



05-102
(Rev.2-24/35)

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP), Professional Associations (PA) and Financial Institutions.

■ Tcode 13196 Franchise

■ Taxpayer number

■ Report year

Due date

3 2 0 8 4 3 7 8 5 3 1

2 0 2 6

5/15/2026

You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you.

Taxpayer name Southwest Education and Leadership Training Foundation		<input type="checkbox"/> Blacken circle if the mailing address has changed.	
Mailing address 5444 Westheimer Road Suite 1250			Secretary of State (SOS) file number or Comptroller file number
City Houston	State TX	ZIP code plus 4 77056-2501	804552822

Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office President
Principal place of business TEXAS

You must report officer, director, member, general partner and manager information as of the date you complete this report.

Mail signed report to:
Texas Comptroller of Public Accounts
P.O. Box 149348
Austin, Tx 78714-9348

Please sign below!

This report must be signed to satisfy franchise tax requirements.

For locations and phone numbers visit www.comptroller.texas.gov/about/contact.

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

Name	Title	Director	Term expiration
Donald Parker	President	<input checked="" type="radio"/> YES	m m d d y y 0 4 0 1 2 9
Mailing address 3810 Palm St	City Houston	State TX	ZIP Code 77004-6531
Ajay Foreman	Secretary	<input checked="" type="radio"/> YES	m m d d y y 0 4 0 1 2 9
Mailing address 2204 Dove Hollow	City Sherveport	State LA	ZIP Code 71118
Brian Davis	Vice President of Finance	<input checked="" type="radio"/> YES	m m d d y y
Mailing address 4026 Passage Way	City Lancaster	State TX	ZIP Code 75146

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution Southwest Education and Leadership Training Foundati	State of formation Texas	Texas SOS file number, if any 804552822	Percentage of ownership 100
Registered agent and registered office currently on file (see instructions if you need to make changes) Agent: Willie Coleman		You must make a filing with the Secretary of State to change registered agent, registered office or general partner information.	
Office: 1402 Alabama St.	City Houston	State TX	ZIP Code 77004

The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

sign here	Title President	Date 02/25/2026	Area code and phone number (337) 802- 7029
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05-102|(Rev.2-24/35)|13196|32084378531|2026|Wed Feb 25 2026 14:40:33 GMT-0600 (Central Standard Time)|9997|1|

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
PM Date			

