# Form 990

## Return of Organization Exempt From Income Tax

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)**

The organization may have to use a copy of this return to satisfy state reporting requirements.

### Part I: Summary

**Briefly describe the organization’s mission or most significant activities:**

> To ignite lifelong curiosity, understanding, and respect for nature through education.

### Activities & Governance

1. [ ] Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

2. **Number of voting members of the governing body (Part VI, line 1a):** 11

3. **Number of independent voting members of the governing body (Part VI, line 1b):** 3

4. **Total number of individuals employed in calendar year 2011 (Part V, line 2a):** 5

5. **Total number of volunteers (estimate if necessary):** 950

6. **Total unrelated business revenue from Form 990-T, line 34:** 0

7. **Net unrelated business taxable income from Form 990-T, line 34:** 0

### Revenue

- **Contributions and grants (Part VIII, line 1h):** 170,907
- **Program service revenue (Part VIII, line 2g):** 52,160
- **Investment income (Part VIII, column A), lines 3, 4, and 7d:** 79,444
- **Other revenue (Part VIII, column A), lines 5, 6d, 8c, 9c, 10c, and 11e:** 105,300
- **Total revenue – add lines 8 through 11 (must equal Part VIII, column A, line 12):** 429,678

### Expenses

- **Grants and similar amounts paid (Part IX, column A), lines 1-3:** 345,802
- **Salaries, other compensation, employee benefits (Part IX, column A), lines 5-10:** 323,160

**Total fundraising expenses (Part IX, column D, line 25):** 73,919

**Other expenses (Part IX, column A), lines 11a-11d, 11f-24d:** 72,233

**Total expenses. Add lines 13-17 (must equal Part IX, column A, line 25):** 418,035

- **Revenue less expenses. Subtract line 18 from line 12:** 11,643

### Net Assets or Fund Balances

- **Beginning of Current Year:** 545,057
- **End of Year:** 650,701
- **Total liabilities (Part X, line 28):** 15,899
- **Net assets or fund balances. Subtract line 21 from line 20:** 572,802

### Part II: Signature Block

**Signature of officer**

[Signature]

**Executive Director**

[Signature]

**Date**

1/22/13

**Paid Preparer Use Only**

[Preparer's name]  [Preparer's signature]  [Preparer's EIN]  [Preparer's telephone number]

[Form 990 (2011)]

**BAA For Paperwork Reduction Act Notice, see the separate instructions.**

[TEA09101 2005/11]

May the IRS discuss this return with the preparer shown above? (see instructions)  [ ] Yes  [No]

[2011]
**Part III: Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III.

1. Briefly describe the organization's mission:
   - To ignite lifelong curiosity, understanding, and respect for nature through education.

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 X
   - 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 X
   - 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 and section 4947(a)(1) trusts 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 $194,144, including grants of $0)(Revenue $0)
   - Operation & maintenance of a park & nature discovery center in Bellaire, TX including classes, workshops, exhibits, displays & newsletters.

   **4b (Code: )**
   - (Expenses $______, including grants of $______) (Revenue $______)

   **4c (Code: )**
   - (Expenses $______, including grants of $______) (Revenue $______)

   **4d Other program services. (Describe in Schedule O.)**
   - (Expenses $______, including grants of $______) (Revenue $______)

   **4e Total program service expenses ➤ 194,144.**

BAA