Add lines 1 through 24e. .	835,445	835,445	0	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	48,885	1	51,993
	2 Savings and temporary cash investments	539,203	2	481,817
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,098	9	10,291
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,307,212		
	b Less: accumulated depreciation	10b 482,208	855,120	10c 825,004
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,453,306	16	1,369,105	
Liabilities	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	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	527,582	23	381,707
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	36,443	25	39,405
	26 Total liabilities. Add lines 17 through 25	564,025	26	421,112
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds	889,281	31	947,993
	32 Total net assets or fund balances	889,281	32	947,993
	33 Total liabilities and net assets/fund balances	1,453,306	33	1,369,105

Part XI Reconciliation of Net AssetsCheck 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	932,466
2	Total expenses (must equal Part IX, column (A), line 25)	2	835,445
3	Revenue less expenses. Subtract line 2 from line 1	3	97,021
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	889,281
5	Net unrealized gains (losses) on investments	5	
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	(38,309)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	947,993

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a <input checked="" type="checkbox"/>	
b Were the organization's financial statements audited by an independent accountant? 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. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	<input checked="" type="checkbox"/>
c 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c <input checked="" type="checkbox"/>	
3a 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?	3a	<input checked="" type="checkbox"/>
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	

EEA

Form 990 (2023)

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

Item 6.

2023

For calendar year 2023 or other tax year beginning _____, 2023, and ending _____, 20____

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

A <input type="checkbox"/> Check box if address changed.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) GREATER TOMBALL AREA CHAMBER OF COMMERCE	D Employer identification number 74-1495125
		Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 516	E Group exemption number (see instructions)
B Exempt under section <input checked="" type="checkbox"/> 501(c) (6) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A		City or town, state or province, country, and ZIP or foreign postal code TOMBALL, TX 77377	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year 1,369,105	
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417 (d)(1)(A) Applicable entity			
H Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800			
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>			
J Enter the number of attached Schedules A (Form 990-T) 1			
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation			
L The books are in care of BRUCE HILLEGEIST PO BOX 516 TOMBALL TX 77377 Telephone number (281) 351-7222			

Part I Total Unrelated Business Taxable Income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	30,297
2	Reserved	2	
3	Add lines 1 and 2	3	30,297
4	Charitable contributions (see instructions for limitation rules)	4	
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3.	5	30,297
6	Deduction for net operating loss. See instructions	6	
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	30,297
8	Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000
9	Trusts. Section 199A deduction. See instructions	9	
10	Total deductions. Add lines 8 and 9.	10	1,000
11	Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero.	11	29,297

Part II Tax Computation

1	Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	6,152
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	
3	Proxy tax. See instructions	3	
4	Other tax amounts. See instructions	4	
5	Alternative minimum tax	5	
6	Tax on noncompliant facility income. See instructions	6	
7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	6,152

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions)	1b		
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e	Total credits. Add lines 1a through 1d.	1e		
2	Subtract line 1e from Part II, line 7	2	6,152	
3a	Amount due from Form 4255	3a		
b	Amount due from Form 8611	3b		
c	Amount due from Form 8697	3c		
d	Amount due from Form 8866	3d		
e	Other amounts due (see instructions)	3e		
f	Total amounts due. Add lines 3a through 3e	3f		
4	Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4	6,152	
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5		

Part III Tax and Payments (continued)

6a	Payments: Preceding year's overpayment credited to the current year	6a		
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c	7,600	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Elective payment election amount from Form 3800	6g		
h	Payment from Form 2439	6h		
i	Credit from Form 4136	6i		
j	Other (see instructions)	6j		
7	Total payments. Add lines 6a through 6J	7		7,600
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		1,448
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax 1,448 Refunded	11		

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here _____	Yes	No
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. _____		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		
4	Enter available pre-2018 NOL carryovers here \$ _____. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code Available post-2017 NOL carryover		
	\$ _____		
	\$ _____		
	\$ _____		
	\$ _____		
6a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name MP ENCALADE CPA	Preparer's signature MP ENCALADE CPA	Date 07-30-2024	Check <input type="checkbox"/> if self-employed	PTIN XXXXXXXXXX
Firm's name PE CPA PLLC	Firm's EIN 82-0666561		Phone no. 281-826-4272	
Firm's address 32938 TAMINA ROAD STE 202 MAGNOLIA TX 77354				

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047 **Item 6.**

2023

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(6) (enter number) organization

☐ 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

- ☒ 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).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

EEA

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A N/A _____	\$ 38,394	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A N/A _____	\$ 63,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A N/A _____	\$ 6,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A N/A _____	\$ 49,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A N/A _____	\$ 29,937	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A N/A _____	\$ 12,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A N/A _____	\$ 28,945	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	N/A N/A _____	\$ 13,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	N/A N/A _____	\$ 7,050	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	N/A N/A _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	N/A N/A _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	N/A N/A _____	\$ 7,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	N/A N/A 	\$ 8,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	N/A N/A 	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Item 6.

2025

Open to Public
Inspection

Name of the organization

Employer identification number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input checked="" type="checkbox"/> Preservation of a certified historic structure	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c, acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

Schedule D (Form 990)

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (cont)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange program
 e ☐ Other _____

- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

- b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
 b Permanent endowment _____ %
 c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations?
 (ii) Related organizations?

	Yes	No
3a(i)		
3a(ii)		
3b		

- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	58,000	87,000		145,000
b Buildings	354,018	531,026	327,804	557,240
c Leasehold improvements	4,245	211,594	94,119	121,720
d Equipment		31,839	30,795	1,044
e Other STMD1E	11,500	17,990	29,490	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B).				825,004

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(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) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, line 12, col.(B)).		

Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. 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. (Column (b) must equal Form 990, Part X, line 13, col. (B)).		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B)).	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LAST MONTH RENT	4,150
(3) SECURITY DEPOSIT	4,150
(4) SCHOLARSHIPS	31,105
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 25 col. (B)). . .	39,405

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements 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.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide 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 X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Item 6.

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|--|---|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

OMB No. 1545-0047

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2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (REPAIRS AND MAINTENANCE)	X		6,600	
26 Other (DUES AND SUBSCRIPTIONS)	X		225	
27 Other (MEMBERSHIP MISCELLANEOUS)	X		463	
28 Other (ADVERTISING)	X		21,720	

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

**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.

OMB No. 1545-0047

Item 6.

2023

**Open to Public
Inspection**

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

01. Officer, directors, etc. family relationship (Part VI, line 2)

INSURANCE IS PROVIDED TO BOARD MEMBER(S) BY OTHER BOARD MEMBERS

02. Form 990 governing body review (Part VI, line 11)

THE ORGANIZATION'S PROCESS IS TO HAVE FORM 990 REVIEWED BY THE ENTIRE BOARD OF DIRECTORS.

03. Conflict of interest policy compliance (Part VI, line 12c)

OFFICERS AND DIRECTORS ARE REQUIRED TO ANNUALLY SIGN A FORM THAT DISCLOSES ANY POTENTIAL
CONFLICTS OF INTEREST.

04. CEO, executive director, top management comp (Part VI, line 15a)

COMPENSATION PROCESS FOR TOP OFFICIAL, WHICH IS THE CHAMBER PRESIDENT, IS APPROVED BY THE
BOARD OF DIRECTORS AS A PART OF THE BUDGET PROCESS

05. Governing documents, etc, available to public (Part VI, line 19)

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

06. Explanation of other changes in net assets or fund balances (Part XI, line 9)

ADJ TO BRING RETURN INLINE WITH CASH BOOKS

07. List of other expenses (Part IX, line 24e)

COLLECTION EXPENSES, HEALTH COMMITTEE, FIRST FRIDAY, NETWORKING BREAKFAST, WOMENS
COMMITTEE, DUES AND SUBSCRIPTIONS, EMPLOYEE DEVELOPMENT, POSTAGE, INCOME TAX, TOMBALL
LEADERSHIP DAY, BANQUET, GOLF CLASSIC, TOMBALL NIGHT, HOLIDAY PARADE, MISS TOMBALL

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Item 6.

PAGEANT, SCHOLARSHIP EXPENSES.

Client Copy

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.OMB No. 1545-0047
Item 6.

2023

Attachment
Sequence No. 179

Name(s) shown on return GREATER TOMBALL AREA CHAMBER OF	Business or activity to which this form relates FORM 990 - 1	Identifying number 74-1495125
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Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	578

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	18,940
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	19,518
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.**2023**Attachment
Sequence No. **179**

Name(s) shown on return GREATER TOMBALL AREA CHAMBER OF	Business or activity to which this form relates FORM 990T - 1	Identifying number 74-1495125
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Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	9,953

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2023	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	9,953
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

**IRS E-file Signature Authorization
for a Tax Exempt Entity**

OMB No. 1545-0047

Item 6.

Department of the Treasury
Internal Revenue Service

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20

2023**Do not send to the IRS. Keep for your records.**
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

EIN or SSN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC**74-1495125**

Name and title of officer or person subject to tax

BRUCE HILLEGEIST, PRESIDENT**Part I Type of Return and Return Information**

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

1a Form 990 check here <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5).	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here <input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b 6,152
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☐ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **PE CPA PLLC** to enter my PIN **95125** as my signature

ERO firm name

Enter five numbers, but
do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____

Date **06-24-2024****Part III Certification and Authentication**

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

799164 68510**Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____

Date **07-30-2024**

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

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **8879-TE**

**IRS E-file Signature Authorization
for a Tax Exempt Entity**Department of the Treasury
Internal Revenue Service

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20

2023**Do not send to the IRS. Keep for your records.**
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

EIN or SSN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC**74-1495125**

Name and title of officer or person subject to tax

BRUCE HILLEGEIST, PRESIDENT**Part I Type of Return and Return Information**

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

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>932,466</u>
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5).	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☐ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize PE CPA PLLC to enter my PIN 95125 as my signature

ERO firm name

Enter five numbers, but
do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date 06-24-2024**Part III Certification and Authentication**

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

799164 68510

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date 07-30-2024

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

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **8879-TE**

Federal Supporting Statements

2023 PG01

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

990-T SCHEDULE A PART V - LINE 3B
OTHER DEDUCTIONS

Statement #13

Form 990-T Schedule A: OFFICE RENTAL

Property: OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

DESCRIPTION	AMOUNT
INTEREST	6,776
INSURANCE	3,186
TAXES	6,318
REPAIRS	6,121
CLEANING	3,842
ELECTRICITY	4,981
TOTAL	31,224

FOR YOUR RECORDS ONLY

PG01

FORM 990 - SCHEDULE D - PART VI - LINE 1E
INVESTMENTS - OTHER

STATEMENT #D1E

DESCRIPTION OF INVESTMENT	COST/BASIS (INVESTMENT)	COST/BASIS (OTHER)	DEPR	BOOK VALUE
BUILDOUT	11,500	0	11,294	206
FURNITURE	0	17,990	18,196	(206)
TOTAL	11,500	17,990	29,490	0

Federal Supporting Statements

2023

PG01

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

990-T Schedule A Part V - Dual-use Debt-financed Property Statement

Statement #14

Form 990-T Schedule A: OFFICE RENTAL

Property Discription	Avg. of Acquisition indebtedness	Percent allocable to debt-financed property	Avg. acquisition debt on debt-financed property	Adjusted basis	Percent Allocable to debt-financed debt-financed property	Adjusted basis allocable to debt-financed property
OFFICE RENTAL	135,916	100.00000%	135,916	154,611	100.000000%	154,611

990

Overflow Statement

(This page is not filed with the return. It is for your records only.)

2023

Page 1

Item 6.

Name(s) as shown on return

FEIN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

OTHER

Description	Amount
COLLECTION EXPENSES	\$ 8,094
CONTRACTOR	66,448
DUES	4,869
EMPLOYEE DEVELOPMENT	12,264
FIRST FRIDAY	37,020
GOLF CLASSIC	19,868
HEALTH COMMITTEE	11,046
HOLIDAY PARADE	25,726
INCOME TAX	10,542
NETWORKING BREAKFAST	1,617
POSTAGE	2,889
TOMBALL NIGHT	10,555
TOMBALL PAGEANT	14,541
WOMENS COMMITTEE	15,748
BANQUET	12,562
TOMBALL PAGEANT SCHOLARSHIPS	10,000
TOMBALL LEADERSHIP DAY	2,375
Total:	\$ 266,164

FORM 990-T - SCH E - LN 4 - AVERAGE ACQUISITION DEBT1

Description	Amount
AVERAGE ACQUISITION DEBT	\$ 135,916
Total:	\$ 135,916

FORM 990-T - SCH E - LN 5 - AVERAGE ADJUSTED BASIS

Description	Amount
AVERAGE BASIS	\$ 154,611
Total:	\$ 154,611

**Estimated Tax Worksheet on Unrelated Business
Taxable Income for Tax-Exempt Organizations**
(and on Investment Income for Private Foundations)

Item 6.

2024

(This page is not filed with the return. It is for your records only.)

1 Unrelated business taxable income expected in the tax year	1	
2 Tax on the amount on line 1. See instructions for tax computation	2	6,152
3 Alternative minimum tax for trusts. See instructions	3	
4 Total. Add lines 2 and 3	4	6,152
5 Estimated tax credits. See instructions	5	
6 Subtract line 5 from line 4	6	6,152
7 Other taxes. See instructions	7	
8 Total. Add lines 6 and 7	8	6,152
9 Credit for federal tax paid on fuels. See instructions	9	
10a Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	6,152
b Enter the tax shown on the 2023 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	6,152
c 2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	6,152

		(a)	(b)	(c)	(d)
11 Installment due dates. See instructions	11	04-15-2024	06-17-2024	09-16-2024	12-16-2024
12 Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	1,538	1,538	1,538	1,538
13 2023 Overpayment. See instructions	13	362	362	362	362
14 Payment due (Subtract line 13 from line 12)	14	1,176	1,176	1,176	1,176

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 6.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CITY OF TOMBALL 401 MARKET STREET TOMBALL TX 77375	38,394	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	HEALTH FOUNDATION 29201 QUINN RD STE A TOMBALL TX 77375	63,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ENVIROCON TERMITE & PEST, INC 23306 ROBERTS CEMETERY HOCKLEY TX 77447	6,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	HCA HOUSTON HEALTHCARE TOMBALL 605 HOLDERRIETH TOMBALL TX 77375	49,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	TOMBALL ECONOMIC DEVELOPMENT CORP PO BOX 820 TOMBALL TX 77377	29,937	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	SOUTHCOMM PUBLISHING CO. 7766 EWING BLVD., SUITE 200 FLORENCE KY 41042	12,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 6.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HOUSTON METHODIST WILLOWBROOK HOSPI 18220 SH 249 HOUSTON TX 77070	28,945	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	ALOHA NAILS & SPA 701 E MAIN STE 125B TOMBALL TX 77375	13,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	SHELL FEDERAL CREDIT UNION 6232 FM 2920 SPRING TX 77379	7,050	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	MEMORIAL HERMAN THE WOODLANDS 9250 PINECROFT DR SPRING TX 77380	5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	COMMUNITY MATTERS INC PO BOX 5900 FRISCO TX 75035	10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	KLEIN FUNERAL HOMES & MEMORIAL PARK 16131 CHAMPION FOREST SPRING TX 77379	7,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 6.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	TWFG INSURANCE SERVICES 722 W MAIN TOMBALL TX 77375	8,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	RSC RIVERSIDE CONSTRUCTION 210 SPRING CREEK TRAIL SPRING TX 77373	5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Depreciation Detail Listing

Program Services

(This page is not filed with the return. It is for your records only.)

2023

Program Services

PAGE 1

Name(s) as shown on return

Social security number/EIN	
----------------------------	--

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

191

937,450

19,518

ST ADJ:

990 T
(This page is not filed with the return. It is for your records only.)

2023

PAGE 1

OF COMMERCE, INC

74-1495125

192

CY 179 and CY Bonus		ST ADJ:
TOTAL CY Depr including 179/bonus	9,953	

Next Year's Depreciation Worksheet

(This page is not filed with the return. It is for your records only.)

Item 6.

2023

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	COMPUTER & SERVER EQUIPM	10-14-2013	15,503		5	
PRG	1	BUILDING - QUINN ROAD	09-30-2008	531,026	SL MM	39	13,616
PRG	1	IMPROVEMENTS	10-31-2008	203,369	SL MM	39	5,215
PRG	1	A/C UNIT	03-27-2012	4,300	SL MM	39	110
PRG	1	LAND	10-31-2008			0	
T	1	BUILDING (RENTAL PORTION	09-30-2008	354,018	SL MM	39	9,077
T	1	BUILDOUT - TOMBALL REG H	12-01-2012	11,500	SL MQ	15	767
T	1	A/C UNIT (RENTAL)	06-27-2014	4,245	SL MM	39	109
PRG	1	2017 LAPTOP	12-05-2017	851		5	
PRG	1	PHONE SYSTEM	09-04-2001	6,976		7	
PRG	1	FURNITURE	11-01-2008	17,990		7	
PRG	1	QUINN BLDG IMPROVEMENTS	12-01-2012	3,925	SL MM	39	101
PRG	1	2019 PHONE SYSTEM	01-31-2019	6,126		3	
PRG	1	2020 COMPUTER	03-15-2020	1,165	SL HY	5	233
PRG	1	2022 COMPUTER	09-22-2022	1,219	SL HY	5	244
		TOTAL					29,472

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545

Item 6.

2023

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

A Name of the organization GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC	B Employer identification number 74-1495125
C Unrelated business activity code (see instructions) 531190	D Sequence: 1 of 1

E Describe the unrelated trade or business **OFFICE RENTAL**

Part I	Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
c	Balance	1c		
2	Cost of goods sold (Part III, line 8)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a		
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from a partnership or an S corporation (attach statement)	5		
6	Rent income (Part IV)	6		
7	Unrelated debt-financed income (Part V)	7	67,698	27,448
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10	Exploited exempt activity income (Part VIII)	10		
11	Advertising income (Part IX)	11		
12	Other income (see instructions; attach statement)	12		
13	Total. Combine lines 3 through 12	13	67,698	27,448
				40,250

Part II	Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income.			
1	Compensation of officers, directors, and trustees (Part X)	1		
2	Salaries and wages	2		
3	Repairs and maintenance	3		
4	Bad debts	4		
5	Interest (attach statement). See instructions	5		
6	Taxes and licenses	6		
7	Depreciation (attach Form 4562). See instructions	7	9,953	
8	Less depreciation claimed in Part III and elsewhere on return	8a		
9	Depletion	9		
10	Contributions to deferred compensation plans	10		
11	Employee benefit programs	11		
12	Excess exempt expenses (Part VIII)	12		
13	Excess readership costs (Part IX)	13		
14	Other deductions (attach statement)	14		
15	Total deductions. Add lines 1 through 14	15		9,953
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		30,297
17	Deduction for net operating loss. See instructions	17		
18	Unrelated business taxable income. Subtract line 17 from line 16.	18		30,297

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

EEA

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐ OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

B ☐

C ☐

D ☐

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)				
4 Deductions directly connected with the income in lines 2a and 2b (attach statement)				
5 Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)				

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐ OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

B ☐

C ☐

D ☐

	A	B	C	D
2 Gross income from or allocable to debt-financed property	77,010			
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement) Statement #13	31,224			
c Total deductions (add lines 3a and 3b, columns A through D)	31,224			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Statement #14	135,916			
5 Average adjusted basis of or allocable to debt-financed property (attach statement) Statement #14	154,611			
6 Divide line 4 by line 5	87.90800 %	%	%	%
7 Gross income reportable. Multiply line 2 by line 6	67,698			
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	67,698			
9 Allocable deductions. Multiply line 3c by line 6	27,448			
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	27,448			
11 Total dividends - received deductions included in line 10				

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

			Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).
Totals				

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

	Add amounts in column 2. Enter here and on Part I, line 9, column (A).			Add amounts in column 5. Enter here and on Part I, line 9, column (B).
--	--	--	--	--

Totals**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity:	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5	Gross income from activity that is not unrelated business income	5
6	Expenses attributable to income entered on line 5	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Part IX	Advertising Income
----------------	---------------------------

- 1** Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
- A** ☐ _____
- B** ☐ _____
- C** ☐ _____
- D** ☐ _____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)				
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter -0- on line 8				
5 Readership costs				
6 Circulation income				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter -0-				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a Add line 8, columns A through D. Enter the greater of the line 8a columns total or -0- here and on Part II, line 13				

Part X	Compensation of Officers, Directors, and Trustees (see instructions)
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1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			

Part XI	Supplemental Information (see instructions)
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City Council Meeting Agenda Item Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Visitor Center.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Visitor Center.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

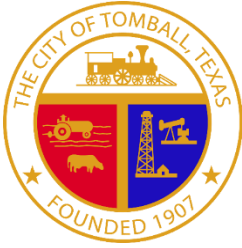
FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: No: If yes, specify Account Number: #

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

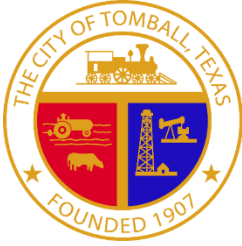
Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026
Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: Greater Tomball Area Chamber of Commerce

Street Address: 29201 Quinn Road, Ste. B

City: Tomball State: TX Zip Code: 77375

Contact Name: Brandy Beyer

Role with Organization/Business: Vice President

Phone Number: 281.351.7222 Email: bbeyer@tomballchamber.org

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

The Greater Tomball Area Chamber of Commerce provides resources and fosters relationships that empower businesses to prosper in Tomball and its surrounding communities.

Section II: Event/Program Information

Event/Program Name: Visitor Center

Date(s) of Event/Program: Monday - Friday, 8:30am - 5pm

Location of Event/Program (Provide the address or a general location):

29201 Quinn Road, Suite B

Website for Event/Program: www.tomballchamber.org

Is this a new event/program? ☐ Yes ☒ No

If this is not a new event/program, how long has the event/program operated?

Open for 60 years

Provide a detailed description of the event/program.

daily handling of walk-ins, calls and emails from people looking to visit Tomball for events as well as making trips to look at homes for relocating

Estimated Local Attendees at Event/Program: 200

Estimated Out of Town Attendees at Event/Program: 500

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program. \$ 10,000

Total operating budget for event/program. \$ 69,174

Percent of event/program to be funded by grant. 6.9 %

Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures. \$

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

reimbursement for visitor center costs of maintaining the office, supplies for mailing visitor packets, staff to handle visitors

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

☐ Paid Advertising ☐ Radio ☐ Television ☒ Brochures
☒ Social Media ☐ Newspaper ☒ Online/Digital Ads ☐ Press Release
☐ Other (please specify) _____

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

As a visitor center, chambers of commerce have a long standing history of being the first place visitors stop when they come to a new town. The GTACC is publicized through the website, in the World Chamber of Commerce Directory, as a member of the US Chamber of Commerce, the Texas Association of Business, Texas Chamber of Commerce Executives, and the American Chamber of Commerce Executives.

How will you measure the impact of your event on local overnight accommodations?

by tracking calls and email requests for local hotel information

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☒ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☐ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☐ Encouragement, promotion, improvement, and application of the arts.
☐ Historical restoration or preservation programs.
☐ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization’s most recent annual budget.
3. Organization’s most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization’s balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: Brandy Beyer  Digitally signed by Brandy Beyer
Date: 2025.07.08 16:26:00 -05'00'

Applicant Printed Name: Brandy Beyer

Date of Application: 7/8/2025

Visitor Center Budget

Rent	25,974.00
CAM Expense	12,000.00
Office Supplies/Postage	1,200.00
Personnel	30,000.00

Total Expenses: 69,174.00

Grant Request:	10,000.00
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Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 7.

	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	TOTAL Jan - Dec 25
Ordinary Income/Expense													
Income													
Income													
Rent Income	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	74,592.00
Capital Campaign	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	36,000.00
Health & Wellness	1,500.00	1,000.00		1,500.00	3,000.00	4,000.00	1,000.00	3,000.00	2,000.00	3,000.00			20,000.00
Hotel/Motel Tax									45,000.00				45,000.00
First Friday	3,500.00	3,500.00	3,500.00	3,000.00	3,000.00	3,000.00	2,000.00	3,000.00	3,500.00	3,000.00	3,000.00	3,000.00	37,000.00
Networking Breakfast	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	450.00	450.00	500.00	500.00	5,100.00
Women's Committee	0.00	1,000.00	1,500.00	1,500.00	1,000.00	1,000.00	0.00	0.00	13,000.00	0.00	0.00	1,000.00	20,000.00
Interest Income	2,500.00	200.00	200.00	3,000.00	200.00	200.00	3,000.00	200.00	200.00	3,000.00	200.00	200.00	13,100.00
Membership Dues													
New	10,000.00	10,000.00	7,000.00	7,000.00	7,000.00	7,000.00	7,000.00	10,000.00	10,000.00	10,000.00	10,000.00	5,000.00	100,000.00
Allowance Non-Renewal	-6,227.83	-7,412.58	-3,473.08	-4,129.33	-2,466.83	-3,250.08	-3,133.58	-3,578.08	-4,010.33	-4,900.58	-3,271.83	-2,961.58	-48,815.75
Renewal	62,278.33	74,125.83	34,730.83	41,293.33	24,668.33	32,500.83	31,335.83	35,780.83	40,103.33	49,005.83	32,718.33	29,615.83	488,157.46
Total Membership Dues	66,050.50	76,713.25	38,257.75	44,164.00	29,201.50	36,250.75	35,202.25	42,202.75	46,093.00	54,105.25	39,446.50	31,654.25	539,341.71
Miscellaneous Income	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	2,640.00
Publications/Products													
Magazine/Map/Website		400.00		1,000.00	15,000.00		500.00	6,000.00		4,000.00	1,100.00		28,000.00
Total Publications	0.00	400.00	0.00	1,000.00	15,000.00	0.00	500.00	6,000.00	0.00	4,000.00	1,100.00	0.00	28,000.00
Special Events													
Banquet	10,000.00	20,000.00											30,000.00
Golf Classic		10,000.00	20,000.00	5,000.00		5,000.00							40,000.00
Family Reunion					5,000.00								
Tomball Night						10,000.00	22,000.00	5,000.00					37,000.00
Holiday Parade						15,000.00			3,000.00	15,000.00	12,000.00		45,000.00
Miss Tomball Pageant									2,000.00	15,000.00	13,000.00		30,000.00
Total Special Events	10,000.00	30,000.00	20,000.00	5,000.00	5,000.00	30,000.00	22,000.00	5,000.00	5,000.00	30,000.00	25,000.00	0.00	187,000.00
Total Income	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Total Income	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Gross Profit	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Expense													
Building Expense													
Cleaning	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	8,880.00
Electricity	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	12,660.00
Building Interest	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	17,700.00
Reimbursed by tenants	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-20,736.00
Repairs/Maintenance	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	12,000.00
Total Building Expense	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	30,000.00

Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 7.

	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	TOTAL Jan - Dec 25
Accounting Expense	4,000.00	7,500.00	4,000.00			2,500.00							18,000.00
Advertising							2,000.00	3,000.00		1,000.00	4,000.00		10,000.00
Bad Debt Expense	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	10,000.00	4,000.00	20,000.00	70,000.00
Health & Wellness		1,500.00			1,500.00			5,000.00	2,000.00	4,000.00			14,000.00
First Friday	3,000.00	3,500.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,500.00	3,000.00	3,000.00	37,000.00
Networking Breakfast	200.00	200.00	200.00	100.00	150.00	200.00	100.00	100.00	200.00	200.00	150.00	200.00	2,000.00
Women's Committee		500.00	500.00	500.00	500.00	1,000.00	0.00	0.00	2,000.00	0.00	0.00	10,500.00	15,500.00
Young Professionals	200.00			200.00			200.00			200.00			800.00
Bank Fees	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	16,200.00
Board of Directors	500.00								3,000.00	3,700.00	300.00		7,500.00
Dues and Subscriptions	1,150.00				500.00			750.00				1,112.00	3,512.00
Employee Expense													
SUTA	1,700.00	600.00											2,300.00
Development	600.00	1,600.00		3,000.00	0.00	4,000.00	3,000.00	1,000.00	300.00	1,500.00			15,000.00
FUTA	140.00	30.00											170.00
Group Insurance	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	4,000.00	4,000.00	4,000.00	4,000.00	43,600.00
Cell Phone Allowance	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	5,040.00
Payroll Services	550.00	600.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	6,650.00
Payroll Taxes	2,080.00	2,100.00	2,100.00	2,080.00	2,080.00	2,080.00	2,080.00	2,100.00	2,080.00	2,080.00	2,150.00	3,200.00	26,210.00
Salaries													
TACC	36,166.25	37,716.25	36,166.25	37,716.25	36,166.25	36,166.25	36,166.25	37,716.25	36,166.25	36,166.25	38,716.25	36,166.25	441,195.00
Bonus												18,265.00	18,265.00
Total Salaries	36,166.25	37,716.25	36,166.25	37,716.25	36,166.25	36,166.25	36,166.25	37,716.25	36,166.25	36,166.25	38,716.25	54,431.25	459,460.00
Total Employee Expense	45,106.25	46,516.25	42,686.25	47,216.25	42,666.25	46,666.25	45,666.25	45,236.25	43,516.25	44,716.25	45,836.25	62,601.25	558,430.00
Insurance													
Worker's Compensation	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	570.96
Officer & Director Liability	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	1,761.96
General Liab.	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	8,552.04
Total Insurance	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	10,884.96
Membership/Misc. Expense	10,000.00	5,000.00	2,500.00	2,000.00	800.00	500.00	1,000.00	1,000.00	500.00	600.00	800.00	4,000.00	28,700.00
Office Equipment Expense													
Database	6,250.00												6,250.00
Computer Maintenance	400.00	400.00	1,000.00	400.00	400.00	1,500.00	400.00	400.00	400.00	400.00	400.00	400.00	6,500.00
Copier Lease	600.00	800.00	800.00	700.00	700.00	700.00	500.00	600.00	400.00	800.00	800.00	600.00	8,000.00
Pitney Bowes			600.00			600.00			600.00			600.00	2,400.00
Total Office Equip Expense	7,250.00	1,200.00	2,400.00	1,100.00	1,100.00	2,800.00	900.00	1,000.00	1,400.00	1,200.00	1,200.00	1,600.00	23,150.00
Office Supplies	700.00	5,000.00	500.00	700.00	500.00	500.00	600.00	800.00	250.00	500.00	250.00	200.00	10,500.00
Postage & Delivery	500.00	0.00	1,000.00	0.00	0.00	0.00	500.00	500.00	0.00	0.00	0.00	0.00	2,500.00
Property Tax Expense	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	17,469.00
Income Tax Expense	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	7,600.00

Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 7.

	TOTAL												
	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan - Dec 25
Rent	145.00	145.00	145.00	145.00	145.00	145.00	160.00	160.00	160.00	160.00	160.00	160.00	1,830.00
Special Events													
Banquet		12,000.00	1,000.00										13,000.00
Golf Classic			1,000.00	18,000.00									19,000.00
Family Reunion					5,000.00								
Tomball Night							1,000.00	11,000.00					12,000.00
Holiday Parade									1,000.00	1,000.00	21,000.00	1,000.00	24,000.00
Miss Tomball Pageant													
Scholarship Expense											13,000.00		13,000.00
Pageant - Other											5,000.00	2,000.00	7,000.00
Total Miss Tomball										0.00	18,000.00	2,000.00	20,000.00
Total Special Events	0.00	12,000.00	2,000.00	18,000.00	5,000.00	0.00	1,000.00	11,000.00	1,000.00	1,000.00	39,000.00	3,000.00	93,000.00
Telephone Expenses	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	6,720.00
Travel & Entertainment	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	960.00
Total Expense	84,279.50	94,589.50	70,459.50	84,489.50	67,389.50	68,839.50	66,654.50	83,074.50	68,554.50	78,304.50	106,224.50	113,901.50	986,761.00
Net Ordinary Income	9,107.00	28,059.75	2,834.25	-15,489.50	-1,152.00	15,447.25	6,883.75	-13,835.75	56,124.50	28,686.75	-27,542.00	-68,111.25	21,012.71
Principal Building Payment	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	45,000.00
xDepreciation Expense	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	21,756.00
Net Income	3,544.00	22,496.75	-2,728.75	-21,052.50	-6,715.00	9,884.25	1,320.75	-19,398.75	50,561.50	23,123.75	-33,105.00	-73,674.25	-45,743.29

Greater Tomball Area Chamber of Commerce

Independent Auditors' Report and Financial Statements
for the Year Ended December 31, 2024 (Audited)
(with comparative totals for 2023 - Reviewed)



Tipton & Company
CERTIFIED PUBLIC ACCOUNTANTS

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Tipton & Company

CERTIFIED PUBLIC ACCOUNTANTS

Tipton & Company LLC
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 Houston, TX 77070
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INDEPENDENT AUDITORS' REPORT

To the Board of Directors
 Greater Tomball Area Chamber of Commerce
 Tomball, Texas

We have audited the accompanying financial statements of Greater Tomball Area Chamber of Commerce (a nonprofit organization), which comprise the statement of financial position as of December 31, 2024, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Greater Tomball Area Chamber of Commerce as of December 31, 2024, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Greater Tomball Area Chamber of Commerce and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Greater Tomball Area Chamber of Commerce's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Greater Tomball Area Chamber of Commerce's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Greater Tomball Area Chamber of Commerce's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Report on Summarized Comparative Information

The 2023 financial statements were reviewed by us and our report thereon, dated March 4, 2024, stated we were not aware of any material modifications that should be made to those financial statements for them to be in conformity with accounting principles generally accepted in the United States of America. However, a review is substantially less in scope than an audit and does not provide a basis for the expression of an opinion on the financial statements. The summarized comparative information presented herein as of and for the year ended December 31, 2023, is consistent, in all material respects, with the reviewed financial statements from which it has been derived.

Tipton & Company LLC

Tipton & Company LLC
 Certified Public Accountants
 Houston, Texas

March 12, 2025

Greater Tomball Area Chamber of Commerce

Statement of Financial Position

Item 7.

As of December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Assets		
Cash and cash equivalents	\$ 132,986	\$ 223,989
Certificate of deposit	320,289	309,821
Accounts receivable, net	64,847	44,907
Prepaid expenses	10,677	10,291
Property and equipment, net	796,220	825,005
Total Assets	\$ 1,325,019	\$ 1,414,013
Liabilities and Net Assets		
Liabilities		
Accrued expenses	\$ 30,248	\$ 31,031
Deferred revenues	192,315	192,315
Note payable	240,362	381,706
Deposits	4,150	8,300
Total Liabilities	467,075	613,352
Net Assets		
Without donor restrictions	857,944	800,661
Total Net Assets	857,944	800,661
Total Liabilities and Net Assets	\$ 1,325,019	\$ 1,414,013

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Statement of Activities

Item 7.

Year ended December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Without Donor Restrictions		
Revenue and Support		
Membership dues	\$ 513,014	\$ 483,928
Special events revenue	208,974	204,015
Direct benefit to donor	(26,578)	(22,952)
Capital improvement campaign	30,000	36,000
First Friday luncheon	33,225	42,420
Networking Breakfast	5,245	5,375
Women's Committee	15,712	26,350
City of Tomball hotel tax revenue	45,000	35,000
Rental income	66,285	64,624
Tenant reimbursements	15,086	12,386
Ads and ad commission	18,334	25,400
Contributed nonfinancial assets	9,470	29,008
Interest and investment income	12,494	12,619
Other income	49,187	16,733
Total Revenue and Support	995,448	970,906
Expenses		
Program Services		
Business resources	339,930	325,812
Advocacy	335,393	328,349
Total Program Services	675,323	654,161
Supporting Services		
General and administrative	123,028	127,020
Fundraising	139,814	137,210
Total Supporting Services	262,842	264,230
Total Expenses	938,165	918,391
Change in Net Assets	57,283	52,515
Net Assets, Beginning of Year	800,661	748,146
Net Assets, End of Year	\$ 857,944	\$ 800,661

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Item 7.

Statement of Functional Expenses

Year ended December 31, (with comparative totals for 2023)	Program Services			Supporting Services			Audited 2024 Total	Reviewed 2023 Total
	Business Resources	Advocacy	Total Program Services	General and Administrative	Fundraising	Total Supporting Services		
Payroll and related expenses								
Salaries	\$ 138,831	\$ 138,831	\$ 277,662	\$ 34,708	\$ 34,708	\$ 69,416	\$ 347,078	\$ 312,048
Payroll taxes	11,473	11,473	22,946	2,868	2,868	5,736	28,682	26,044
Employee benefits	16,974	16,974	33,948	4,244	4,244	8,488	42,436	37,278
Total payroll and related expenses	167,278	167,278	334,556	41,820	41,820	83,640	418,196	375,370
Other expenses								
Advertising	1,194	1,194	2,388	1,194	8,355	9,549	11,937	26,922
Bad debt	19,043	19,043	38,086	19,043	19,042	38,085	76,171	69,471
Bank fees	1,457	1,457	2,914	5,829	5,829	11,658	14,572	13,532
Board expenses	-	-	-	8,824	-	8,824	8,824	6,305
Computer maintenance	2,638	2,638	5,276	659	659	1,318	6,594	4,642
Contract labor	22,596	22,596	45,192	5,649	5,649	11,298	56,490	66,448
Depreciation	11,514	11,514	23,028	2,878	2,879	5,757	28,785	30,115
Dues and subscriptions	1,454	1,454	2,908	364	364	728	3,636	4,870
Employee development	6,606	6,606	13,212	1,651	1,651	3,302	16,514	12,264
Equipment lease	4,480	4,480	8,960	1,120	1,120	2,240	11,200	12,212
First Friday	33,831	-	33,831	-	-	-	33,831	37,020
Health committee	13,281	-	13,281	-	-	-	13,281	11,046
Insurance	4,200	4,200	8,400	1,050	1,050	2,100	10,500	10,306
Interest	8,536	8,536	17,072	2,134	2,133	4,267	21,339	16,940
Miscellaneous	6,321	7,460	13,781	5,595	-	5,595	19,376	21,062
Networking breakfast	2,580	-	2,580	-	-	-	2,580	1,617
Office supplies	2,222	2,222	4,444	556	556	1,112	5,556	5,692
Payroll service	2,581	2,581	5,162	645	645	1,290	6,452	5,880
Postage and delivery	572	286	858	286	763	1,049	1,907	2,888
Professional fees	-	-	-	10,100	-	10,100	10,100	16,005
Rent	665	665	1,330	166	166	332	1,662	1,482
Repairs and maintenance	7,191	7,191	14,382	1,798	1,798	3,596	17,978	25,194
Software	2,291	2,291	4,582	572	572	1,144	5,726	5,986
Special events	2,514	36,626	39,140	-	67,620	67,620	106,760	95,802
Taxes - income	-	-	-	6,613	-	6,613	6,613	10,542
Taxes - property	6,988	6,988	13,976	1,747	1,746	3,493	17,469	15,796
Telephone	2,787	2,787	5,574	697	697	1,394	6,968	7,014
Travel and entertainment	-	-	-	760	-	760	760	720
Utilities	5,110	5,110	10,220	1,278	1,278	2,556	12,776	12,452
Womens Committee	-	10,190	10,190	-	-	-	10,190	15,748
Total other expenses	172,652	168,115	340,767	81,208	124,572	205,780	546,547	565,973
Subtotal	339,930	335,393	675,323	123,028	166,392	289,420	964,743	941,343
Less: Direct benefit to donor	-	-	-	-	(26,578)	(26,578)	(26,578)	(22,952)
Total Expenses	\$ 339,930	\$ 335,393	\$ 675,323	\$ 123,028	\$ 139,814	\$ 262,842	\$ 938,165	\$ 918,391

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Statement of Cash Flows

Item 7.

Year Ended December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Cash Flows From Operating Activities		
Change in net assets	\$ 57,283	\$ 52,515
Adjustments to reconcile change in net assets to net change in operating activities:		
Unrealized (gain)/loss on certificate of deposit	289,530	(9,821)
Depreciation	28,785	30,115
Bad debt expense	76,171	69,471
Changes in assets and liabilities:		
Accounts receivable	(96,111)	(79,129)
Prepaid expenses	(386)	(193)
Accrued expenses	(783)	2,302
Deferred revenues	-	16,517
Other Liabilities	(4,150)	-
Total Adjustments	293,056	29,262
Net Change in Operating Activities	350,339	81,777
Cash Flows From Investing Activities		
Purchases of certificate of deposit	(300,000)	(300,000)
Purchases of property and equipment	-	-
Net Change in Investing Activities	(300,000)	(300,000)
Cash Flows From Financing Activities		
Payments on note payable	(141,345)	(145,876)
Net Change in Financing Activities	(141,345)	(145,876)
Net Change in Cash and Cash Equivalents	(91,006)	(364,099)
Cash and Cash Equivalents, beginning of year	223,989	588,088
Cash and Cash Equivalents, end of year	\$ 132,983	\$ 223,989
Supplemental Disclosures:		
Interest paid	\$ 21,339	\$ 16,940
Federal income taxes paid	\$ 6,613	\$ 10,542

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

NOTE 1 – NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

The Greater Tomball Area Chamber of Commerce (the “Chamber”) is a not-for-profit organization of citizens who are investing their time and money in a community development program working together to improve the economic, civic, and cultural fortitude of the region, community, or area. The Chamber’s mission is to provide resources and foster relationships that empower businesses to prosper in Tomball and its surrounding communities.

The Chamber is supported through membership dues, contributions, rental income and other miscellaneous revenue. The Chamber conducts the following programs:

- *Business resources* – The Business Resources Division is dedicated to providing and promoting value added, quality networking events to the Chamber’s diverse membership, by ensuring inclusion through new member mentorship programs and by presenting opportunities for personal and business growth. This division invites members to become involved in the Chamber’s programs that will allow relationships to be formed and sustained through a variety of networking events.
- *Advocacy* – The Advocacy Division is committed to being a strong voice for the Chamber’s members and the greater Tomball area community. This will be accomplished by addressing public policy issues with participation from the public, members and elected officials, and holding open discussions about issues that affect the business community including: economic development, education, workforce development, energy and healthcare.

Basis of Accounting

The financial statements of the Chamber have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

The Chamber reports information regarding its financial position and activities according to two classes of net assets that are based upon the existence or absence of restrictions on use that are placed by its donors: net assets without donor restrictions and net assets with donor restrictions.

- *Net assets without donor restrictions* are resources available to support operations and not subject to donor restrictions. The only limits on the use of net assets without donor restrictions are the broad limits resulting from the nature of the Chamber, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations. Assets restricted solely through the actions of the Board of Directors are reported as net assets without donor restrictions, board-designated.
- *Net assets with donor restrictions* are resources that are subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or use for a purpose specified by the donor. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-restricted endowment earnings are

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

released when those earnings are appropriated with spending policies and are used for the specified purpose.

Cash and Cash Equivalents

The Chamber considers all monies in banks and highly liquid investments with maturities of three months or less from the date of purchase to be cash and cash equivalents. The carrying values of any cash and cash equivalents are deemed to approximate their fair values because of the short maturities of those financial instruments.

Certificates of Deposit

The Chamber has a certificate of deposit, bearing interest at 3.00%, maturing January 2025 with an early withdrawal penalty of 360 days of interest. It was renewed again in January 2025 with the same interest rate, maturing January 2026. The total balance of the certificate of deposit at December 31, 2024 and 2023 is \$320,289 and \$309,821, respectively.

Accounts Receivable

Accounts receivable are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through a provision for bad debt expense and an adjustment to a valuation allowance based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. At December 31, 2024 and 2023, the allowance for bad debts was \$7,021 in both years.

Property and Equipment

The Chamber capitalizes all expenditures for property, plant and equipment in excess of \$500. Maintenance and repairs are charged to operations when incurred. Major improvements and renewals that extend the life of the asset are capitalized. Purchased property, plant and equipment are carried at cost and are depreciated using the straight-line method based on their estimated useful lives as follows:

Buildings and improvements	39 years
Computers and software	3-5 years
Office equipment	5-7 years
Furniture and fixtures	5-7 years

Contributed Nonfinancial Assets

Donated goods are recognized at fair value as contributions when an unconditional commitment is received from the donor. The related expense is recognized as the item is used or sold. All donated goods were utilized by the Organization's programs and supporting services. There were no donor-imposed restrictions associated with the donated services and assets. Contributions of services are recognized when services received (a) create or enhance nonfinancial assets or (b) require specialize skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

Deferred Revenue

Income from membership dues and subscription fees received in advance is deferred and recognized over the periods to which the dues and fees relate.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. The significant estimates included in the financial statements are the estimates of useful lives used for depreciating property and equipment items.

Membership Dues

Membership dues are recognized as revenue ratably over the term of the membership period. Any unearned amounts are included in deferred revenue at the end of each accounting period.

Functional Allocation of Expenses

Expenses are categorized in the Statement of Activities as program services, management and general and fundraising. The Chamber's expenses are allocated on a functional basis among these benefited categories:

- Program service expenses: include direct and indirect (allocated) expenses for the various programs offered by the Chamber to fulfill member investment expectations. Expenses that can be identified with a specific program and support services are allocated directly according to their natural expenditure classification. Other expenses, that are common to several functions, are allocated to program services based on time and effort.
- Management and general expenses: include those expenses, ranging from office management to financial services, that are not directly identifiable with any other specific function but provide for the overall support and direction of the Chamber. Those expenses include the basic necessities to be an accredited, well rounded, and effective organization.
- Fundraising expenses: represent costs incurred in connection with fundraising efforts to continue the Chamber's mission. The membership dues alone are not adequate enough to accomplish the Chamber's goals; therefore, fundraising events are held to fill the gap between membership dues and total expenses.

Income Taxes

The Chamber is operating as a not-for-profit corporation, under Section 501(c)(6) of the Internal Revenue Code, and is not subject to income taxes with the exception of unrelated business income. The Chamber conducted unrelated business activities during the current year. Therefore, the Chamber paid \$6,613 and \$10,542 for federal income taxes in the years ended December 31, 2024 and 2023, respectively.

The Chamber applies the provisions of FASB ASC Topic 740, Income Taxes, which prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Topic 740 also provides guidance on de-recognition, classification, interest and penalties, accounting in interim periods, disclosures and transition. As of December 31, 2024 and 2023, no uncertain tax positions were identified.

Leases

The Chamber accounts for leases in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 842, *Leases*. Leases are evaluated using the criteria in FASB ASC 842 to determine whether they will be classified as operating leases or finance leases. The Chamber determines if an arrangement is a lease, or contains a lease, at inception of a contract and when terms of an existing contract are

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

changed. The Chamber determines if an arrangement conveys the right to use an identified asset and whether the Chamber obtains substantially all of the economic benefits from and has the ability to direct the use of the asset. The Chamber recognizes a lease liability and right-of-use (ROU) asset at the commencement date of the lease. The Chamber has elected to not recognize ROU assets and lease liabilities for short-term leases that have an initial lease term of 12 months or less and for leases that management deems immaterial.

Lease liabilities - Lease liabilities are measured based on the present value of future lease payments using the risk-free rate.

Right of use (ROU) assets - ROU assets are recognized at the present value of the lease payments at inception of the lease adjusted, as appropriate, for certain other payments and allowances related to obtaining the lease and placing the asset in service. Lease expense is recognized on a straight-line basis as rent expense in the statement of functional expenses.

Advertising Cost

Advertising costs are expensed when incurred. Advertising costs for the years ended December 31, 2024 and 2023 amounted to \$11,937 and \$26,922, respectively.

NOTE 2 – LIQUIDITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of December 31, 2024, comprise the following:

Financial assets:	
Cash and cash equivalents	\$132,986
Certificate of deposit	320,289
Accounts receivable, net	64,847
Financial assets available to meet cash needs for general expenditures within one year	\$518,122

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Chamber considers all expenditures related to its ongoing program activities, as well as the conduct of services undertaken to support those activities, to be general expenditures. None of the financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the statement of financial position date. The Chamber sets a goal of having financial assets on hand to meet a minimum of 90 days of normal operating expenses, which are, on average, around \$70,000. As part of its liquidity management, the Chamber has a policy to structure its financial assets to be available as general expenditures, liabilities, and other obligations become due.

NOTE 3 – CONCENTRATION OF CREDIT RISKS

The Chamber maintains its cash and certificate of deposit balances in a local bank. These balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. Management periodically assesses the financial condition of the financial institutions and believes that any possible credit risk is minimal. As of December 31, 2024 and 2023, the Chamber had approximately \$203,000 and \$284,000, respectively, of cash certificate of deposit balances that were not insured by the FDIC. The Chamber has not experienced any losses in such accounts and believes the risk of future loss is mitigated by monitoring the balances and the financial institutions where the cash is deposited.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

NOTE 4 – PROPERTY AND EQUIPMENT

As of December 31, 2024 and 2023, property, plant and equipment consisted of the following:

	Audited 2024	Reviewed 2023
Building and improvements	\$1,112,383	\$1,112,383
Computers and software	17,517	17,517
Office equipment	14,321	14,321
Furniture and fixtures	17,990	17,990
Land	145,000	145,000
Total property and equipment, gross	1,307,211	1,307,211
Less: Accumulated depreciation	(510,991)	(482,206)
Total property and equipment, net	\$796,220	\$825,005

Depreciation expense for the years ended December 31, 2024 and 2023 was \$28,785 and \$30,115, respectively.

NOTE 5 – RENTAL INCOME

The Chamber generates rental income from leasing its office space to lessees. As the lessor, the Chamber is required to first determine whether the lease is an operating lease or a finance lease. A finance lease is one in which the risks and rewards inherent in the asset are transferred to the lessee. An operating lease is one in which the risks and rewards inherent in the asset are not transferred to the lessee. Only finance leases are required to be capitalized on the statement of financial position.

The Chamber leases office space to three other organizations as follows and as the risks and reward inherent in the asset are not transferred to the lessee, it has been determined that these leases are operating leases, so these leases have not been capitalized on the statement of financial position:

	Current monthly rent	Lease initiation	Lease expiration	Lease renewal	Renewal expiration
TEDC	\$1,506	9/1/2008	10/31/2013	11/1/2013	10/31/2018
				11/1/2023	10/31/2024
	\$4,560	11/1/2018	10/31/2023	11/1/2024	10/31/2029
TRHF	\$3,869	11/1/2017	10/31/2022	11/1/2022	10/31/2024
	\$1,506			11/1/2024	10/31/2025
Envirocon	\$150	4/1/2016	3/31/2020	4/1/2020	3/31/2024 ¹

For the years ended December 31, 2024 and 2023, rental income was \$66,285 and \$64,624 respectively.

Future minimum rentals expected to be collected are as follows:

For the years ending December 31,

2025	\$ 69,780
2026	\$ 54,720
2027	\$ 54,720
2028	\$ 54,720
2029	\$ 45,600
Thereafter	-
Total	\$ 279,540

¹ Note that Envirocon continues to lease space at \$150 monthly on a month-to-month basis.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

NOTE 6 – LEASE AGREEMENTS

The Chamber has entered into noncancelable operating leases that expire in 2024 and 2026. For the years ended December 31, 2024 and 2023, the total rental expense under these leases was \$12,862 and \$13,694, respectively. The Chamber's lease arrangements are not recognized in the statement of financial position as they are immaterial. Future minimum lease payments are as follows:

For the years ending December 31,	
2025	\$1,969
2026	656
Thereafter	-
Total	\$2,625

NOTE 7 – NOTE PAYABLE

The Chamber had a note payable due in monthly installments to a financial institution for an office building in the amount of \$6,729 for 83 months beginning January 10, 2010 through November 10, 2016. This note was secured by the Quinn Road office building, with interest at 5% through October 9, 2021. On December 10, 2016, a balloon payment of any unpaid principal and interest became due and payable, at which time the loan was modified to require monthly installments of \$5,595 at the same interest rate and terms and to become due and payable on December 10, 2023. Effective October 10, 2021, the interest rate was modified to 4%, requiring the same monthly installments and due date. In December 2023, the interest rate was modified to 7% and the note is due and payable on demand. If demand is not earlier made, the note shall be due and payable in monthly payments of principal and interest of \$5,224, commencing on January 10, 2024 through December 10, 2026, when the entire amount remaining unpaid shall be due and payable.

As of December 31, 2024 and 2023, the balance was \$240,362 and \$381,706, respectively. Future scheduled maturities of the note payable are as follows:

For the years ending December 31,	
2025	\$240,362
Thereafter	-
Total	\$240,362

NOTE 8 – CONCENTRATIONS

For both years ended December 31, 2024 and 2023, approximately fifty percent (50%) of the Chamber's total revenue and support came from membership dues.

The Chamber conducts its operations solely in the greater Tomball area, and, therefore, is subject to risks from changes in local economic conditions. A downturn in the local economy could cause a decrease in membership dues and revenue.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 7.

NOTE 9 – CONTRIBUTED NONFINANCIAL ASSETS

For the years ended December 31, 2024 and 2023, the Chamber's contributed nonfinancial assets consist of the following:

	Audited 2024	Reviewed 2023
Advertising	\$ 2,520	\$22,720
Repairs and maintenance	6,600	6,600
Supplies	4,500	4,500
Venues	6,300	6,300
Miscellaneous	3,160	3,348
Total contributed nonfinancial assets	\$23,080	\$43,468

Contributed advertising and repairs and maintenance are used in the Chamber's administrative activities. Contributed supplies are used in the Chamber's fundraising activities. Contributed venue costs are used in the Chamber's program activities and fundraising activities. Other miscellaneous donated assets are used across all Chamber activities. All contributed nonfinancial assets are valued at fair market value at the date of donation.

NOTE 10 – SUBSEQUENT EVENTS

Management has evaluated subsequent events through March 12, 2025, the date the financial statements were available to be issued. No events were identified that are required to be disclosed or would have a material impact on reported net assets or changes in net assets.

**GREATER TOMBALL AREA CHAMBER OF COMMERCE
2025 BOARD OF DIRECTORS**

Item 7.

CHAIR OF THE BOARD

Rob Marmerstein*

HCA Houston Healthcare Tomball

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_____ cell

ross@winklerpr.com**IMMEDIATE PAST CHAIRMAN OF THE BOARD****Raymond Francois****Hampton Inn & Suites*

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CHAMBER PRESIDENT

Bruce E. Hillegeist

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Item 7.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Item 7.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Greater Tomball Area Chamber of Commerce	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
5 Address (number, street, and apt. or suite no.). See instructions. PO Box 516		Requester's name and address (optional)
6 City, state, and ZIP code Tomball, TX 77377		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

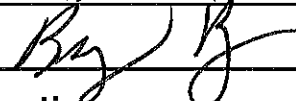
Social security number								
			-				-	
or								
Employer identification number								
7	4	-	1	4	9	5	1	2

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date 5/6/25
-----------	--	--------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

FOR TAX YEAR 2023

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

PE CPA PLLC

32938 TAMINA ROAD STE 202

MAGNOLIA, TX 77354

(281)826-4272

**Acknowledgement and General Information for
Entities That File Returns Electronically**

Item 7.

2023

Name(s) as shown on return

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Tax ID Number

-*5125

Entity address

PO BOX 516

TOMBALL, TX 77377

Thank you for participating in IRS e-file.

1. ☒ 2023 8868-01 income tax return for Federal was filed electronically.
The electronic filing services were provided by PE CPA PLLC.
2. ☒ 8868-01 income tax return was accepted on 05-10-2024 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature.
The submission ID assigned to this return is XXXXXXXXXXXX.

**PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE
IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

**Acknowledgement and General Information for
Entities That File Returns Electronically**

Item 7.

2023

Name(s) as shown on return

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Tax ID Number

-*5125

Entity address

PO BOX 516

TOMBALL, TX 77377

Thank you for participating in IRS e-file.

1. ☒ 2023 8868-07 income tax return for Federal was filed electronically.
The electronic filing services were provided by PE CPA PLLC.
2. ☒ 8868-07 income tax return was accepted on 05-10-2024 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature.
The submission ID assigned to this return is XXXXXXXXXX.

**PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE
IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

Item 7.

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning , 2023, and ending , 20	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 516 City or town, state or province, country, and ZIP or foreign postal code TOMBALL, TX 77377 F Name and address of principal officer:
D Employer identification number 74-1495125	
E Telephone number (281) 351-7222	
G Gross receipts \$ 932,466	
H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: N/A	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
L Year of formation: 1965 M State of legal domicile: TX	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE GREATER TOMBALL AREA CHAMBER OF COMMERCE PROVIDES RESOURCES AND FOSTERS RELATIONSHIPS THAT EMPOWER BUSINESSES TO PROSPER IN TOMBALL AND ITS SURROUNDING COMMUNITIES.
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 19
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 19
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 4
	6 Total number of volunteers (estimate if necessary) 6
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0
Revenue	8 Contributions and grants (Part VIII, line 1h) 108,943 100,008
	9 Program service revenue (Part VIII, line 2g) 608,640 717,843
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,424 12,619
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 93,933 101,996
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 812,940 932,466
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 280,211 371,963
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0
	b Total fundraising expenses (Part IX, column (D), line 25) 0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 402,021 463,482
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 682,232 835,445
	19 Revenue less expenses. Subtract line 18 from line 12 130,708 97,021
	20 Total assets (Part X, line 16) 1,453,306 1,369,105
	21 Total liabilities (Part X, line 26) 564,025 421,112
	22 Net assets or fund balances. Subtract line 21 from line 20 889,281 947,993

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	BRUCE HILLEGEIST Signature of officer	Date			
	BRUCE HILLEGEIST, PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name MP ENCALADE CPA	Preparer's signature MP ENCALADE CPA	Date 07-30-2024	Check <input type="checkbox"/> if self-employed	PTIN XXXXXXXXXX
	Firm's name PE CPA PLLC	Firm's EIN			
	Firm's address 32938 TAMINA ROAD STE 202 MAGNOLIA TX 77354	Phone no. 281-826-4272			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE GREATER TOMBALL AREA CHAMBER OF COMMERCE PROVIDES RESOURCES AND FOSTERS RELATIONSHIPS THAT EMPOWER BUSINESSES TO PROSPER IN TOMBALL AND ITS SURROUNDING COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 835,445 including grants of \$) (Revenue \$ 932,466)

THE CHAMBER PROMOTED LOCAL BUSINESS GROWTH AND THE QUALITY OF COMMUNICATION AND LIFE IN THE COMMUNITY THROUGH BUSINESS EDUCATION, ENHANCING COMMUNITY IMAGE, AND DEVELOPING THE LINES OF COMMUNICAITON BETWEEN THE LOCAL BUSINESSES, AND GOVERNMENT. MEMBERSHIP WAS AT 725 BY THE END OF 2016.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 835,445

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	X
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 X	
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	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in 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	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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 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.		
a 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
c 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
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e X	
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	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X
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	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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? <i>If "Yes," complete Schedule J.</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
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 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
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?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
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? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	1a	19	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		19		
b Enter the number of voting members included in line 1a, above, who are independent	1b	19		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
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?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b 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 organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
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	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
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?		
a 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	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed _____
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ 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, and financial 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.

BRUCE HILLEGEIST (281)351-7222, PO BOX 516, TOMBALL, TX 77377

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee, and Independent ContractorsCheck 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRUCE HILLEGEIST PRESIDENT	50.00			X				125,244	0	0
(2) KIM LAURENCE SALSER DIRECTOR	2.00	X						0	0	0
(3) SCOTT MARQUARDT DIRECTOR	2.00	X						0	0	0
(4) URIAH ORTIZ DIRECTOR	2.00	X						0	0	0
(5) DR MARTHA SALAZAR-ZAMORA DIRECTOR	2.00	X						0	0	0
(6) KEITH BARBER DIRECTOR	2.00	X						0	0	0
(7) AL HERRERA DIRECTOR	2.00	X						0	0	0
(8) DAWNA DYSON DIRECTOR	2.00	X						0	0	0
(9) KYLE BERTRAND DIRECTOR	2.00	X						0	0	0
(10) MIKELYN CORKRAN DIRECTOR	2.00	X						0	0	0
(11) RAYMOND FRANCOIS DIRECTOR	2.00	X						0	0	0
(12) JANNA HOGLUND DIRECTOR	2.00	X						0	0	0
(13) KELLY VIOLETTE EX OFFICIO	2.00	X						0	0	0
(14) DYANNA MCCOY EX OFFICIO	2.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (d)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) ALLISON MUNDY DIRECTOR	2.00	X						0	0	0
(16) ROB MARMERSTEIN DIRECTOR	2.00	X						0	0	0
(17) CURTIS MORRIS DIRECTOR	2.00	X						0	0	0
(18) LONDON REED DIRECTOR	2.00	X						0	0	0
(19) RENEE LESLIE DIRECTOR	2.00	X						0	0	0
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								125,244	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

1

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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
- 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

	Yes	No
3		X
4		X
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) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	35,000			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	65,008			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 29,008			
	h	Total. Add lines 1a-1f		100,008			
Program Service Revenue	Business Code						
	2a	MEMBERSHIP DUES	900099	400,278	400,278		
	b	BANQUET	722320	40,016	40,016		
	c	GOLF CLASSIC	713990	59,601	59,601		
	d	FIRST FRIDAY	722210	41,857	41,857		
	e	TOMBALL PAGEANT	711300	33,470	33,470		
	f	All other program service revenue	900099	142,621	142,621		
	g	Total. Add lines 2a-2f		717,843			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		12,619	12,619		
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		22,433	22,433		
	6a	Gross rents	(i) Real	(ii) Personal			
				77,010			
			6b	Less: rental expenses			
	6c	Rental income or (loss)		77,010			
	d	Net rental income or (loss)		77,010	77,010		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
			7b	Less: cost or other basis and sales expenses			
	7c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
			8b	Less: direct expenses			
			c	Net income or (loss) from fundraising events			
	9a	Gross income from gaming activities. See Part IV, line 19					
9b			Less: direct expenses				
c			Net income or (loss) from gaming activities				
10a	Gross sales of inventory, less returns and allowances						
		10b	Less: cost of goods sold				
		c	Net income or (loss) from sales of inventory				
Miscellaneous Revenue	Business Code						
	11a	OTHER REVENUE	511140	2,553	2,553		
	b						
	c						
	d	All other revenue					
e	Total. Add lines 11a-11d		2,553				
12	Total revenue. See instructions			932,466	832,458	0	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . .				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	125,244	125,244		
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	183,692	183,692		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .				
9 Other employee benefits	37,277	37,277		
10 Payroll taxes	25,750	25,750		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	21,886	21,886		
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . .	21,067	21,067		
12 Advertising and promotion	26,923	26,923		
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	38,464	38,464		
17 Travel	720	720		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,433	6,433		
20 Interest	10,164	10,164		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	20,163	20,163		
23 Insurance	2,342	2,342		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT RENTAL AND MAINT	22,914	22,914		
b TELEPHONE	7,015	7,015		
c BANK AND MERCHANT FEES	13,534	13,534		
d SUPPLIES	5,693	5,693		
e All other expenses	266,164	266,164		
25 Total functional expenses. Add lines 1 through 24e. .	835,445	835,445	0	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	48,885	1	51,993
	2 Savings and temporary cash investments	539,203	2	481,817
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,098	9	10,291
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,307,212		
	b Less: accumulated depreciation	10b 482,208	855,120	10c 825,004
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,453,306	16	1,369,105	
Liabilities	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	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	527,582	23	381,707
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	36,443	25	39,405
	26 Total liabilities. Add lines 17 through 25	564,025	26	421,112
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds	889,281	31	947,993
	32 Total net assets or fund balances	889,281	32	947,993
	33 Total liabilities and net assets/fund balances	1,453,306	33	1,369,105

Part XI Reconciliation of Net AssetsCheck 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	932,466
2	Total expenses (must equal Part IX, column (A), line 25)	2	835,445
3	Revenue less expenses. Subtract line 2 from line 1	3	97,021
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	889,281
5	Net unrealized gains (losses) on investments	5	
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	(38,309)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	947,993

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a <input checked="" type="checkbox"/>	
b Were the organization's financial statements audited by an independent accountant? _____ 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. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	<input checked="" type="checkbox"/>
c 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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c <input checked="" type="checkbox"/>	
3a 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? _____	3a	<input checked="" type="checkbox"/>
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

Item 7.

2023

For calendar year 2023 or other tax year beginning , 2023, and ending , 20

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

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

Open to Public Inspection
for 501(c)(3)
Organizations OnlyDepartment of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) GREATER TOMBALL AREA CHAMBER OF COMMERCE	D Employer identification number 74-1495125
		Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 516	E Group exemption number (see instructions)
B Exempt under section <input checked="" type="checkbox"/> 501(c) (6) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A		City or town, state or province, country, and ZIP or foreign postal code TOMBALL, TX 77377	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year 1,369,105	
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417 (d)(1)(A) Applicable entity			

H Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>
J Enter the number of attached Schedules A (Form 990-T) 1
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation
L The books are in care of BRUCE HILLEGEIST PO BOX 516 TOMBALL TX 77377 Telephone number (281) 351-7222

Part I Total Unrelated Business Taxable Income	
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1 30,297
2 Reserved	2
3 Add lines 1 and 2	3 30,297
4 Charitable contributions (see instructions for limitation rules)	4
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3.	5 30,297
6 Deduction for net operating loss. See instructions	6
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7 30,297
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8 1,000
9 Trusts. Section 199A deduction. See instructions	9
10 Total deductions. Add lines 8 and 9.	10 1,000
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero.	11 29,297

Part II Tax Computation	
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1 6,152
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2
3 Proxy tax. See instructions	3
4 Other tax amounts. See instructions	4
5 Alternative minimum tax	5
6 Tax on noncompliant facility income. See instructions	6
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7 6,152

Part III Tax and Payments	
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a
b Other credits (see instructions)	1b
c General business credit. Attach Form 3800 (see instructions)	1c
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d
e Total credits. Add lines 1a through 1d.	1e
2 Subtract line 1e from Part II, line 7	2 6,152
3a Amount due from Form 4255	3a
b Amount due from Form 8611	3b
c Amount due from Form 8697	3c
d Amount due from Form 8866	3d
e Other amounts due (see instructions)	3e
f Total amounts due. Add lines 3a through 3e	3f
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4 6,152
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5

Part III Tax and Payments (continued)

6a	Payments: Preceding year's overpayment credited to the current year	6a		
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c	7,600	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Elective payment election amount from Form 3800	6g		
h	Payment from Form 2439	6h		
i	Credit from Form 4136	6i		
j	Other (see instructions)	6j		
7	Total payments. Add lines 6a through 6J	7		7,600
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		1,448
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax 1,448 Refunded	11		

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here _____	Yes	No
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		
4	Enter available pre-2018 NOL carryovers here \$ _____. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
6a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name MP ENCALADE CPA	Preparer's signature MP ENCALADE CPA	Date 07-30-2024	Check <input type="checkbox"/> if self-employed	PTIN XXXXXXXXXX
Firm's name PE CPA PLLC	Firm's EIN 82-0666561		Phone no. 281-826-4272	
Firm's address 32938 TAMINA ROAD STE 202 MAGNOLIA TX 77354				

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047 **Item 7.**

2023

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(6) (enter number) organization

☐ 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

- ☒ 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).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

EEA

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A N/A _____	\$ 38,394	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A N/A _____	\$ 63,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A N/A _____	\$ 6,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A N/A _____	\$ 49,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A N/A _____	\$ 29,937	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A N/A _____	\$ 12,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A N/A _____	\$ 28,945	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	N/A N/A _____	\$ 13,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	N/A N/A _____	\$ 7,050	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	N/A N/A _____	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	N/A N/A _____	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	N/A N/A _____	\$ 7,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	N/A N/A	\$ 8,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	N/A N/A	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Item 7.

2025

Open to Public
Inspection

Name of the organization

Employer identification number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input checked="" type="checkbox"/> Preservation of a certified historic structure	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c, acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

Schedule D (Form 990)

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (cont)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange program

e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? ☐ Yes ☐ No

(ii) Related organizations? ☐ Yes ☐ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	58,000	87,000		145,000
b Buildings	354,018	531,026	327,804	557,240
c Leasehold improvements	4,245	211,594	94,119	121,720
d Equipment		31,839	30,795	1,044
e Other	11,500	17,990	29,490	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B).)				825,004

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(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) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, line 12, col.(B)).		

Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. 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. (Column (b) must equal Form 990, Part X, line 13, col. (B)).		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B)).	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LAST MONTH RENT	4,150
(3) SECURITY DEPOSIT	4,150
(4) SCHOLARSHIPS	31,105
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 25 col. (B)).	39,405

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements 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.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide 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 X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Item 7.

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|--|---|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

OMB No. 1545-0047

Item 7.

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (REPAIRS AND MAINTENANCE)	X		6,600	
26 Other (DUES AND SUBSCRIPTIONS)	X		225	
27 Other (MEMBERSHIP MISCELLANEOUS)	X		463	
28 Other (ADVERTISING)	X		21,720	

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

**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.

OMB No. 1545-0047

Item 7.

2023

**Open to Public
Inspection**

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

01. Officer, directors, etc. family relationship (Part VI, line 2)

INSURANCE IS PROVIDED TO BOARD MEMBER(S) BY OTHER BOARD MEMBERS

02. Form 990 governing body review (Part VI, line 11)

THE ORGANIZATION'S PROCESS IS TO HAVE FORM 990 REVIEWED BY THE ENTIRE BOARD OF DIRECTORS.

03. Conflict of interest policy compliance (Part VI, line 12c)

OFFICERS AND DIRECTORS ARE REQUIRED TO ANNUALLY SIGN A FORM THAT DISCLOSES ANY POTENTIAL
CONFLICTS OF INTEREST.

04. CEO, executive director, top management comp (Part VI, line 15a)

COMPENSATION PROCESS FOR TOP OFFICIAL, WHICH IS THE CHAMBER PRESIDENT, IS APPROVED BY THE
BOARD OF DIRECTORS AS A PART OF THE BUDGET PROCESS

05. Governing documents, etc, available to public (Part VI, line 19)

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

06. Explanation of other changes in net assets or fund balances (Part XI, line 9)

ADJ TO BRING RETURN INLINE WITH CASH BOOKS

07. List of other expenses (Part IX, line 24e)

COLLECTION EXPENSES, HEALTH COMMITTEE, FIRST FRIDAY, NETWORKING BREAKFAST, WOMENS
COMMITTEE, DUES AND SUBSCRIPTIONS, EMPLOYEE DEVELOPMENT, POSTAGE, INCOME TAX, TOMBALL
LEADERSHIP DAY, BANQUET, GOLF CLASSIC, TOMBALL NIGHT, HOLIDAY PARADE, MISS TOMBALL

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Item 7.

PAGEANT, SCHOLARSHIP EXPENSES.

Client Copy

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.**2023**Attachment
Sequence No. **179**

Name(s) shown on return GREATER TOMBALL AREA CHAMBER OF	Business or activity to which this form relates FORM 990 - 1	Identifying number 74-1495125
---	--	---

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	578

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2023	17	18,940
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	19,518
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.**2023**Attachment
Sequence No. **179**

Name(s) shown on return GREATER TOMBALL AREA CHAMBER OF	Business or activity to which this form relates FORM 990T - 1	Identifying number 74-1495125
---	---	---

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	9,953

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2023	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	9,953
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

IRS E-file Signature Authorization
for a Tax Exempt Entity

OMB No. 1545-0047

Item 7.

Department of the Treasury
Internal Revenue Service

For calendar year 2023, or fiscal year beginning , 2023, and ending , 20

2023

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

Name of filer

EIN or SSN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Name and title of officer or person subject to tax

BRUCE HILLEGEIST, PRESIDENT

Part I Type of Return and Return Information

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

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5).	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	6,152
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

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

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize PE CPA PLLC to enter my PIN 95125 as my signature

ERO firm name

Enter five numbers, but
do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date 06-24-2024

Part III Certification and Authentication

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

799164 68510

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date 07-30-2024

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

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 8879-TE

261

**IRS E-file Signature Authorization
for a Tax Exempt Entity**

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20

2023Department of the Treasury
Internal Revenue Service**Do not send to the IRS. Keep for your records.**
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

EIN or SSN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC**74-1495125**

Name and title of officer or person subject to tax

BRUCE HILLEGEIST, PRESIDENT**Part I Type of Return and Return Information**

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

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 932,466
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5).	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☐ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **PE CPA PLLC** to enter my PIN **95125** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____

Date **06-24-2024****Part III Certification and Authentication**

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

799164 68510**Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____

Date **07-30-2024**

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

Federal Supporting Statements

2023 PG01

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

990-T SCHEDULE A PART V - LINE 3B
OTHER DEDUCTIONS

Statement #13

Form 990-T Schedule A: OFFICE RENTAL

Property: OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

DESCRIPTION	AMOUNT
INTEREST	6,776
INSURANCE	3,186
TAXES	6,318
REPAIRS	6,121
CLEANING	3,842
ELECTRICITY	4,981
TOTAL	31,224

FOR YOUR RECORDS ONLY

PG01

FORM 990 - SCHEDULE D - PART VI - LINE 1E
INVESTMENTS - OTHER

STATEMENT #D1E

DESCRIPTION OF INVESTMENT	COST/BASIS (INVESTMENT)	COST/BASIS (OTHER)	DEPR	BOOK VALUE
BUILDOUT	11,500	0	11,294	206
FURNITURE	0	17,990	18,196	(206)
TOTAL	11,500	17,990	29,490	0

Federal Supporting Statements

2023

PG01

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

990-T Schedule A Part V - Dual-use Debt-financed Property Statement

Statement #14

Form 990-T Schedule A: OFFICE RENTAL

Property Discription	Avg. of Acquisition indebtedness	Percent allocable to debt-financed property	Avg. acquisition debt on debt-financed property	Adjusted basis	Percent Allocable to debt-financed debt-financed property	Adjusted basis allocable to debt-financed property
OFFICE RENTAL	135,916	100.00000%	135,916	154,611	100.000000%	154,611

990

Overflow Statement

(This page is not filed with the return. It is for your records only.)

2023

Page 1

Item 7.

Name(s) as shown on return

FEIN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

OTHER

Description	Amount
COLLECTION EXPENSES	\$ 8,094
CONTRACTOR	66,448
DUES	4,869
EMPLOYEE DEVELOPMENT	12,264
FIRST FRIDAY	37,020
GOLF CLASSIC	19,868
HEALTH COMMITTEE	11,046
HOLIDAY PARADE	25,726
INCOME TAX	10,542
NETWORKING BREAKFAST	1,617
POSTAGE	2,889
TOMBALL NIGHT	10,555
TOMBALL PAGEANT	14,541
WOMENS COMMITTEE	15,748
BANQUET	12,562
TOMBALL PAGEANT SCHOLARSHIPS	10,000
TOMBALL LEADERSHIP DAY	2,375
Total:	\$ 266,164

FORM 990-T - SCH E - LN 4 - AVERAGE ACQUISITION DEBT1

Description	Amount
AVERAGE ACQUISITION DEBT	\$ 135,916
Total:	\$ 135,916

FORM 990-T - SCH E - LN 5 - AVERAGE ADJUSTED BASIS

Description	Amount
AVERAGE BASIS	\$ 154,611
Total:	\$ 154,611

**Estimated Tax Worksheet on Unrelated Business
Taxable Income for Tax-Exempt Organizations**
(and on Investment Income for Private Foundations)

Item 7.

2024

(This page is not filed with the return. It is for your records only.)

1 Unrelated business taxable income expected in the tax year	1	
2 Tax on the amount on line 1. See instructions for tax computation	2	6,152
3 Alternative minimum tax for trusts. See instructions	3	
4 Total. Add lines 2 and 3	4	6,152
5 Estimated tax credits. See instructions	5	
6 Subtract line 5 from line 4	6	6,152
7 Other taxes. See instructions	7	
8 Total. Add lines 6 and 7	8	6,152
9 Credit for federal tax paid on fuels. See instructions	9	
10a Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	6,152
b Enter the tax shown on the 2023 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	6,152
c 2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	6,152

		(a)	(b)	(c)	(d)
11 Installment due dates. See instructions	11	04-15-2024	06-17-2024	09-16-2024	12-16-2024
12 Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	1,538	1,538	1,538	1,538
13 2023 Overpayment. See instructions	13	362	362	362	362
14 Payment due (Subtract line 13 from line 12)	14	1,176	1,176	1,176	1,176

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 7.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CITY OF TOMBALL 401 MARKET STREET TOMBALL TX 77375	38,394	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	HEALTH FOUNDATION 29201 QUINN RD STE A TOMBALL TX 77375	63,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ENVIROCON TERMITE & PEST, INC 23306 ROBERTS CEMETERY HOCKLEY TX 77447	6,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	HCA HOUSTON HEALTHCARE TOMBALL 605 HOLDERRIETH TOMBALL TX 77375	49,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	TOMBALL ECONOMIC DEVELOPMENT CORP PO BOX 820 TOMBALL TX 77377	29,937	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	SOUTHCOMM PUBLISHING CO. 7766 EWING BLVD., SUITE 200 FLORENCE KY 41042	12,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 7.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HOUSTON METHODIST WILLOWBROOK HOSPI 18220 SH 249 HOUSTON TX 77070	28,945	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	ALOHA NAILS & SPA 701 E MAIN STE 125B TOMBALL TX 77375	13,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	SHELL FEDERAL CREDIT UNION 6232 FM 2920 SPRING TX 77379	7,050	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	MEMORIAL HERMAN THE WOODLANDS 9250 PINECROFT DR SPRING TX 77380	5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	COMMUNITY MATTERS INC PO BOX 5900 FRISCO TX 75035	10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	KLEIN FUNERAL HOMES & MEMORIAL PARK 16131 CHAMPION FOREST SPRING TX 77379	7,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 7.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	TWFG INSURANCE SERVICES 722 W MAIN TOMBALL TX 77375	8,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	RSC RIVERSIDE CONSTRUCTION 210 SPRING CREEK TRAIL SPRING TX 77373	5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Depreciation Detail Listing

Program Services

(This page is not filed with the return. It is for your records only.)

2023

Program Services

PAGE 1

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return

Social security number/EIN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

270

937,450

CY 179 and CY Bonus
TOTAL CY Depr including 179/bonus

ST ADJ:

990 T
(This page is not filed with the return. It is for your records only.)

2023 Item 7.

PAGE 1

(This page is not filed with the return. It is for your records only.)

Social security number/EIN

74-1495125

271

CY 179 and CY Bonus		ST ADJ:
TOTAL CY Depr including 179/bonus	9,953	

Next Year's Depreciation Worksheet

(This page is not filed with the return. It is for your records only.)

Item 7.

2023

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	COMPUTER & SERVER EQUIPM	10-14-2013	15,503		5	
PRG	1	BUILDING - QUINN ROAD	09-30-2008	531,026	SL MM	39	13,616
PRG	1	IMPROVEMENTS	10-31-2008	203,369	SL MM	39	5,215
PRG	1	A/C UNIT	03-27-2012	4,300	SL MM	39	110
PRG	1	LAND	10-31-2008			0	
T	1	BUILDING (RENTAL PORTION	09-30-2008	354,018	SL MM	39	9,077
T	1	BUILDOUT - TOMBALL REG H	12-01-2012	11,500	SL MQ	15	767
T	1	A/C UNIT (RENTAL)	06-27-2014	4,245	SL MM	39	109
PRG	1	2017 LAPTOP	12-05-2017	851		5	
PRG	1	PHONE SYSTEM	09-04-2001	6,976		7	
PRG	1	FURNITURE	11-01-2008	17,990		7	
PRG	1	QUINN BLDG IMPROVEMENTS	12-01-2012	3,925	SL MM	39	101
PRG	1	2019 PHONE SYSTEM	01-31-2019	6,126		3	
PRG	1	2020 COMPUTER	03-15-2020	1,165	SL HY	5	233
PRG	1	2022 COMPUTER	09-22-2022	1,219	SL HY	5	244
		TOTAL					29,472

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545

Item 7.

2023

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

A Name of the organization GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC	B Employer identification number 74-1495125
C Unrelated business activity code (see instructions) 531190	D Sequence: 1 of 1

E Describe the unrelated trade or business **OFFICE RENTAL**

Part I	Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
c	Balance	1c		
2	Cost of goods sold (Part III, line 8)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a		
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from a partnership or an S corporation (attach statement)	5		
6	Rent income (Part IV)	6		
7	Unrelated debt-financed income (Part V)	7	67,698	27,448
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10	Exploited exempt activity income (Part VIII)	10		
11	Advertising income (Part IX)	11		
12	Other income (see instructions; attach statement)	12		
13	Total. Combine lines 3 through 12	13	67,698	27,448
				40,250

Part II	Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income.			
1	Compensation of officers, directors, and trustees (Part X)	1		
2	Salaries and wages	2		
3	Repairs and maintenance	3		
4	Bad debts	4		
5	Interest (attach statement). See instructions	5		
6	Taxes and licenses	6		
7	Depreciation (attach Form 4562). See instructions	7	9,953	
8	Less depreciation claimed in Part III and elsewhere on return	8a		9,953
9	Depletion	9		
10	Contributions to deferred compensation plans	10		
11	Employee benefit programs	11		
12	Excess exempt expenses (Part VIII)	12		
13	Excess readership costs (Part IX)	13		
14	Other deductions (attach statement)	14		
15	Total deductions. Add lines 1 through 14	15		9,953
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		30,297
17	Deduction for net operating loss. See instructions	17		
18	Unrelated business taxable income. Subtract line 17 from line 16.	18		30,297

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

EEA

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐ OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

B ☐

C ☐

D ☐

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)				
4 Deductions directly connected with the income in lines 2a and 2b (attach statement)				
5 Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)				

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐ OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

B ☐

C ☐

D ☐

	A	B	C	D
2 Gross income from or allocable to debt-financed property	77,010			
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement) Statement #13	31,224			
c Total deductions (add lines 3a and 3b, columns A through D)	31,224			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Statement #14	135,916			
5 Average adjusted basis of or allocable to debt-financed property (attach statement) Statement #14	154,611			
6 Divide line 4 by line 5	87.90800 %	%	%	%
7 Gross income reportable. Multiply line 2 by line 6	67,698			
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	67,698			
9 Allocable deductions. Multiply line 3c by line 6	27,448			
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	27,448			
11 Total dividends - received deductions included in line 10				

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Totals

Add columns 5 and 10. Enter here and on Part I, line 8, column (A).

Add columns 6 and 11. Enter here and on Part I, line 8, column (B).

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

Add amounts in column 2. Enter here and on Part I, line 9, column (A).

Add amounts in column 5. Enter here and on Part I, line 9, column (B).

Totals**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity:	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5	Gross income from activity that is not unrelated business income	5
6	Expenses attributable to income entered on line 5	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Part IX	Advertising Income
----------------	---------------------------

- 1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
- A ☐ _____
- B ☐ _____
- C ☐ _____
- D ☐ _____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)				
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter -0- on line 8				
5 Readership costs				
6 Circulation income				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter -0-				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a Add line 8, columns A through D. Enter the greater of the line 8a columns total or -0- here and on Part II, line 13				

Part X	Compensation of Officers, Directors, and Trustees (see instructions)
---------------	---

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

Part XI	Supplemental Information (see instructions)
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City Council Meeting Agenda Item Data Sheet

Meeting Date: August 26, 2025

Topic:

Consideration of the application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Tomball Night.

Background:

Application for FY 2025-2026 Hotel Occupancy Tax Funds for the Greater Tomball Area Chamber of Commerce for the Tomball Night.

Origination: Marketing and Finance

Recommendation:

Staff recommends the Committee proceed with the consideration of this application.

Party(ies) responsible for placing this item on agenda: Bragg Farmer, Finance Director

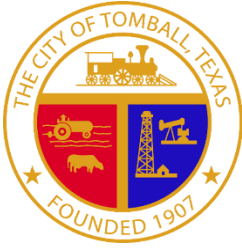
FUNDING (IF APPLICABLE)

Are funds specifically designated in the current budget for the full amount required for this purpose?

Yes: _____ No: _____ If yes, specify Account Number: # _____

If no, funds will be transferred from account: # _____ To Account: # _____

Signed: Bragg Farmer 8/19/25 **Approved by:** _____
 Staff Member Date City Manager Date



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026

Introduction

Through the adoption of a municipal hotel occupancy tax, the City of Tomball is responsible for promoting tourism and the hotel industry in compliance with the State of Texas Hotel Occupancy Code; Chapter 351, Subchapter B – Use and Allocation of Revenue. The City has the authority to use local hotel funds tax funds in a variety of methods, including the granting of funds to support local events and organizations.

Eligible Uses for Hotel Occupancy Tax Funds

The revenue derived from the municipal hotel occupancy tax may only be used to promote tourism and the convention and hotel industry in the community. The following are eligible uses for Tomball's HOT funds:

1. The acquisition of sites for and the construction, improvement, enlarging, equipping, repairing, operation, and maintenance of convention center facilities or visitor information centers or both;
2. The furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;
3. Advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;
4. The encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion pictures, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms;
5. Historical restoration and preservation projects or activities or advertising and conducting solicitations and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums that:
 - a. Are at or in the immediate vicinity of convention center facilities or visitor information centers; or
 - b. Located elsewhere in the municipality or its vicinity that would be frequented by tourists and convention delegates;
6. The day-to-day operations, supplies, salaries, office rental, travel expenses, and other administrative costs ONLY if those administrative costs are incurred directly in the promotion and servicing of those authorized expenditures listed in 1-5 above;
7. Signage directing the public to sights and attractions that are visited frequently by hotel guests in the municipality.

Tourists are defined in Chapter 351 as an individual who travels from the individual's residence to a different municipality, county, state, or country for pleasure, recreation, education, or culture. Tourism is defined as the guidance or management of tourists.

City Policy

Any organization requesting the use of City of Tomball Municipal Hotel Occupancy Tax funds for an event or program that qualifies as an authorized use of funds as listed above must complete the "Application for Use of Hotel Occupancy Tax" as part of the annual grant application process. All requests for funding must be approved by the City of Tomball City Council. Only one project may be requested per application. Applications for annual events must be submitted each year. Funding approved in one year does not guarantee funding in subsequent years.

Approved funding will be paid to approved grantee organizations on a reimbursement basis and will not be paid in advance. The reimbursement paid to the organization will be based on the lesser of the actual costs or the amount originally approved.

Reporting Requirements

Subsequent to the event/purpose for which occupancy tax funding was approved, the organization receiving the funds shall submit a full accounting of the event/purpose and specifically highlight the costs to be reimbursed by the hotel occupancy tax. In addition to the financial accounting of the event/purpose, the report shall also include a narrative describing how the event/purpose directly enhanced or promoted tourism and the convention and hotel industry in Tomball as well as the projected number of tourists or convention delegates coming to Tomball as a result of the event/purpose and the basis for the projection. If the event/purpose is one that is ongoing throughout the year, the financial and narrative report shall be updated and submitted on a quarterly basis.

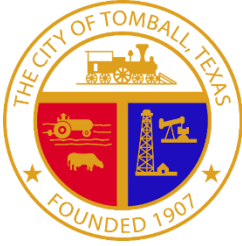
Expenditure or Quarterly Reports shall be submitted as follows:

BY MAIL OR IN-PERSON

City of Tomball
ATTN: Director of Finance
501 James Street
Tomball, TX 77375

VIA EMAIL

Finance@tomballtx.gov



City of Tomball
Hotel Occupancy Tax Grant Program
Funding Year: October 1, 2025 through September 30, 2026
Application for Use of Hotel Occupancy Tax

The City of Tomball is accepting applications for Hotel Occupancy Tax Grants for the funding period of **October 1, 2025 through September 30, 2026.**

The deadline to submit an application is 5:00 p.m., Friday, June 27, 2025.

Completed applications must be submitted to the City of Tomball by the application deadline. Applications can be submitted via email to Finance@tomballtx.gov or in-person/by mail to the City of Tomball Finance Department, 501 James St., Tomball, TX 77375. Mailed applications must be received by the City before the deadline to be considered.

For additional information or questions, please contact Perla Carrasco at (281) 290-1420 or PCarrasco@tomballtx.gov.

Section I: Organization Information

Name of Organization/Business: Greater Tomball Area Chamber of Commerce

Street Address: 29201 Quinn Road, Ste. B

City: Tomball State: TX Zip Code: 77375

Contact Name: Brandy Beyer

Role with Organization/Business: Vice President

Phone Number: 281.351.7222 Email: bbeyer@tomballchamber.org

Type of Organization/Business ☐ Private/For Profit ☒ Non-Profit

Purpose of Organization/Business:

The Greater Tomball Area Chamber of Commerce provides resources and fosters relationships that empower businesses to prosper in Tomball and its surrounding communities.

Section II: Event/Program Information

Event/Program Name: Tomball Night

Date(s) of Event/Program: August 7, 2026

Location of Event/Program (Provide the address or a general location):

Main Street and Market Street

Website for Event/Program: www.tomballchamber.org

Is this a new event/program? ☐ Yes ☒ No

If this is not a new event/program, how long has the event/program operated?

This will be the 54th annual Tomball Night.

Provide a detailed description of the event/program.

community festival with over 90 vendors downtown, Parade of Lights and fireworks

Estimated Local Attendees at Event/Program: 7,000

Estimated Out of Town Attendees at Event/Program: 3,000

Section III: Funding/Expenditure Information

Amount of grant funding requested for event/program.	\$ 15,000
Total operating budget for event/program.	\$ 46,950
Percent of event/program to be funded by grant.	32 %
Total funding dedicated to advertising or promotion of the event/program, including both grant funded and non-grant funded expenditures.	\$ 5,000

Provide a detailed description of how grant funds will be used if approved (additional pages can be added if necessary).

advertising, portapotties, equipment rentals and fireworks

Please indicate all promotion/advertising efforts your organization will use to alert visitors to the event/project/program.

<input checked="" type="checkbox"/> Paid Advertising	<input checked="" type="checkbox"/> Radio	<input type="checkbox"/> Television	<input type="checkbox"/> Brochures
<input checked="" type="checkbox"/> Social Media	<input checked="" type="checkbox"/> Newspaper	<input checked="" type="checkbox"/> Online/Digital Ads	<input checked="" type="checkbox"/> Press Release
<input type="checkbox"/> Other (please specify) _____			

Provide a description of how you intend to advertise or promote your event/program to gain overnight stays in Tomball.

This event draws crowds from all around - as part of our larger mission, we always encourage participants and attendees to stay in the area and discover Tomball. We request that local business owners promote the evening and themselves as to keep money local as well as encourage event patrons to shop all weekend with businesses having weekend sales.

How will you measure the impact of your event on local overnight accommodations?

Many vendors/entries for Tomball Night and Parade of Lights come from out of town and will choose to stay in Tomball following the long evening event, and for the weekend to enjoy their visit to Tomball. Attendees choose to make a long weekend that starts with Tomball Night, as a getaway prior to the start of the school year.

Section IV: Certification of Approved Use of HOT Funds

All requested HOT Fund grants/expenditures must meet both parts of the statutory Hotel Occupancy Tax Test. This means that all grant expenditures must 1) directly enhance and promote tourism and directly promote overnight hotel stays AND 2) fall within one of the statutorily approved expenditure categories.

1. Does your event/program expenditure pass “Part One” of the statutory Hotel Occupancy Tax test listed below?

Part One Test: Expenditure directly enhances and promotes tourism in Tomball and directly promotes the overnight accommodation industry in Tomball by increasing overnight stays.

- ☒ YES, the event/program expenditure meets the Part One test.
☐ NO, the event/program expenditure does not meet the Part One test.

2. Does your event/program expenditure pass “Part Two” of the statutory Hotel Occupancy Tax test, defined specifically as limiting the use of Hotel Occupancy Tax funds to one or more of the following categories?

Select all categories that apply:

- ☐ Establishment, improvement, or maintenance of a convention or visitor center.
☐ Administrative cost for facilitating convention registration.
☒ Advertising, solicitations, and promotions that attract tourists or convention delegates.
☐ Encouragement, promotion, improvement, and application of the arts.
☐ Historical restoration or preservation programs.
☐ Signage directing tourists to attractions visited by hotel guests.
☐ None of the above.

Section V: Required Supplemental Information

To complete the grant application, the following additional documents are required:

1. Itemized budget of expenditures for grant funds.
2. Organization’s most recent annual budget.
3. Organization’s most recent financial statements. **Audited financial statements must be provided for any grant request exceeding \$100,000.**
 - a. Financial statements should include the organization’s balance sheet and income statement for the most recently completed fiscal year.
4. List of Board of Directors/Event Committee with contact information.
5. IRS Form W-9 (only required if the correct W-9 is not already on file with the City of Tomball).
6. Any other information that supports the grant request.

Section VI: Acknowledgements and Signature

1. Applicant has read all information provided as part of this application packet and understands and will comply with all provisions herein.
2. Applicant is authorized by the associated business/organization to submit this grant application for the event/program described herein.
3. Applicant intends to use the grant for the event/program that has been applied for and will communicate with the City of Tomball immediately if any changes in the event/program occur.
4. Applicant will abide by all relevant local, state, and federal laws and regulations regarding the use of Hotel Occupancy Taxes.
5. Applicant will use grant funds to directly enhance and promote tourism and the hotel industry by attracting visitors from outside of Tomball to stay overnight in one of Tomball's lodging facilities.
6. Applicant understands that all grant funds are provided on a reimbursement basis and only proven eligible expenses will be reimbursed.
7. Applicant acknowledges that if grant funds are awarded, the event/program organizers agree to allow the financials of the event/program to be viewed at any time by the City of Tomball prior to receiving reimbursement for the event.
8. All required supplemental information is attached to this grant application.

Applicant Signature: Brandy Beyer  Digitally signed by Brandy Beyer
Date: 2025.07.08 16:36:10 -05'00'

Applicant Printed Name: Brandy Beyer

Date of Application: 7/8/2025

2026 Tomball Night Budget

Port-o-Pottie	2,000.00
Fireworks	5,500.00
Shopper CASH	1,000.00
Advertising	5,000.00
Supplies	700.00
Debriefing Meeting	250.00
Rentals	2,500.00
Personnel	30,000.00

Total Expenses: 46,950.00

Grant Request:	15,000.00
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Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 8.

	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	TOTAL Jan - Dec 25
Ordinary Income/Expense													
Income													
Income													
Rent Income	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	6,216.00	74,592.00
Capital Campaign	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	36,000.00
Health & Wellness	1,500.00	1,000.00		1,500.00	3,000.00	4,000.00	1,000.00	3,000.00	2,000.00	3,000.00			20,000.00
Hotel/Motel Tax									45,000.00				45,000.00
First Friday	3,500.00	3,500.00	3,500.00	3,000.00	3,000.00	3,000.00	2,000.00	3,000.00	3,500.00	3,000.00	3,000.00	3,000.00	37,000.00
Networking Breakfast	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	450.00	450.00	500.00	500.00	5,100.00
Women's Committee	0.00	1,000.00	1,500.00	1,500.00	1,000.00	1,000.00	0.00	0.00	13,000.00	0.00	0.00	1,000.00	20,000.00
Interest Income	2,500.00	200.00	200.00	3,000.00	200.00	200.00	3,000.00	200.00	200.00	3,000.00	200.00	200.00	13,100.00
Membership Dues													
New	10,000.00	10,000.00	7,000.00	7,000.00	7,000.00	7,000.00	7,000.00	10,000.00	10,000.00	10,000.00	10,000.00	5,000.00	100,000.00
Allowance Non-Renewal	-6,227.83	-7,412.58	-3,473.08	-4,129.33	-2,466.83	-3,250.08	-3,133.58	-3,578.08	-4,010.33	-4,900.58	-3,271.83	-2,961.58	-48,815.75
Renewal	62,278.33	74,125.83	34,730.83	41,293.33	24,668.33	32,500.83	31,335.83	35,780.83	40,103.33	49,005.83	32,718.33	29,615.83	488,157.46
Total Membership Dues	66,050.50	76,713.25	38,257.75	44,164.00	29,201.50	36,250.75	35,202.25	42,202.75	46,093.00	54,105.25	39,446.50	31,654.25	539,341.71
Miscellaneous Income	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	220.00	2,640.00
Publications/Products													
Magazine/Map/Website		400.00		1,000.00	15,000.00		500.00	6,000.00		4,000.00	1,100.00		28,000.00
Total Publications	0.00	400.00	0.00	1,000.00	15,000.00	0.00	500.00	6,000.00	0.00	4,000.00	1,100.00	0.00	28,000.00
Special Events													
Banquet	10,000.00	20,000.00											30,000.00
Golf Classic		10,000.00	20,000.00	5,000.00		5,000.00							40,000.00
Family Reunion					5,000.00								
Tomball Night						10,000.00	22,000.00	5,000.00					37,000.00
Holiday Parade						15,000.00			3,000.00	15,000.00	12,000.00		45,000.00
Miss Tomball Pageant									2,000.00	15,000.00	13,000.00		30,000.00
Total Special Events	10,000.00	30,000.00	20,000.00	5,000.00	5,000.00	30,000.00	22,000.00	5,000.00	5,000.00	30,000.00	25,000.00	0.00	187,000.00
Total Income	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Total Income	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Gross Profit	93,386.50	122,649.25	73,293.75	69,000.00	66,237.50	84,286.75	73,538.25	69,238.75	124,679.00	106,991.25	78,682.50	45,790.25	1,007,773.71
Expense													
Building Expense													
Cleaning	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	740.00	8,880.00
Electricity	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	1,055.00	12,660.00
Building Interest	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	1,475.00	17,700.00
Reimbursed by tenants	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-1,728.00	-20,736.00
Repairs/Maintenance	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	12,000.00
Total Building Expense	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	2,542.00	30,000.00

Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 8.

	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	TOTAL Jan - Dec 25
Accounting Expense	4,000.00	7,500.00	4,000.00			2,500.00							18,000.00
Advertising							2,000.00	3,000.00		1,000.00	4,000.00		10,000.00
Bad Debt Expense	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00	10,000.00	4,000.00	20,000.00	70,000.00
Health & Wellness		1,500.00			1,500.00			5,000.00	2,000.00	4,000.00			14,000.00
First Friday	3,000.00	3,500.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,000.00	3,500.00	3,000.00	3,000.00	37,000.00
Networking Breakfast	200.00	200.00	200.00	100.00	150.00	200.00	100.00	100.00	200.00	200.00	150.00	200.00	2,000.00
Women's Committee		500.00	500.00	500.00	500.00	1,000.00	0.00	0.00	2,000.00	0.00	0.00	10,500.00	15,500.00
Young Professionals	200.00			200.00			200.00			200.00			800.00
Bank Fees	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	1,350.00	16,200.00
Board of Directors	500.00								3,000.00	3,700.00	300.00		7,500.00
Dues and Subscriptions	1,150.00				500.00			750.00				1,112.00	3,512.00
Employee Expense													
SUTA	1,700.00	600.00											2,300.00
Development	600.00	1,600.00		3,000.00	0.00	4,000.00	3,000.00	1,000.00	300.00	1,500.00			15,000.00
FUTA	140.00	30.00											170.00
Group Insurance	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	3,450.00	4,000.00	4,000.00	4,000.00	4,000.00	43,600.00
Cell Phone Allowance	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	420.00	5,040.00
Payroll Services	550.00	600.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	550.00	6,650.00
Payroll Taxes	2,080.00	2,100.00	2,100.00	2,080.00	2,080.00	2,080.00	2,080.00	2,100.00	2,080.00	2,080.00	2,150.00	3,200.00	26,210.00
Salaries													
TACC	36,166.25	37,716.25	36,166.25	37,716.25	36,166.25	36,166.25	36,166.25	37,716.25	36,166.25	36,166.25	38,716.25	36,166.25	441,195.00
Bonus												18,265.00	18,265.00
Total Salaries	36,166.25	37,716.25	36,166.25	37,716.25	36,166.25	36,166.25	36,166.25	37,716.25	36,166.25	36,166.25	38,716.25	54,431.25	459,460.00
Total Employee Expense	45,106.25	46,516.25	42,686.25	47,216.25	42,666.25	46,666.25	45,666.25	45,236.25	43,516.25	44,716.25	45,836.25	62,601.25	558,430.00
Insurance													
Worker's Compensation	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	47.58	570.96
Officer & Director Liability	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	146.83	1,761.96
General Liab.	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	712.67	8,552.04
Total Insurance	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	907.08	10,884.96
Membership/Misc. Expense	10,000.00	5,000.00	2,500.00	2,000.00	800.00	500.00	1,000.00	1,000.00	500.00	600.00	800.00	4,000.00	28,700.00
Office Equipment Expense													
Database	6,250.00												6,250.00
Computer Maintenance	400.00	400.00	1,000.00	400.00	400.00	1,500.00	400.00	400.00	400.00	400.00	400.00	400.00	6,500.00
Copier Lease	600.00	800.00	800.00	700.00	700.00	700.00	500.00	600.00	400.00	800.00	800.00	600.00	8,000.00
Pitney Bowes			600.00			600.00			600.00			600.00	2,400.00
Total Office Equip Expense	7,250.00	1,200.00	2,400.00	1,100.00	1,100.00	2,800.00	900.00	1,000.00	1,400.00	1,200.00	1,200.00	1,600.00	23,150.00
Office Supplies	700.00	5,000.00	500.00	700.00	500.00	500.00	600.00	800.00	250.00	500.00	250.00	200.00	10,500.00
Postage & Delivery	500.00	0.00	1,000.00	0.00	0.00	0.00	500.00	500.00	0.00	0.00	0.00	0.00	2,500.00
Property Tax Expense	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	1,455.75	17,469.00
Income Tax Expense	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	633.42	7,600.00

Greater Tomball Area Chamber of Commerce
2025 Budget Overview
January through December 2025

Item 8.

	TOTAL												
	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan - Dec 25
Rent	145.00	145.00	145.00	145.00	145.00	145.00	160.00	160.00	160.00	160.00	160.00	160.00	1,830.00
Special Events													
Banquet		12,000.00	1,000.00										13,000.00
Golf Classic			1,000.00	18,000.00									19,000.00
Family Reunion					5,000.00								
Tomball Night							1,000.00	11,000.00					12,000.00
Holiday Parade									1,000.00	1,000.00	21,000.00	1,000.00	24,000.00
Miss Tomball Pageant													
Scholarship Expense											13,000.00		13,000.00
Pageant - Other											5,000.00	2,000.00	7,000.00
Total Miss Tomball										0.00	18,000.00	2,000.00	20,000.00
Total Special Events	0.00	12,000.00	2,000.00	18,000.00	5,000.00	0.00	1,000.00	11,000.00	1,000.00	1,000.00	39,000.00	3,000.00	93,000.00
Telephone Expenses	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	560.00	6,720.00
Travel & Entertainment	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	80.00	960.00
Total Expense	84,279.50	94,589.50	70,459.50	84,489.50	67,389.50	68,839.50	66,654.50	83,074.50	68,554.50	78,304.50	106,224.50	113,901.50	986,761.00
Net Ordinary Income	9,107.00	28,059.75	2,834.25	-15,489.50	-1,152.00	15,447.25	6,883.75	-13,835.75	56,124.50	28,686.75	-27,542.00	-68,111.25	21,012.71
Principal Building Payment	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	3,750.00	45,000.00
xDepreciation Expense	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	1,813.00	21,756.00
Net Income	3,544.00	22,496.75	-2,728.75	-21,052.50	-6,715.00	9,884.25	1,320.75	-19,398.75	50,561.50	23,123.75	-33,105.00	-73,674.25	-45,743.29

Greater Tomball Area Chamber of Commerce

Independent Auditors' Report and Financial Statements
for the Year Ended December 31, 2024 (Audited)
(with comparative totals for 2023 - Reviewed)



Tipton & Company
CERTIFIED PUBLIC ACCOUNTANTS

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INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Greater Tomball Area Chamber of Commerce
Tomball, Texas

We have audited the accompanying financial statements of Greater Tomball Area Chamber of Commerce (a nonprofit organization), which comprise the statement of financial position as of December 31, 2024, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Greater Tomball Area Chamber of Commerce as of December 31, 2024, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Greater Tomball Area Chamber of Commerce and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Greater Tomball Area Chamber of Commerce's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Greater Tomball Area Chamber of Commerce's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Greater Tomball Area Chamber of Commerce's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Report on Summarized Comparative Information

The 2023 financial statements were reviewed by us and our report thereon, dated March 4, 2024, stated we were not aware of any material modifications that should be made to those financial statements for them to be in conformity with accounting principles generally accepted in the United States of America. However, a review is substantially less in scope than an audit and does not provide a basis for the expression of an opinion on the financial statements. The summarized comparative information presented herein as of and for the year ended December 31, 2023, is consistent, in all material respects, with the reviewed financial statements from which it has been derived.

Tipton & Company LLC

Tipton & Company LLC
Certified Public Accountants
Houston, Texas

March 12, 2025

Greater Tomball Area Chamber of Commerce

Statement of Financial Position

As of December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Assets		
Cash and cash equivalents	\$ 132,986	\$ 223,989
Certificate of deposit	320,289	309,821
Accounts receivable, net	64,847	44,907
Prepaid expenses	10,677	10,291
Property and equipment, net	796,220	825,005
Total Assets	\$ 1,325,019	\$ 1,414,013
Liabilities and Net Assets		
Liabilities		
Accrued expenses	\$ 30,248	\$ 31,031
Deferred revenues	192,315	192,315
Note payable	240,362	381,706
Deposits	4,150	8,300
Total Liabilities	467,075	613,352
Net Assets		
Without donor restrictions	857,944	800,661
Total Net Assets	857,944	800,661
Total Liabilities and Net Assets	\$ 1,325,019	\$ 1,414,013

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Statement of Activities

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Year ended December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Without Donor Restrictions		
Revenue and Support		
Membership dues	\$ 513,014	\$ 483,928
Special events revenue	208,974	204,015
Direct benefit to donor	(26,578)	(22,952)
Capital improvement campaign	30,000	36,000
First Friday luncheon	33,225	42,420
Networking Breakfast	5,245	5,375
Women's Committee	15,712	26,350
City of Tomball hotel tax revenue	45,000	35,000
Rental income	66,285	64,624
Tenant reimbursements	15,086	12,386
Ads and ad commission	18,334	25,400
Contributed nonfinancial assets	9,470	29,008
Interest and investment income	12,494	12,619
Other income	49,187	16,733
Total Revenue and Support	995,448	970,906
Expenses		
Program Services		
Business resources	339,930	325,812
Advocacy	335,393	328,349
Total Program Services	675,323	654,161
Supporting Services		
General and administrative	123,028	127,020
Fundraising	139,814	137,210
Total Supporting Services	262,842	264,230
Total Expenses	938,165	918,391
Change in Net Assets	57,283	52,515
Net Assets, Beginning of Year	800,661	748,146
Net Assets, End of Year	\$ 857,944	\$ 800,661

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Item 8.

Statement of Functional Expenses

Year ended December 31, (with comparative totals for 2023)	Program Services			Supporting Services			Audited 2024 Total	Reviewed 2023 Total
	Business Resources	Advocacy	Total Program Services	General and Administrative	Fundraising	Total Supporting Services		
Payroll and related expenses								
Salaries	\$ 138,831	\$ 138,831	\$ 277,662	\$ 34,708	\$ 34,708	\$ 69,416	\$ 347,078	\$ 312,048
Payroll taxes	11,473	11,473	22,946	2,868	2,868	5,736	28,682	26,044
Employee benefits	16,974	16,974	33,948	4,244	4,244	8,488	42,436	37,278
Total payroll and related expenses	167,278	167,278	334,556	41,820	41,820	83,640	418,196	375,370
Other expenses								
Advertising	1,194	1,194	2,388	1,194	8,355	9,549	11,937	26,922
Bad debt	19,043	19,043	38,086	19,043	19,042	38,085	76,171	69,471
Bank fees	1,457	1,457	2,914	5,829	5,829	11,658	14,572	13,532
Board expenses	-	-	-	8,824	-	8,824	8,824	6,305
Computer maintenance	2,638	2,638	5,276	659	659	1,318	6,594	4,642
Contract labor	22,596	22,596	45,192	5,649	5,649	11,298	56,490	66,448
Depreciation	11,514	11,514	23,028	2,878	2,879	5,757	28,785	30,115
Dues and subscriptions	1,454	1,454	2,908	364	364	728	3,636	4,870
Employee development	6,606	6,606	13,212	1,651	1,651	3,302	16,514	12,264
Equipment lease	4,480	4,480	8,960	1,120	1,120	2,240	11,200	12,212
First Friday	33,831	-	33,831	-	-	-	33,831	37,020
Health committee	13,281	-	13,281	-	-	-	13,281	11,046
Insurance	4,200	4,200	8,400	1,050	1,050	2,100	10,500	10,306
Interest	8,536	8,536	17,072	2,134	2,133	4,267	21,339	16,940
Miscellaneous	6,321	7,460	13,781	5,595	-	5,595	19,376	21,062
Networking breakfast	2,580	-	2,580	-	-	-	2,580	1,617
Office supplies	2,222	2,222	4,444	556	556	1,112	5,556	5,692
Payroll service	2,581	2,581	5,162	645	645	1,290	6,452	5,880
Postage and delivery	572	286	858	286	763	1,049	1,907	2,888
Professional fees	-	-	-	10,100	-	10,100	10,100	16,005
Rent	665	665	1,330	166	166	332	1,662	1,482
Repairs and maintenance	7,191	7,191	14,382	1,798	1,798	3,596	17,978	25,194
Software	2,291	2,291	4,582	572	572	1,144	5,726	5,986
Special events	2,514	36,626	39,140	-	67,620	67,620	106,760	95,802
Taxes - income	-	-	-	6,613	-	6,613	6,613	10,542
Taxes - property	6,988	6,988	13,976	1,747	1,746	3,493	17,469	15,796
Telephone	2,787	2,787	5,574	697	697	1,394	6,968	7,014
Travel and entertainment	-	-	-	760	-	760	760	720
Utilities	5,110	5,110	10,220	1,278	1,278	2,556	12,776	12,452
Womens Committee	-	10,190	10,190	-	-	-	10,190	15,748
Total other expenses	172,652	168,115	340,767	81,208	124,572	205,780	546,547	565,973
Subtotal	339,930	335,393	675,323	123,028	166,392	289,420	964,743	941,343
Less: Direct benefit to donor	-	-	-	-	(26,578)	(26,578)	(26,578)	(22,952)
Total Expenses	\$ 339,930	\$ 335,393	\$ 675,323	\$ 123,028	\$ 139,814	\$ 262,842	\$ 938,165	\$ 918,391

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Statement of Cash Flows

Item 8.

Year Ended December 31, (with comparative totals for 2023)	Audited 2024	Reviewed 2023
Cash Flows From Operating Activities		
Change in net assets	\$ 57,283	\$ 52,515
Adjustments to reconcile change in net assets to net change in operating activities:		
Unrealized (gain)/loss on certificate of deposit	289,530	(9,821)
Depreciation	28,785	30,115
Bad debt expense	76,171	69,471
Changes in assets and liabilities:		
Accounts receivable	(96,111)	(79,129)
Prepaid expenses	(386)	(193)
Accrued expenses	(783)	2,302
Deferred revenues	-	16,517
Other Liabilities	(4,150)	-
Total Adjustments	293,056	29,262
Net Change in Operating Activities	350,339	81,777
Cash Flows From Investing Activities		
Purchases of certificate of deposit	(300,000)	(300,000)
Purchases of property and equipment	-	-
Net Change in Investing Activities	(300,000)	(300,000)
Cash Flows From Financing Activities		
Payments on note payable	(141,345)	(145,876)
Net Change in Financing Activities	(141,345)	(145,876)
Net Change in Cash and Cash Equivalents	(91,006)	(364,099)
Cash and Cash Equivalents, beginning of year	223,989	588,088
Cash and Cash Equivalents, end of year	\$ 132,983	\$ 223,989
Supplemental Disclosures:		
Interest paid	\$ 21,339	\$ 16,940
Federal income taxes paid	\$ 6,613	\$ 10,542

The accompanying notes are an integral part of these financial statements.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

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NOTE 1 – NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

The Greater Tomball Area Chamber of Commerce (the “Chamber”) is a not-for-profit organization of citizens who are investing their time and money in a community development program working together to improve the economic, civic, and cultural fortitude of the region, community, or area. The Chamber’s mission is to provide resources and foster relationships that empower businesses to prosper in Tomball and its surrounding communities.

The Chamber is supported through membership dues, contributions, rental income and other miscellaneous revenue. The Chamber conducts the following programs:

- *Business resources* – The Business Resources Division is dedicated to providing and promoting value added, quality networking events to the Chamber’s diverse membership, by ensuring inclusion through new member mentorship programs and by presenting opportunities for personal and business growth. This division invites members to become involved in the Chamber’s programs that will allow relationships to be formed and sustained through a variety of networking events.
- *Advocacy* – The Advocacy Division is committed to being a strong voice for the Chamber’s members and the greater Tomball area community. This will be accomplished by addressing public policy issues with participation from the public, members and elected officials, and holding open discussions about issues that affect the business community including: economic development, education, workforce development, energy and healthcare.

Basis of Accounting

The financial statements of the Chamber have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

The Chamber reports information regarding its financial position and activities according to two classes of net assets that are based upon the existence or absence of restrictions on use that are placed by its donors: net assets without donor restrictions and net assets with donor restrictions.

- *Net assets without donor restrictions* are resources available to support operations and not subject to donor restrictions. The only limits on the use of net assets without donor restrictions are the broad limits resulting from the nature of the Chamber, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations. Assets restricted solely through the actions of the Board of Directors are reported as net assets without donor restrictions, board-designated.
- *Net assets with donor restrictions* are resources that are subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or use for a purpose specified by the donor. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-restricted endowment earnings are

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

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released when those earnings are appropriated with spending policies and are used for the specified purpose.

Cash and Cash Equivalents

The Chamber considers all monies in banks and highly liquid investments with maturities of three months or less from the date of purchase to be cash and cash equivalents. The carrying values of any cash and cash equivalents are deemed to approximate their fair values because of the short maturities of those financial instruments.

Certificates of Deposit

The Chamber has a certificate of deposit, bearing interest at 3.00%, maturing January 2025 with an early withdrawal penalty of 360 days of interest. It was renewed again in January 2025 with the same interest rate, maturing January 2026. The total balance of the certificate of deposit at December 31, 2024 and 2023 is \$320,289 and \$309,821, respectively.

Accounts Receivable

Accounts receivable are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectible amounts through a provision for bad debt expense and an adjustment to a valuation allowance based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. At December 31, 2024 and 2023, the allowance for bad debts was \$7,021 in both years.

Property and Equipment

The Chamber capitalizes all expenditures for property, plant and equipment in excess of \$500. Maintenance and repairs are charged to operations when incurred. Major improvements and renewals that extend the life of the asset are capitalized. Purchased property, plant and equipment are carried at cost and are depreciated using the straight-line method based on their estimated useful lives as follows:

Buildings and improvements	39 years
Computers and software	3-5 years
Office equipment	5-7 years
Furniture and fixtures	5-7 years

Contributed Nonfinancial Assets

Donated goods are recognized at fair value as contributions when an unconditional commitment is received from the donor. The related expense is recognized as the item is used or sold. All donated goods were utilized by the Organization's programs and supporting services. There were no donor-imposed restrictions associated with the donated services and assets. Contributions of services are recognized when services received (a) create or enhance nonfinancial assets or (b) require specialize skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

Deferred Revenue

Income from membership dues and subscription fees received in advance is deferred and recognized over the periods to which the dues and fees relate.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

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Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. The significant estimates included in the financial statements are the estimates of useful lives used for depreciating property and equipment items.

Membership Dues

Membership dues are recognized as revenue ratably over the term of the membership period. Any unearned amounts are included in deferred revenue at the end of each accounting period.

Functional Allocation of Expenses

Expenses are categorized in the Statement of Activities as program services, management and general and fundraising. The Chamber's expenses are allocated on a functional basis among these benefited categories:

- Program service expenses: include direct and indirect (allocated) expenses for the various programs offered by the Chamber to fulfill member investment expectations. Expenses that can be identified with a specific program and support services are allocated directly according to their natural expenditure classification. Other expenses, that are common to several functions, are allocated to program services based on time and effort.
- Management and general expenses: include those expenses, ranging from office management to financial services, that are not directly identifiable with any other specific function but provide for the overall support and direction of the Chamber. Those expenses include the basic necessities to be an accredited, well rounded, and effective organization.
- Fundraising expenses: represent costs incurred in connection with fundraising efforts to continue the Chamber's mission. The membership dues alone are not adequate enough to accomplish the Chamber's goals; therefore, fundraising events are held to fill the gap between membership dues and total expenses.

Income Taxes

The Chamber is operating as a not-for-profit corporation, under Section 501(c)(6) of the Internal Revenue Code, and is not subject to income taxes with the exception of unrelated business income. The Chamber conducted unrelated business activities during the current year. Therefore, the Chamber paid \$6,613 and \$10,542 for federal income taxes in the years ended December 31, 2024 and 2023, respectively.

The Chamber applies the provisions of FASB ASC Topic 740, Income Taxes, which prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Topic 740 also provides guidance on de-recognition, classification, interest and penalties, accounting in interim periods, disclosures and transition. As of December 31, 2024 and 2023, no uncertain tax positions were identified.

Leases

The Chamber accounts for leases in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 842, *Leases*. Leases are evaluated using the criteria in FASB ASC 842 to determine whether they will be classified as operating leases or finance leases. The Chamber determines if an arrangement is a lease, or contains a lease, at inception of a contract and when terms of an existing contract are

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

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changed. The Chamber determines if an arrangement conveys the right to use an identified asset and whether the Chamber obtains substantially all of the economic benefits from and has the ability to direct the use of the asset. The Chamber recognizes a lease liability and right-of-use (ROU) asset at the commencement date of the lease. The Chamber has elected to not recognize ROU assets and lease liabilities for short-term leases that have an initial lease term of 12 months or less and for leases that management deems immaterial.

Lease liabilities - Lease liabilities are measured based on the present value of future lease payments using the risk-free rate.

Right of use (ROU) assets - ROU assets are recognized at the present value of the lease payments at inception of the lease adjusted, as appropriate, for certain other payments and allowances related to obtaining the lease and placing the asset in service. Lease expense is recognized on a straight-line basis as rent expense in the statement of functional expenses.

Advertising Cost

Advertising costs are expensed when incurred. Advertising costs for the years ended December 31, 2024 and 2023 amounted to \$11,937 and \$26,922, respectively.

NOTE 2 – LIQUIDITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of December 31, 2024, comprise the following:

Financial assets:	
Cash and cash equivalents	\$132,986
Certificate of deposit	320,289
Accounts receivable, net	64,847
Financial assets available to meet cash needs for general expenditures within one year	\$518,122

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Chamber considers all expenditures related to its ongoing program activities, as well as the conduct of services undertaken to support those activities, to be general expenditures. None of the financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the statement of financial position date. The Chamber sets a goal of having financial assets on hand to meet a minimum of 90 days of normal operating expenses, which are, on average, around \$70,000. As part of its liquidity management, the Chamber has a policy to structure its financial assets to be available as general expenditures, liabilities, and other obligations become due.

NOTE 3 – CONCENTRATION OF CREDIT RISKS

The Chamber maintains its cash and certificate of deposit balances in a local bank. These balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. Management periodically assesses the financial condition of the financial institutions and believes that any possible credit risk is minimal. As of December 31, 2024 and 2023, the Chamber had approximately \$203,000 and \$284,000, respectively, of cash certificate of deposit balances that were not insured by the FDIC. The Chamber has not experienced any losses in such accounts and believes the risk of future loss is mitigated by monitoring the balances and the financial institutions where the cash is deposited.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

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NOTE 4 – PROPERTY AND EQUIPMENT

As of December 31, 2024 and 2023, property, plant and equipment consisted of the following:

	Audited 2024	Reviewed 2023
Building and improvements	\$1,112,383	\$1,112,383
Computers and software	17,517	17,517
Office equipment	14,321	14,321
Furniture and fixtures	17,990	17,990
Land	145,000	145,000
Total property and equipment, gross	1,307,211	1,307,211
Less: Accumulated depreciation	(510,991)	(482,206)
Total property and equipment, net	\$796,220	\$825,005

Depreciation expense for the years ended December 31, 2024 and 2023 was \$28,785 and \$30,115, respectively.

NOTE 5 – RENTAL INCOME

The Chamber generates rental income from leasing its office space to lessees. As the lessor, the Chamber is required to first determine whether the lease is an operating lease or a finance lease. A finance lease is one in which the risks and rewards inherent in the asset are transferred to the lessee. An operating lease is one in which the risks and rewards inherent in the asset are not transferred to the lessee. Only finance leases are required to be capitalized on the statement of financial position.

The Chamber leases office space to three other organizations as follows and as the risks and reward inherent in the asset are not transferred to the lessee, it has been determined that these leases are operating leases, so these leases have not been capitalized on the statement of financial position:

	Current monthly rent	Lease initiation	Lease expiration	Lease renewal	Renewal expiration
TEDC	\$1,506	9/1/2008	10/31/2013	11/1/2013	10/31/2018
				11/1/2023	10/31/2024
	\$4,560	11/1/2018	10/31/2023	11/1/2024	10/31/2029
TRHF	\$3,869	11/1/2017	10/31/2022	11/1/2022	10/31/2024
	\$1,506			11/1/2024	10/31/2025
Envirocon	\$150	4/1/2016	3/31/2020	4/1/2020	3/31/2024 ¹

For the years ended December 31, 2024 and 2023, rental income was \$66,285 and \$64,624 respectively.

Future minimum rentals expected to be collected are as follows:

For the years ending December 31,

2025	\$ 69,780
2026	\$ 54,720
2027	\$ 54,720
2028	\$ 54,720
2029	\$ 45,600
Thereafter	-
Total	\$ 279,540

¹ Note that Envirocon continues to lease space at \$150 monthly on a month-to-month basis.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 8.

NOTE 6 – LEASE AGREEMENTS

The Chamber has entered into noncancelable operating leases that expire in 2024 and 2026. For the years ended December 31, 2024 and 2023, the total rental expense under these leases was \$12,862 and \$13,694, respectively. The Chamber's lease arrangements are not recognized in the statement of financial position as they are immaterial. Future minimum lease payments are as follows:

For the years ending December 31,	
2025	\$1,969
2026	656
Thereafter	-
Total	\$2,625

NOTE 7 – NOTE PAYABLE

The Chamber had a note payable due in monthly installments to a financial institution for an office building in the amount of \$6,729 for 83 months beginning January 10, 2010 through November 10, 2016. This note was secured by the Quinn Road office building, with interest at 5% through October 9, 2021. On December 10, 2016, a balloon payment of any unpaid principal and interest became due and payable, at which time the loan was modified to require monthly installments of \$5,595 at the same interest rate and terms and to become due and payable on December 10, 2023. Effective October 10, 2021, the interest rate was modified to 4%, requiring the same monthly installments and due date. In December 2023, the interest rate was modified to 7% and the note is due and payable on demand. If demand is not earlier made, the note shall be due and payable in monthly payments of principal and interest of \$5,224, commencing on January 10, 2024 through December 10, 2026, when the entire amount remaining unpaid shall be due and payable.

As of December 31, 2024 and 2023, the balance was \$240,362 and \$381,706, respectively. Future scheduled maturities of the note payable are as follows:

For the years ending December 31,	
2025	\$240,362
Thereafter	-
Total	\$240,362

NOTE 8 – CONCENTRATIONS

For both years ended December 31, 2024 and 2023, approximately fifty percent (50%) of the Chamber's total revenue and support came from membership dues.

The Chamber conducts its operations solely in the greater Tomball area, and, therefore, is subject to risks from changes in local economic conditions. A downturn in the local economy could cause a decrease in membership dues and revenue.

Greater Tomball Area Chamber of Commerce

Notes to Financial Statements

Item 8.

NOTE 9 – CONTRIBUTED NONFINANCIAL ASSETS

For the years ended December 31, 2024 and 2023, the Chamber's contributed nonfinancial assets consist of the following:

	Audited 2024	Reviewed 2023
Advertising	\$ 2,520	\$22,720
Repairs and maintenance	6,600	6,600
Supplies	4,500	4,500
Venues	6,300	6,300
Miscellaneous	3,160	3,348
Total contributed nonfinancial assets	\$23,080	\$43,468

Contributed advertising and repairs and maintenance are used in the Chamber's administrative activities. Contributed supplies are used in the Chamber's fundraising activities. Contributed venue costs are used in the Chamber's program activities and fundraising activities. Other miscellaneous donated assets are used across all Chamber activities. All contributed nonfinancial assets are valued at fair market value at the date of donation.

NOTE 10 – SUBSEQUENT EVENTS

Management has evaluated subsequent events through March 12, 2025, the date the financial statements were available to be issued. No events were identified that are required to be disclosed or would have a material impact on reported net assets or changes in net assets.

**GREATER TOMBALL AREA CHAMBER OF COMMERCE
2025 BOARD OF DIRECTORS**

Item 8.

CHAIR OF THE BOARD

Rob Marmerstein*

HCA Houston Healthcare Tomball

605 Holderrieth

Tomball, TX 77375

281.401.7601

409.550.8679 cell

Robert.marmerstein@hcahealthcare.com

Retiring in 2025

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_____ cell

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Kim Laurence Salser*

Emerge Marketing Consultants

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Retiring in 2026

Charles Herd

Herd Dispute Resolution, LLC

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Teresa Latsis**Hutson Group*

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_____ cell

smarquardt@hearingwithclarity.com**Ron Hoyle (replaced Cody Meredith)***CORE Integrated Wealth*

994 Village Square Dr.

Bldg 2, Condos C&D

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281.370.0300

_____ cell

ron@coreiw.com**Jessica Rogers***City of Tomball*

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254.493.4897 cell

jrogers@tomballtx.gov**Retiring in 2027****Jerrold Clunn***Clunn Acoustical Systems*

27809 Decker Prairie Rosehill, #1

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281.904.2337 cell

jclun@clunnacoustical.com**Kentrie LeDee***Lone Star College-Tomball*

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_____ cell

kleddee@lonestar.edu**Catherine Martinucci***The Original Rib Tickler*

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_____ cell

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18220 SH 249

Houston, TX 77070

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713.826.7211 cell

artippit@houstonmethodist.org**Ross Winkler***Winkler Public Relations*

PO Box 73404

Houston, TX 77273-3404

832.689.8031

_____ cell

ross@winklerpr.com**IMMEDIATE PAST CHAIRMAN OF THE BOARD****Raymond Francois****Hampton Inn & Suites*

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352.215.8497 cell

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Development Corp.*
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CHAMBER PRESIDENT

Bruce E. Hillegeist

*Greater Tomball Area
Chamber of Commerce*
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Alex Wellbrock

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Item 8.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Item 8.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Greater Tomball Area Chamber of Commerce	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
5 Address (number, street, and apt. or suite no.). See instructions. PO Box 516		Requester's name and address (optional)
6 City, state, and ZIP code Tomball, TX 77377		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.


Social security number								
			-				-	
or								
Employer identification number								
7	4	-	1	4	9	5	1	2

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date 5/6/25
-----------	--	--------------------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

FOR TAX YEAR 2023

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

PE CPA PLLC

32938 TAMINA ROAD STE 202

MAGNOLIA, TX 77354

(281)826-4272

**Acknowledgement and General Information for
Entities That File Returns Electronically**

Item 8.

2023

Name(s) as shown on return

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Tax ID Number

-*5125

Entity address

PO BOX 516

TOMBALL, TX 77377

Thank you for participating in IRS e-file.

1. ☒ 2023 8868-01 income tax return for Federal was filed electronically.
The electronic filing services were provided by PE CPA PLLC.
2. ☒ 8868-01 income tax return was accepted on 05-10-2024 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature.
The submission ID assigned to this return is XXXXXXXXXXXX.

**PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE
IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

**Acknowledgement and General Information for
Entities That File Returns Electronically**

Item 8.

2023

Name(s) as shown on return

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Tax ID Number

-*5125

Entity address

PO BOX 516

TOMBALL, TX 77377

Thank you for participating in IRS e-file.

1. ☒ 2023 8868-07 income tax return for Federal was filed electronically.
The electronic filing services were provided by PE CPA PLLC.
2. ☒ 8868-07 income tax return was accepted on 05-10-2024 using a Personal Identification Number (PIN) as an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature.
The submission ID assigned to this return is XXXXXXXXXX.

**PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE
IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

Item 8.

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning , 2023, and ending , 20	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 516 City or town, state or province, country, and ZIP or foreign postal code TOMBALL, TX 77377 F Name and address of principal officer:
D Employer identification number 74-1495125	
E Telephone number (281) 351-7222	
G Gross receipts \$ 932,466	
H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: N/A	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
L Year of formation: 1965 M State of legal domicile: TX	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE GREATER TOMBALL AREA CHAMBER OF COMMERCE PROVIDES RESOURCES AND FOSTERS RELATIONSHIPS THAT EMPOWER BUSINESSES TO PROSPER IN TOMBALL AND ITS SURROUNDING COMMUNITIES.
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 19
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 19
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 4
	6 Total number of volunteers (estimate if necessary) 6
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0
Revenue	8 Contributions and grants (Part VIII, line 1h) 108,943 100,008
	9 Program service revenue (Part VIII, line 2g) 608,640 717,843
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,424 12,619
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 93,933 101,996
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 812,940 932,466
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 280,211 371,963
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0
	b Total fundraising expenses (Part IX, column (D), line 25) 0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 402,021 463,482
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 682,232 835,445
	19 Revenue less expenses. Subtract line 18 from line 12 130,708 97,021
	20 Total assets (Part X, line 16) 1,453,306 1,369,105
	21 Total liabilities (Part X, line 26) 564,025 421,112
	22 Net assets or fund balances. Subtract line 21 from line 20 889,281 947,993

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	BRUCE HILLEGEIST Signature of officer	Date			
	BRUCE HILLEGEIST, PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name MP ENCALADE CPA	Preparer's signature MP ENCALADE CPA	Date 07-30-2024	Check <input type="checkbox"/> if self-employed	PTIN XXXXXXXXXX
	Firm's name PE CPA PLLC	Firm's EIN			
	Firm's address 32938 TAMINA ROAD STE 202 MAGNOLIA TX 77354	Phone no. 281-826-4272			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990

311

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE GREATER TOMBALL AREA CHAMBER OF COMMERCE PROVIDES RESOURCES AND FOSTERS RELATIONSHIPS THAT EMPOWER BUSINESSES TO PROSPER IN TOMBALL AND ITS SURROUNDING COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 835,445 including grants of \$) (Revenue \$ 932,466)

THE CHAMBER PROMOTED LOCAL BUSINESS GROWTH AND THE QUALITY OF COMMUNICATION AND LIFE IN THE COMMUNITY THROUGH BUSINESS EDUCATION, ENHANCING COMMUNITY IMAGE, AND DEVELOPING THE LINES OF COMMUNICAITON BETWEEN THE LOCAL BUSINESSES, AND GOVERNMENT. MEMBERSHIP WAS AT 725 BY THE END OF 2016.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 835,445

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	X
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 X	
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	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in 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	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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 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.		
a 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
c 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
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e X	
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	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X
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	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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? <i>If "Yes," complete Schedule J.</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
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 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
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?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
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? If "Yes," complete Form 6069.	17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	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 organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
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	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
13	Did the organization have a written whistleblower policy?	13	X
14	Did the organization have a written document retention and destruction policy?	14	X
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?		
a	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	

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed _____
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ 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, and financial 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.

BRUCE HILLEGEIST (281)351-7222, PO BOX 516, TOMBALL, TX 77377

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee, and Independent ContractorsCheck 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRUCE HILLEGEIST PRESIDENT	50.00			X				125,244	0	0
(2) KIM LAURENCE SALSER DIRECTOR	2.00	X						0	0	0
(3) SCOTT MARQUARDT DIRECTOR	2.00	X						0	0	0
(4) URIAH ORTIZ DIRECTOR	2.00	X						0	0	0
(5) DR MARTHA SALAZAR-ZAMORA DIRECTOR	2.00	X						0	0	0
(6) KEITH BARBER DIRECTOR	2.00	X						0	0	0
(7) AL HERRERA DIRECTOR	2.00	X						0	0	0
(8) DAWNA DYSON DIRECTOR	2.00	X						0	0	0
(9) KYLE BERTRAND DIRECTOR	2.00	X						0	0	0
(10) MIKELYN CORKRAN DIRECTOR	2.00	X						0	0	0
(11) RAYMOND FRANCOIS DIRECTOR	2.00	X						0	0	0
(12) JANNA HOGLUND DIRECTOR	2.00	X						0	0	0
(13) KELLY VIOLETTE EX OFFICIO	2.00	X						0	0	0
(14) DYANNA MCCOY EX OFFICIO	2.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (d)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) ALLISON MUNDY DIRECTOR	2.00	X						0	0	0
(16) ROB MARMERSTEIN DIRECTOR	2.00	X						0	0	0
(17) CURTIS MORRIS DIRECTOR	2.00	X						0	0	0
(18) LONDON REED DIRECTOR	2.00	X						0	0	0
(19) RENEE LESLIE DIRECTOR	2.00	X						0	0	0
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								125,244	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

1

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual.*
- 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.*
- 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.*

	Yes	No
3		X
4		X
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) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e	35,000				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	65,008				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 29,008				
	h	Total. Add lines 1a-1f		100,008				
Program Service Revenue	Business Code							
	2a	MEMBERSHIP DUES	900099	400,278	400,278			
	b	BANQUET	722320	40,016	40,016			
	c	GOLF CLASSIC	713990	59,601	59,601			
	d	FIRST FRIDAY	722210	41,857	41,857			
	e	TOMBALL PAGEANT	711300	33,470	33,470			
	f	All other program service revenue	900099	142,621	142,621			
	g	Total. Add lines 2a-2f		717,843				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		12,619	12,619			
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		22,433	22,433			
	6a	Gross rents	(i) Real	(ii) Personal				
				77,010				
			6b	Less: rental expenses . .				
			6c	Rental income or (loss)	77,010			
	d	Net rental income or (loss)		77,010	77,010			
	7a	Gross amount from sales of assets other than inventory . .	(i) Securities	(ii) Other				
			7b	Less: cost or other basis and sales expenses . .				
			7c	Gain or (loss)				
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
			8b	Less: direct expenses				
			c	Net income or (loss) from fundraising events				
9a	Gross income from gaming activities. See Part IV, line 19							
		9b	Less: direct expenses					
		c	Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances							
		10b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code							
	11a	OTHER REVENUE	511140	2,553	2,553			
	b							
	c							
	d	All other revenue						
e	Total. Add lines 11a-11d		2,553					
12	Total revenue. See instructions			932,466	832,458	0		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . .				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	125,244	125,244		
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	183,692	183,692		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .				
9 Other employee benefits	37,277	37,277		
10 Payroll taxes	25,750	25,750		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	21,886	21,886		
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . .	21,067	21,067		
12 Advertising and promotion	26,923	26,923		
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	38,464	38,464		
17 Travel	720	720		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,433	6,433		
20 Interest	10,164	10,164		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	20,163	20,163		
23 Insurance	2,342	2,342		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT RENTAL AND MAINT	22,914	22,914		
b TELEPHONE	7,015	7,015		
c BANK AND MERCHANT FEES	13,534	13,534		
d SUPPLIES	5,693	5,693		
e All other expenses	266,164	266,164		
25 Total functional expenses. Add lines 1 through 24e. .	835,445	835,445	0	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	48,885	1	51,993
	2 Savings and temporary cash investments	539,203	2	481,817
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,098	9	10,291
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,307,212		
	b Less: accumulated depreciation	10b 482,208	855,120	10c 825,004
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,453,306	16	1,369,105	
Liabilities	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	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	527,582	23	381,707
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	36,443	25	39,405
	26 Total liabilities. Add lines 17 through 25	564,025	26	421,112
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds	889,281	31	947,993
	32 Total net assets or fund balances	889,281	32	947,993
	33 Total liabilities and net assets/fund balances	1,453,306	33	1,369,105

Part XI Reconciliation of Net AssetsCheck 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	932,466
2	Total expenses (must equal Part IX, column (A), line 25)	2	835,445
3	Revenue less expenses. Subtract line 2 from line 1	3	97,021
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	889,281
5	Net unrealized gains (losses) on investments	5	
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	(38,309)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	947,993

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a <input checked="" type="checkbox"/>	
b Were the organization's financial statements audited by an independent accountant? _____ 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. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	<input checked="" type="checkbox"/>
c 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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c <input checked="" type="checkbox"/>	
3a 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? _____	3a	<input checked="" type="checkbox"/>
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047 Item 8.

2023

For calendar year 2023 or other tax year beginning , 2023, and ending , 20

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

A <input type="checkbox"/> Check box if address changed.	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) GREATER TOMBALL AREA CHAMBER OF COMMERCE	D Employer identification number 74-1495125
		Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 516	E Group exemption number (see instructions)
B Exempt under section <input checked="" type="checkbox"/> 501(c) (6) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A		City or town, state or province, country, and ZIP or foreign postal code TOMBALL, TX 77377	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year 1,369,105	
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417 (d)(1)(A) Applicable entity			
H Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800			
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>			
J Enter the number of attached Schedules A (Form 990-T) 1			
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation			
L The books are in care of BRUCE HILLEGEIST PO BOX 516 TOMBALL TX 77377 Telephone number (281) 351-7222			

Part I Total Unrelated Business Taxable Income	
1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 30,297
2	Reserved
3	Add lines 1 and 2 30,297
4	Charitable contributions (see instructions for limitation rules)
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3. 30,297
6	Deduction for net operating loss. See instructions
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 30,297
8	Specific deduction (generally \$1,000, but see instructions for exceptions) 1,000
9	Trusts. Section 199A deduction. See instructions
10	Total deductions. Add lines 8 and 9. 1,000
11	Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero. 29,297

Part II Tax Computation	
1	Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 6,152
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)
3	Proxy tax. See instructions
4	Other tax amounts. See instructions
5	Alternative minimum tax
6	Tax on noncompliant facility income. See instructions
7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies 6,152

Part III Tax and Payments	
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
b	Other credits (see instructions)
c	General business credit. Attach Form 3800 (see instructions)
d	Credit for prior year minimum tax (attach Form 8801 or 8827)
e	Total credits. Add lines 1a through 1d.
2	Subtract line 1e from Part II, line 7 6,152
3a	Amount due from Form 4255
b	Amount due from Form 8611
c	Amount due from Form 8697
d	Amount due from Form 8866
e	Other amounts due (see instructions)
f	Total amounts due. Add lines 3a through 3e
4	Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here 6,152
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)

Part III Tax and Payments (continued)

6a	Payments: Preceding year's overpayment credited to the current year	6a		
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c	7,600	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Elective payment election amount from Form 3800	6g		
h	Payment from Form 2439	6h		
i	Credit from Form 4136	6i		
j	Other (see instructions)	6j		
7	Total payments. Add lines 6a through 6J	7		7,600
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		1,448
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax 1,448 Refunded	11		

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here _____	Yes	No
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		
4	Enter available pre-2018 NOL carryovers here \$ _____. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
6a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name MP ENCALADE CPA	Preparer's signature MP ENCALADE CPA	Date 07-30-2024	Check <input type="checkbox"/> if self-employed	PTIN XXXXXXXXXX
Firm's name PE CPA PLLC	Firm's EIN 82-0666561		Phone no. 281-826-4272	
Firm's address 32938 TAMINA ROAD STE 202 MAGNOLIA TX 77354				

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047 **Item 8.**

2023

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(6) (enter number) organization

☐ 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

- ☒ 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

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A N/A 	\$ 38,394	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A N/A 	\$ 63,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A N/A 	\$ 6,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A N/A 	\$ 49,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A N/A 	\$ 29,937	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A N/A 	\$ 12,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A N/A 	\$ 28,945	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	N/A N/A 	\$ 13,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	N/A N/A 	\$ 7,050	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	N/A N/A 	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	N/A N/A 	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	N/A N/A 	\$ 7,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	N/A N/A 	\$ 8,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	N/A N/A 	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Item 8.

2025

Open to Public
Inspection

Name of the organization

Employer identification number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input checked="" type="checkbox"/> Preservation of a certified historic structure	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c, acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

Schedule D (Form 990)

329

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (cont)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange program

e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? ☐ Yes ☐ No

(ii) Related organizations? ☐ Yes ☐ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	58,000	87,000		145,000
b Buildings	354,018	531,026	327,804	557,240
c Leasehold improvements	4,245	211,594	94,119	121,720
d Equipment		31,839	30,795	1,044
e Other	11,500	17,990	29,490	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B).)				825,004

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(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) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, line 12, col.(B)).		

Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. 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. (Column (b) must equal Form 990, Part X, line 13, col. (B)).		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B)).	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LAST MONTH RENT	4,150
(3) SECURITY DEPOSIT	4,150
(4) SCHOLARSHIPS	31,105
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 25 col. (B)). . .	39,405

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements 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.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide 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 X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Item 8.

**Open to Public
Inspection**

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|--|---|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
	11	Net income summary. Subtract line 10 from line 3, column (d)			

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

OMB No. 1545-0047

Item 8.

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (REPAIRS AND MAINTENANCE)	X		6,600	
26 Other (DUES AND SUBSCRIPTIONS)	X		225	
27 Other (MEMBERSHIP MISCELLANEOUS)	X		463	
28 Other (ADVERTISING)	X		21,720	

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

**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.

OMB No. 1545-0047

Item 8.

2023

**Open to Public
Inspection**

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

01. Officer, directors, etc. family relationship (Part VI, line 2)

INSURANCE IS PROVIDED TO BOARD MEMBER(S) BY OTHER BOARD MEMBERS

02. Form 990 governing body review (Part VI, line 11)

THE ORGANIZATION'S PROCESS IS TO HAVE FORM 990 REVIEWED BY THE ENTIRE BOARD OF DIRECTORS.

03. Conflict of interest policy compliance (Part VI, line 12c)

OFFICERS AND DIRECTORS ARE REQUIRED TO ANNUALLY SIGN A FORM THAT DISCLOSES ANY POTENTIAL
CONFLICTS OF INTEREST.

04. CEO, executive director, top management comp (Part VI, line 15a)

COMPENSATION PROCESS FOR TOP OFFICIAL, WHICH IS THE CHAMBER PRESIDENT, IS APPROVED BY THE
BOARD OF DIRECTORS AS A PART OF THE BUDGET PROCESS

05. Governing documents, etc, available to public (Part VI, line 19)

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

06. Explanation of other changes in net assets or fund balances (Part XI, line 9)

ADJ TO BRING RETURN INLINE WITH CASH BOOKS

07. List of other expenses (Part IX, line 24e)

COLLECTION EXPENSES, HEALTH COMMITTEE, FIRST FRIDAY, NETWORKING BREAKFAST, WOMENS
COMMITTEE, DUES AND SUBSCRIPTIONS, EMPLOYEE DEVELOPMENT, POSTAGE, INCOME TAX, TOMBALL
LEADERSHIP DAY, BANQUET, GOLF CLASSIC, TOMBALL NIGHT, HOLIDAY PARADE, MISS TOMBALL

Name of the organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

Item 8.

PAGEANT, SCHOLARSHIP EXPENSES.

Client Copy

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.OMB No. 1545-0047
Item 8.

2023

Attachment
Sequence No. 179

Name(s) shown on return GREATER TOMBALL AREA CHAMBER OF	Business or activity to which this form relates FORM 990 - 1	Identifying number 74-1495125
---	--	---

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	578

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	18,940
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	19,518
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.**2023**Attachment
Sequence No. **179**

Name(s) shown on return GREATER TOMBALL AREA CHAMBER OF	Business or activity to which this form relates FORM 990T - 1	Identifying number 74-1495125
---	---	---

Part I Election To Expense Certain Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	9,953

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2023	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	9,953
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

**IRS E-file Signature Authorization
for a Tax Exempt Entity**Department of the Treasury
Internal Revenue Service

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20

2023**Do not send to the IRS. Keep for your records.**
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

EIN or SSN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC**74-1495125**

Name and title of officer or person subject to tax

BRUCE HILLEGEIST, PRESIDENT**Part I Type of Return and Return Information**

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

1a Form 990 check here <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5).	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here <input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b 6,152
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☐ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **PE CPA PLLC** to enter my PIN **95125** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____

Date **06-24-2024****Part III Certification and Authentication****ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.**799164 68510****Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____

Date **07-30-2024****ERO Must Retain This Form - See Instructions**
Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **8879-TE**

**IRS E-file Signature Authorization
for a Tax Exempt Entity**

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20

2023Department of the Treasury
Internal Revenue Service**Do not send to the IRS. Keep for your records.**
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

EIN or SSN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC**74-1495125**

Name and title of officer or person subject to tax

BRUCE HILLEGEIST, PRESIDENT**Part I Type of Return and Return Information**

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

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b <u>932,466</u>
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9) 2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22) 3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5). 4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c) 5b _____
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4) 6b _____
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1) 7b _____
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D) 8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19) 9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☐ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **PE CPA PLLC** to enter my PIN **95125** as my signature

ERO firm name

Enter five numbers, but
do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date **06-24-2024****Part III Certification and Authentication**

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

799164 68510**Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date **07-30-2024**

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

Federal Supporting Statements

2023 PG01

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

990-T SCHEDULE A PART V - LINE 3B
OTHER DEDUCTIONS

Statement #13

Form 990-T Schedule A: OFFICE RENTAL

Property: OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

DESCRIPTION	AMOUNT
INTEREST	6,776
INSURANCE	3,186
TAXES	6,318
REPAIRS	6,121
CLEANING	3,842
ELECTRICITY	4,981
TOTAL	31,224

FOR YOUR RECORDS ONLY

PG01

FORM 990 - SCHEDULE D - PART VI - LINE 1E
INVESTMENTS - OTHER

STATEMENT #D1E

DESCRIPTION OF INVESTMENT	COST/BASIS (INVESTMENT)	COST/BASIS (OTHER)	DEPR	BOOK VALUE
BUILDOUT	11,500	0	11,294	206
FURNITURE	0	17,990	18,196	(206)
TOTAL	11,500	17,990	29,490	0

Federal Supporting Statements

2023

PG01

Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

990-T Schedule A Part V - Dual-use Debt-financed Property Statement

Statement #14

Form 990-T Schedule A: OFFICE RENTAL

Property Discription	Avg. of Acquisition indebtedness	Percent allocable to debt-financed property	Avg. acquisition debt on debt-financed property	Adjusted basis	Percent Allocable to debt-financed debt-financed property	Adjusted basis allocable to debt-financed property
OFFICE RENTAL	135,916	100.00000%	135,916	154,611	100.000000%	154,611

990

Overflow Statement

(This page is not filed with the return. It is for your records only.)

2023

Page 1

Item 8.

Name(s) as shown on return

FEIN

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

OTHER

Description	Amount
COLLECTION EXPENSES	\$ 8,094
CONTRACTOR	66,448
DUES	4,869
EMPLOYEE DEVELOPMENT	12,264
FIRST FRIDAY	37,020
GOLF CLASSIC	19,868
HEALTH COMMITTEE	11,046
HOLIDAY PARADE	25,726
INCOME TAX	10,542
NETWORKING BREAKFAST	1,617
POSTAGE	2,889
TOMBALL NIGHT	10,555
TOMBALL PAGEANT	14,541
WOMENS COMMITTEE	15,748
BANQUET	12,562
TOMBALL PAGEANT SCHOLARSHIPS	10,000
TOMBALL LEADERSHIP DAY	2,375
Total:	\$ 266,164

FORM 990-T - SCH E - LN 4 - AVERAGE ACQUISITION DEBT1

Description	Amount
AVERAGE ACQUISITION DEBT	\$ 135,916
Total:	\$ 135,916

FORM 990-T - SCH E - LN 5 - AVERAGE ADJUSTED BASIS

Description	Amount
AVERAGE BASIS	\$ 154,611
Total:	\$ 154,611

**Estimated Tax Worksheet on Unrelated Business
Taxable Income for Tax-Exempt Organizations**
(and on Investment Income for Private Foundations)

Item 8.

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(This page is not filed with the return. It is for your records only.)

1 Unrelated business taxable income expected in the tax year	1	
2 Tax on the amount on line 1. See instructions for tax computation	2	6,152
3 Alternative minimum tax for trusts. See instructions	3	
4 Total. Add lines 2 and 3	4	6,152
5 Estimated tax credits. See instructions	5	
6 Subtract line 5 from line 4	6	6,152
7 Other taxes. See instructions	7	
8 Total. Add lines 6 and 7	8	6,152
9 Credit for federal tax paid on fuels. See instructions	9	
10a Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	6,152
b Enter the tax shown on the 2023 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	6,152
c 2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	6,152

		(a)	(b)	(c)	(d)
11 Installment due dates. See instructions	11	04-15-2024	06-17-2024	09-16-2024	12-16-2024
12 Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	1,538	1,538	1,538	1,538
13 2023 Overpayment. See instructions	13	362	362	362	362
14 Payment due (Subtract line 13 from line 12)	14	1,176	1,176	1,176	1,176

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 8.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CITY OF TOMBALL 401 MARKET STREET TOMBALL TX 77375	38,394	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	HEALTH FOUNDATION 29201 QUINN RD STE A TOMBALL TX 77375	63,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ENVIROCON TERMITE & PEST, INC 23306 ROBERTS CEMETERY HOCKLEY TX 77447	6,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	HCA HOUSTON HEALTHCARE TOMBALL 605 HOLDERRIETH TOMBALL TX 77375	49,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	TOMBALL ECONOMIC DEVELOPMENT CORP PO BOX 820 TOMBALL TX 77377	29,937	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	SOUTHCOMM PUBLISHING CO. 7766 EWING BLVD., SUITE 200 FLORENCE KY 41042	12,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

Do not send to IRS. Retain this form for your records.

Item 8.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HOUSTON METHODIST WILLOWBROOK HOSPI 18220 SH 249 HOUSTON TX 77070	28,945	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	ALOHA NAILS & SPA 701 E MAIN STE 125B TOMBALL TX 77375	13,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	SHELL FEDERAL CREDIT UNION 6232 FM 2920 SPRING TX 77379	7,050	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	MEMORIAL HERMAN THE WOODLANDS 9250 PINECROFT DR SPRING TX 77380	5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	COMMUNITY MATTERS INC PO BOX 5900 FRISCO TX 75035	10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	KLEIN FUNERAL HOMES & MEMORIAL PARK 16131 CHAMPION FOREST SPRING TX 77379	7,150	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors****Do not send to IRS. Retain this form for your records.**

Item 8.

2023

Name of organization

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

Employer identification number

74-1495125

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	TWFG INSURANCE SERVICES 722 W MAIN TOMBALL TX 77375	8,625	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	RSC RIVERSIDE CONSTRUCTION 210 SPRING CREEK TRAIL SPRING TX 77373	5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Depreciation Detail Listing

Program Services

(This page is not filed with the return. It is for your records only.)

2023

PAGE 1

Social security number/EIN

74-1495125

349

CY 179 and CY Bonus	
TOTAL CY Depr including 179/bonus	19,518

ST ADJ:

990 T
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PAGE 1

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74-1495125

No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
6	BUILDING (RENTAL PORT	09-30-2008	354,018		100.00			354,018	39	SL MM	2.564	127,310	9,077	136,387	
7	BUILDOUT - TOMBALL RE	12-01-2012	11,500		100.00			11,500	15	SL MQ	6.667	5,235	767	6,002	
8	A/C UNIT (RENTAL)	06-27-2014	4,245		100.00			4,245	39	SL MM	2.564	3,886	109	3,995	
Client Copy															
Totals															
			369,763					369,763				136,431	9,953	146,384	35

ST ADJ:

350

Next Year's Depreciation Worksheet

(This page is not filed with the return. It is for your records only.)

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Name(s) as shown on return

Tax ID Number

GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC

74-1495125

Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
PRG	1	COMPUTER & SERVER EQUIPM	10-14-2013	15,503		5	
PRG	1	BUILDING - QUINN ROAD	09-30-2008	531,026	SL MM	39	13,616
PRG	1	IMPROVEMENTS	10-31-2008	203,369	SL MM	39	5,215
PRG	1	A/C UNIT	03-27-2012	4,300	SL MM	39	110
PRG	1	LAND	10-31-2008			0	
T	1	BUILDING (RENTAL PORTION	09-30-2008	354,018	SL MM	39	9,077
T	1	BUILDOUT - TOMBALL REG H	12-01-2012	11,500	SL MQ	15	767
T	1	A/C UNIT (RENTAL)	06-27-2014	4,245	SL MM	39	109
PRG	1	2017 LAPTOP	12-05-2017	851		5	
PRG	1	PHONE SYSTEM	09-04-2001	6,976		7	
PRG	1	FURNITURE	11-01-2008	17,990		7	
PRG	1	QUINN BLDG IMPROVEMENTS	12-01-2012	3,925	SL MM	39	101
PRG	1	2019 PHONE SYSTEM	01-31-2019	6,126		3	
PRG	1	2020 COMPUTER	03-15-2020	1,165	SL HY	5	233
PRG	1	2022 COMPUTER	09-22-2022	1,219	SL HY	5	244
		TOTAL					29,472

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545

Item 8.

2023

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

A Name of the organization GREATER TOMBALL AREA CHAMBER OF COMMERCE, INC	B Employer identification number 74-1495125
C Unrelated business activity code (see instructions) 531190	D Sequence: 1 of 1

E Describe the unrelated trade or business **OFFICE RENTAL**

Part I	Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance	1c		
2	Cost of goods sold (Part III, line 8)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a		
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from a partnership or an S corporation (attach statement)	5		
6	Rent income (Part IV)	6		
7	Unrelated debt-financed income (Part V)	7	67,698	27,448
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10	Exploited exempt activity income (Part VIII)	10		
11	Advertising income (Part IX)	11		
12	Other income (see instructions; attach statement)	12		
13	Total. Combine lines 3 through 12	13	67,698	27,448
				40,250

Part II	Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income.			
1	Compensation of officers, directors, and trustees (Part X)	1		
2	Salaries and wages	2		
3	Repairs and maintenance	3		
4	Bad debts	4		
5	Interest (attach statement). See instructions	5		
6	Taxes and licenses	6		
7	Depreciation (attach Form 4562). See instructions	7	9,953	
8	Less depreciation claimed in Part III and elsewhere on return	8a		
9	Depletion	9		
10	Contributions to deferred compensation plans	10		
11	Employee benefit programs	11		
12	Excess exempt expenses (Part VIII)	12		
13	Excess readership costs (Part IX)	13		
14	Other deductions (attach statement)	14		
15	Total deductions. Add lines 1 through 14	15		9,953
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		30,297
17	Deduction for net operating loss. See instructions	17		
18	Unrelated business taxable income. Subtract line 17 from line 16.	18		30,297

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

EEA

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐ OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

B ☐

C ☐

D ☐

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)				
4 Deductions directly connected with the income in lines 2a and 2b (attach statement)				
5 Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)				

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐ OFFICE RENTAL, Address: 29201 QUINN RD TOMBALL TX 77375

B ☐

C ☐

D ☐

	A	B	C	D
2 Gross income from or allocable to debt-financed property	77,010			
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement) Statement #13	31,224			
c Total deductions (add lines 3a and 3b, columns A through D)	31,224			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Statement #14	135,916			
5 Average adjusted basis of or allocable to debt-financed property (attach statement) Statement #14	154,611			
6 Divide line 4 by line 5	87.90800 %	%	%	%
7 Gross income reportable. Multiply line 2 by line 6	67,698			
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	67,698			
9 Allocable deductions. Multiply line 3c by line 6	27,448			
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	27,448			
11 Total dividends - received deductions included in line 10				

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10.
Enter here and on Part I,
line 8, column (A).Add columns 6 and 11.
Enter here and on Part I,
line 8, column (B).

Totals

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

Add amounts in column 2.
Enter here and on Part I,
line 9, column (A).Add amounts in column 5.
Enter here and on Part I,
line 9, column (B).

Totals

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity:	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5	Gross income from activity that is not unrelated business income	5
6	Expenses attributable to income entered on line 5	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Part IX	Advertising Income
----------------	---------------------------

- 1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
- A ☐ _____
- B ☐ _____
- C ☐ _____
- D ☐ _____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)				
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter -0- on line 8				
5 Readership costs				
6 Circulation income				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter -0-				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a Add line 8, columns A through D. Enter the greater of the line 8a columns total or -0- here and on Part II, line 13				

Part X	Compensation of Officers, Directors, and Trustees (see instructions)
---------------	---

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

Part XI	Supplemental Information (see instructions)
----------------	--