PUBLIC INSPECTION COPY

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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

For the 2018 calendar year, or tax year beginning , 2018, and ending , 2019 Check if applicable: D Employer identification number Address change The Junior League of Houston, Inc. 74-1185659 1811 Briar Oaks Lane Telephone number Name change Houston, TX 77027 713-622-4191 Initial return Final return/terminated Amended return **G** Gross receipts \$ 16,400,384. F Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending Yes Javne Johnston **H(b)** Are all subordinates included? If "No," attach a list. (see instructions) Same As C Above Yes No Tax-exempt status: X 501(c)(3) 4947(a)(1) or 527 501(c) ((insert no.) Website: ► www.jlh.org H(c) Group exemption number Κ Form of organization: X Corporation 1925 M State of legal domicile: TX Association Other > L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: The Junior League of Houston, Inc. is an organization of women committed to promoting voluntarism, developing the potential of women, and improving communities through the effective action and leadership of trained volunteers. Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of independent voting members of the governing body (Part VI, line 1b)..... 20 5 91 Total number of volunteers (estimate if necessary)..... 6 4, 941 7a Total unrelated business revenue from Part VIII, column (C), line 12..... 1,391,742. **b** Net unrelated business taxable income from Form 990-T, line 38..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 2,117,743 2,443,167. Program service revenue (Part VIII, line 2g)..... 4,002,150 4,109,041. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 499,010. 484,001. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 13,873 -35,723.Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 12 6,632,776. 000,486. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 1,227,127 738,631 Benefits paid to or for members (Part IX, column (A), line 4)..... 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,489,631 2,613,654. **16a** Professional fundraising fees (Part IX, column (A), line 11e)..... **b** Total fundraising expenses (Part IX, column (D), line 25) ► Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 17 3,140,743. 3,132,543. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 6,857,501. 6,484,828. Revenue less expenses. Subtract line 18 from line 12..... -224,725515,658. **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16)..... 24,114,034. 24,180,154. 21 Total liabilities (Part X, line 26)..... 2,205,327. 2,023,156. Net assets or fund balances. Subtract line 21 from line 20..... 22 21,908,707. 22,156,998. 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. Electronically Filed Date Signature of officer Sign Here Jayne Johnston President Type or print name and title Print/Type preparer's name Barbara Murphy P01386215 **Paid** Barbara Murphy self-employed ► Blazek & Vetterling Preparer Use Only Firm's address ▶ 2900 Weslayan, Suite 200 Firm's EIN $\sim 76-0269860$ (713) 439-5739 Houston, TX 77027-5132 May the IRS discuss this return with the preparer shown above? (see instructions)..... Yes No

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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 Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
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	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
k	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.	11 b		Х
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.	11 c		Х
c	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.	11 d		Х
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
Ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
t	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
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		Х
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	Х	
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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
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	Х	

Form 990 (2018) The Junior League of Houston, Inc.

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? If 'Yes,' complete Schedule I, Parts I and III	22		Х
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>	23	Х	
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	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>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N. Part II.	32		Х
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? If 'Yes,' complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34	Х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
ı	of If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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>	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line Ta. Enter -0- if not applicable			
((gambling) winnings to prize winners?	1 c	Х	
BAA		Form		(2018)

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

			Yes	No
2 8	a 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 91			
	a If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Χ	
ı	a If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b	Χ	
4 8	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)?	4 a		Х
ı	a 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).			
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
•	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	a 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?	6 a		Х
ı	a If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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?	7 a	X	
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	70		21
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	_		
	as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 g		
	Form 1098-C?	7 h		
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		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966? 5 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 a 9 b		
	Section 501(c)(7) organizations. Enter:	90		
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
ı	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.			
ä	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand			17
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in 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?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
. 0	If 'Yes,' complete Form 4720, Schedule O.	.5		

Form 990 (2018) The Junior League of Houston, Inc. 74-1185659 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 20 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 in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 20 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ Did the organization have members or stockholders?....See.Schedule.0..... Χ 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch 0 stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 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 in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* ... See .Schedule .Q Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 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...... 15 a Χ 15 b X If 'Yes' to line 15a or 15b, describe the process in 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?.... Χ 16 a **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?.. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None 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 X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Houston TX 77027 713-622-4191

Rebecca Pivec 1811 Briar Oaks Lane

Form 990 (2018)	The	Junior	League	٥f	Houston,	Tnc

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Page **7**

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

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

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

- 1 a 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(c)	
(A) Name and Title (B) Average hours per Average hours per A	(F) Estimated amount of other compensation
per week (list any hours for related organization (W-2/1099-MISC) Tormer Highest compensation (W-2/1099-MISC) W-2/1099-MISC) Tormer Tormer	from the organization and related organizations
(1) Stephanie Magers 35 35	
President 1 X X 0. 0.	0.
_(2) Jayne Johnston 30	
President-Elect 1 X X 0. 0.	0.
(3) Alicia Lee 30	
Community VP 0 X X 0. 0.	0.
(4) Anne Sears 30	
Development VP 0 X X 0. 0.	0.
(5) Ellen Toranzo 30	
Financial VP 1 X X 0. 0.	0.
(6) Tara Merla Hinton 30	
Membership VP 0 X X 0. 0.	0.
(7) Elizabeth Garcia 25	
Recording Sec 0 X X 0. 0.	0.
(8) Semmes Burns 10 10	
	0.
(9) Julie Danvers 6 6	
	0.
(10) Amy Dunn 10 10	
	0.
(11) Irene Giannakakis 10	
Director 0 X 0.	0.
(12) Amanda Hanks	_
	0.
(13) Mary Itz 6	
Dir at Large 0 X 0.	0.
(14) Caroline Kennedy 10	
Director 0 X 0.	0.

Part VII Section A. Officers, Directors, Tru		Ney	Em	_		es,	and	Highest Com	pensated Emp	loyee	S (cont	inued)
	(B)			((•							
(A) Name and title	Average hours per week (list any hours	box offi	, unle cer ar	ess pe	erson direct	than is bot or/trus	h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	cor	(F) Estimated ount of of inpensati from the	ther ion
	for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	icer	Key employee	Highest compensated employee	mer			aı	ganizatio nd relate ganizatio	ed
(15) Leslie Keyes Director	_ <u>10</u> _	Х						0.	0.			0.
(16) Jaclyn Luke Dir at Large	6	Х						0.	0.			0.
(17) Marie Newton Director	$-\frac{20}{0}$	X						0.	0.			0.
(18) Mariaha Pedder Director	$-\frac{10}{0}$	Х						0.	0.			0.
(19) Vanessa Stabler Dir at Large	<u>6</u> _	Х						0.	0.			0.
(20) Lia Vallone Director	$-\frac{10}{0}$	Х						0.	0.			0.
(21) Mary Lee Wilkens Director	_ 20 _	Х						0.	0.			0.
(22) Malcolm Rowland Tea Room Gen Mgr	45				Х			190,285.	0.		10,	810.
(23) Rebecca Pivec Administrative Dir	_ <u>40</u> _1					Х		112,601.	0.			924.
(24)								,				
(25)												
1 b Sub-total.							•	302,886.	0.		11,	734.
c Total from continuation sheets to Part VII, Secti							>	0.	0.			0.
d Total (add lines 1b and 1c)							ved	302,886.	0.	ancatio		734.
from the organization > 2	1 10 111036 1	isteu	abo	ve) i	WIIO	16661	veu	more than \$100,00	o or reportable comp	erisatio	1	1
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for such	tor, or tru	stee, ıal	key	em	nplo	yee,	or h	nighest compensa	ted employee	. 3	Yes	No X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greated such individual.	f reportab er than \$1	le co 50,0	mpe 00?	ensa If '}	ition ∕ <i>es,</i>	and con	oth <i>ple</i>	er compensation te Schedule J for	from		Х	
5 Did any person listed on line 1a receive or accru for services rendered to the organization? <i>If 'Yes</i>	e compen	satio	n fr	om	anv	unre	late	ed organization or	individual			Х
Section B. Independent Contractors										ı		
Complete this table for your five highest compen compensation from the organization. Report compensation.	sated indessation for	epen the c	dent alen	t cor dar <u>i</u>	ntra year	ctors endi	tha	t received more the truth or within the or	nan \$100,000 of ganization's tax year			
(A) Name and business address							Description of	of services	Comp	(C) ensatio	on	
2 Total number of independent contractors (including I \$100,000 of compensation from the organization		ited to	o the	se I	isted	d abo	ve)	I who received more	than			

	Check if Schedule O contains a response or note to any	line in this Part VI	III		
		(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	1 a Federated campaigns 1 a b Membership dues 1 b 780,050. c Fundraising events 1 c 454,768. d Related organizations 1 d 410,620. e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f 797,729. g Noncash contributions included in lines 1a-1f: \$ 75,390.				
	h Total. Add lines 1a-1f	2,443,167.			
me		4 100 041	2 740 672	1 260 260	
Program Service Revenue	2a Tea Room 722100 b	4,109,041.	2,748,673.	1,360,368.	
SE	e				
graf	f All other program service revenue				
<u>6</u>	g Total. Add lines 2a-2f	4,109,041.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds 	269,781.			269,781.
	5 Royalties				
	6 a Gross rentsb Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss).				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other 9,352,518.				
	b Less: cost or other basis and sales expenses				
	d Net gain or (loss)	214,220.			214,220.
Other Revenue	8a Gross income from fundraising events (not including \$ 454,768. of contributions reported on line 1c). See Part IV, line 18				
He H	b Less: direct expenses b 248,364.				
δ	c Net income or (loss) from fundraising events	-77,979.			-77,979.
	b Less: direct expenses b c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	c Net income or (loss) from sales of inventory	10,882.	10,882.		
	Miscellaneous Revenue Business Code				
	11a <u>Houston News ads</u> 541800	31,374.		31,374.	
	d All other revenue				
	e Total. Add lines 11a-11d	31,374.			
	12 Total revenue. See instructions.	7,000,486.	2,759,555	1,391,742.	406,022.

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 re	esponse or note to any (A)	(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	738,631.	738,631.		
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	201,096.	201,096.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,785,139.	1,488,943.	289,860.	6,336.
8	Pension plan accruals and contributions (include section 401(k) and 403(b)	1,705,159.	1,400,943.	289,800.	0,330.
_	employer contributions)				
9	Other employee benefits	474,873.	421,165.	49,031.	4,677.
10	Payroll taxes	152,546.	122,847.	27,059.	2,640.
11	Fees for services (non-employees):				
	Management				
k	Legal	6,278.		6,278.	
C	: Accounting	40,820.	14,287.	18,609.	7,924.
C	Lobbying				
6	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	36,280.		36,280.	
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	30,333.	18,833.	11,500.	
13	Office expenses	201 E01	200 755	24 416	E0 410
14	Information technology	381,581.	298,755.	24,416.	58,410.
		63,784.	41,221.	22,563.	
15	Royalties	5.60, 0.00	F01 000	46.000	
16	Occupancy	568,003.	521,203.	46,800.	
17		1,375.	1,375.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	29,148.	28,097.	1,051.	
20	Interest				
21	Payments to affiliates	122,857.	122,857.		
22	Depreciation, depletion, and amortization	429,133.	399,094.	30,039.	
23	Insurance	95,356.	80,003.	15,353.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Tea_Room_food/beverage	1,128,893.	1,128,575.	318.	
	Bank and credit card fees	101,120.	69,379.	22,311.	9,430.
	Payroll processing fees/other	66,289.	17,533.	35,386.	13,370.
c	Sustaining club expenses	31,293.	,	31,293.	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,484,828.	5,713,894.	668,147.	102,787.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				,

		Check if Schedule O contains a response or note to	any lir	ne in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash – non-interest-bearing			807,713.	1	759,663.		
	2	Savings and temporary cash investments			556,557.	2	514,804.		
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net			169,427.	4	471,933.		
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	mplovee	es. Complete		5			
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	(as defined under nd contributing ntary employees' of Schedule L		6				
2	7	Notes and loans receivable, net			7				
Assets	8	Inventories for sale or use			223,776.	8	144,895.		
As	9	Prepaid expenses and deferred charges			45,850.	9	16,341.		
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1	18,523,544.	,		= 0, 0 = = 0		
		Less: accumulated depreciation		7,231,326.	11,265,640.	10 c	11,292,218.		
	11	Investments – publicly traded securities			10,680,071.	11	10,569,680.		
	12	• •	s – other securities. See Part IV, line 11						
	13	Investments – program-related. See Part IV, line 11.		13					
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11	365,000.	15	410,620.				
	16	Total assets. Add lines 1 through 15 (must equal line			24,114,034.	16	24,180,154.		
	17	Accounts payable and accrued expenses	459,514.	17	447,840.				
	18	Grants payable	916,753.	18	768,078.				
	19	Deferred revenue	590,010.	19	536,738.				
	20	Tax-exempt bond liabilities		20					
es	21	Escrow or custodial account liability. Complete Part I'		L		21			
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	disqua	lified persons.		22			
	23	Secured mortgages and notes payable to unrelated th	ird part	ies		23			
	24	Unsecured notes and loans payable to unrelated third		_		24			
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com			239,050.	25	270,500.		
	26	Total liabilities. Add lines 17 through 25			2,205,327.	26	2,023,156.		
ses		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.							
an	27	Unrestricted net assets		<u>L</u>	21,748,199.	27	21,703,127.		
Bal	28	Temporarily restricted net assets			160,508.	28	453,871.		
힏	29	Permanently restricted net assets				29			
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	e ►						
2	30	Capital stock or trust principal, or current funds		30					
8	31	Paid-in or capital surplus, or land, building, or equipm		31					
As	32	Retained earnings, endowment, accumulated income,	or othe	er funds		32			
fet	33	Total net assets or fund balances			21,908,707.	33	22,156,998.		
_	34	Total liabilities and net assets/fund balances			24,114,034.	34	24,180,154.		

D	W. Daniel Line (Not Appell					-
Pai	TXI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				186.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	, 48	34,8	328.
3	Revenue less expenses. Subtract line 2 from line 1	3		51	5,6	558.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21	, 90	8,7	707.
5	Net unrealized gains (losses) on investments.	5		-26	57,3	367.
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 in Schedule O).	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	22	,15	6,9	98.
Pai	t XII Financial Statements and Reporting					
	Check 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: Cash X Accrual Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain						
in Schedule O.						
2a Were the organization's financial statements compiled or reviewed by an independent accountant?						Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe	ed on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
ı	Were the organization's financial statements audited by an independent accountant?			2 b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	ate				
	basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
(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?			ا ۔	v	
				2 c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single					
	Audit Act and OMB Circular A-133?			3 a		X
ı	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	lit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3 b		
BAA	TEEA0112L 08/03/18		F	orm	990 ((2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number The Junior League of Houston, Inc. 74-1185659 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support			·	•		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').	2,449,043.	2,504,451.	1,918,504.	2,117,743.	2,443,167.	11,432,908.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	2,449,043.	2,504,451.	1,918,504.	2,117,743.	2,443,167.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,398,401.
6	Public support. Subtract line 5 from line 4						10,034,507.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2,449,043.	2,504,451.	1,918,504.	2,117,743.	2,443,167.	11,432,908.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	162,929.	199,147.	225,576.	207,987.	269,781.	1,065,420.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	53,546.	41,777.	, , , , ,	, , , , , ,	,	95,323.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI		,		17,307.		17,307.
	Total support. Add lines 7 through 10						12,610,958.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	12,257,563.
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 20	018 (line 6, colum	n (f) divided by lir	ne 11, column (f)))	14	79.57%
15	Public support percentage from	2017 Schedule A,	Part II, line 14			15	80.85%
16a	33-1/3% support test—2018. If t and stop here. The organization	the organization di qualifies as a pul	id not check the bolicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	3% or more, checl	this box
b	33-1/3% support test—2017. If the and stop here. The organization	ne organization did n qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he	re. Explain in Part	t VI how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	est—2017. If the or meets the 'facts-a d-circumstances'	rganization did no and-circumstance: test. The organiza	ot check a box on s' test, check this ation qualifies as	line 13, 16a, 16b box and stop he a publicly support	, or 17a, and line re. Explain in Parted organization.	15 is 10% t VI how the ►
18	Private foundation. If the organi						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. (11.)						
Calend	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						•			
3	Gross receipts from activities that are not an unrelated trade or business under section 513.									
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.									
5	The value of services or facilities furnished by a governmental unit to the organization without charge									
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons									
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.									
С	Add lines 7a and 7b									
8	Public support. (Subtract line 7c from line 6.)									
	tion B. Total Support				1					
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
	Amounts from line 6									
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975									
	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.									
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).									
	Total support. (Add lines 9, 10c, 11, and 12.)									
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·							
	tion C. Computation of Pul					, ,				
	Public support percentage for 20	•			•		%			
	Public support percentage from 2					16	0/0			
	tion D. Computation of Inv					1 1				
17	Investment income percentage for	•	• • •	-			0,0			
18	Investment income percentage fi						%			
		this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐			
	is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization									

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	11 0 0		V	NI.
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If</i> 'Yes,' provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations), and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
		ıva		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	t IV	Supporting Organizations (continued)			
-11	المماا	be exemination accorded a cift or contribution from any of the following mayons 2		Yes	No
		he organization accepted a gift or contribution from any of the following persons? son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
-	gover	rning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations			
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
'	or ele Part I If the direct	ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
•		ed to such powers during the tax year.	1		
2	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sect	tion (C. Type II Supporting Organizations			
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organ	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how rganization maintained a close and continuous working relationship with the supported organization(s).	2		
	trie oi	rganization maintained a close and continuous working relationship with the supported organization(s).			
3	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
		s regard.	3		
Sect	tion I	E. Type III Functionally Integrated Supporting Organizations			
1	Check	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	Т	he organization satisfied the Activities Test. Complete line 2 below.			
b	Т	he organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Т	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ารtruc	tions).	
2	Activi	ties Test. Answer (a) and (b) below.		Yes	No
а	suppo organ respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
		antially all of its activities.	2a		
b	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
	organ	nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
а	Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		be organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

	ino dunior bouguo or moubcon, i		, , , , ,	.0000
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). See through E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
(c Fair market value of other non-exempt-use assets	1c		
(d Total (add lines 1a, 1b, and 1c)	1d		
(e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	<u> </u>	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
_				

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). BAA

Schedule A (Form 990 or 990-EZ) 2018

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
i Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
E LACESS HUIH 2010			

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

Part II, Line 10 - Other Income

Nature and Source	2018	2017	2016	2015	2014
Workers' comp div / other	r	\$ 17,307.			
Total	\$ 0.	\$ 17,307.	\$ 0.	\$ 0.	\$ 0.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

PUBLIC DISCLOSURE COPY

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

The Junior League of Houston,	Inc.	74-1185659
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
	oz/ pontiour organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	tto rounduor.
Check if your organization is covered by the General	Rule or a Special Rule.	
Note: Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General Rule		
For an organization filing Form 990, 990-EZ	, or 990-PF that received, during the year, contributions tota	ling \$5,000 or more (in money or
property) from any one contributor. Comple	te Parts I and II. See instructions for determining a contribut	or's total contributions.
Special Rules		
X For an organization described in section 50	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1	ort test of the regulations
received from any one contributor, during th	ne year, total contributions of the greater of (1) \$5,000; or (2,0)-EZ, line 1. Complete Parts I and II.) 2% of the amount on (i)
Form 990, Part VIII, line Th; or (ii) Form 990	J-EZ, line 1. Complete Parts I and II.	
For an organization described in section 50°	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit	rom any one contributor,
during the year, total contributions of more	than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit children or animals. Complete Parts I (entering 'N/A' in colu	erary, or educational
contributor name and address), II, and III.	children of animals. Complete Farts I (entering IVA in cold	min (b) instead of the
Ear on arganization described in section EO	1(a)(7) (9) or (10) filing Form 000 or 000 F7 that received f	rom ony one contributor
	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f r religious, charitable, etc., purposes, but no such contributio	
	e total contributions that were received during the year for a	
	y of the parts unless the General Rule applies to this organi	
it received <i>nonexclusively</i> religious, charitab	le, etc., contributions totaling \$5,000 or more during the year	r • •
Caution: An organization that isn't covered by t	he General Rule and/or the Special Rules doesn't file Sched	ule B (Form 990, 990-F7, or
990-PF), but it must answer 'No' on Part IV. Iin	e 2. of its Form 990; or check the box on line H of its Form 9	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, 990-EZ, or 990	<i>1-</i> PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

N f
Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number

The Junior League of Houston, Inc.

74-1185659

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$350,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$410,620.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$90,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 	\$	Person Payroll Complete Part II for noncash contributions.)

Name of organization

Employer identification number

The Junior League of Houston, Inc.

74-1185659

Part II	Noncash Property	(see instructions).	Use duplicate copies	s of Part II if additional	space is needed.

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional	I space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 ₄	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
BAA	<u> </u>	\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

- Concadio B (1 01111 350, 350 E2, 01 350 1 1) (2010)			i agc
Name of organization	Employer ident	tification nu	umber
The Junior League of Houston, Inc.	74-1185	659	
Part III Exclusively religious, charitable, etc., contributions to organizations described i	n section	501(c)(7), (8),

	or (10) that total more than \$1,000 for the following line entry. For organizations of	ompleting Part III, enter the tota	al of exclusive	ely religious, charitable, etc.,	
	contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	(Enter this information once. So	ee instruction	s.)	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	N/A				
		(e)		<u> </u>	
	Transferee's name, addres	(e) Transfer of gift	Pols	itionship of transferor to transferee	
	Transferee 3 flame, address	3, and 211 1 4	Titolo	dionship of dansieror to dansieree	
(a)	(b)	(c)		(q)	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		(e) Transfer of gift		L	
	Transferee's name, addres	Transfer of gift s. and ZIP + 4	Relationship of transferor to transferee		
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held	
	<u></u>			 	
		(e) Transfer of gift			
	Transferee's name, addres		Rela	tionship of transferor to transferee	
					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I	Furpose of glit	USE OF GITT		Description of now gift is field	
	<u> </u>			 	
		(e) Transfer of gift			
	Transferee's name, addres		Rela	tionship of transferor to transferee	
	<u> </u>				

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

Open to Public Inspection
Employer identification number

Name of the organization

	The Junior League of Houst	on, Inc.		74-1185659
Par	t Organizations Maintaining Dono	or Advised Funds or Other	er Similar Fund	ls or Accounts.
	Complete if the organization ans	wered 'Yes' on Form 990	, Part IV, line 6	D.
		(a) Donor advised t	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 dor are the organization's property, subject to the			
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	t of the donor or donor advisor.	, or for any other p	ourpose conferring
Par				
ı aı	Complete if the organization ans	wered 'Yes' on Form 990	. Part IV. line 7	7.
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e.g., r	recreation or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation conf	tribution in the form	of a conservation easement on the
				Held at the End of the Tax Year
-	a Total number of conservation easements			
	Total acreage restricted by conservation ease			
•	Number of conservation easements on a certi	fied historic structure included	ın (a)	2 c
(Number of conservation easements included i structure listed in the National Register			. 2d
3	Number of conservation easements modified, trar tax year ►	nsferred, released, extinguished,	or terminated by the	e organization during the
4	Number of states where property subject to conse	ervation easement is located >		
5	Does the organization have a written policy re and enforcement of the conservation easemer			
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations	, and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, insper ▶\$	ecting, handling of violations, and	I enforcing conserva	ation easements during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the re	quirements of sect	ion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	s conservation easements in its roto the organization's financial s	evenue and expense statements that de	e statement, and balance sheet, and scribes the organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' on Form 990	Treasures, or (, Part IV, line 8	Other Similar Assets. 3.
1 a	a If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	eld for public exhibition, education	n, or research in fur	ue statement and balance sheet works of therance of public service, provide,
I	b If the organization elected, as permitted unde historical treasures, or other similar assets held for following amounts relating to these items:	or public exhibition, education, or	research in furthera	ance of public service, provide the
	(i) Revenue included on Form 990, Part VIII,			
	(ii) Assets included in Form 990, Part X			·
	amounts required to be reported under SFAS	116 (ASC 958) relating to thes	se items:	
	a Revenue included on Form 990, Part VIII, line			
	a Assets included in Form 990, Part X			▶\$

Part III Organizations Mainta	ining Collections	s of Art, Historica	ii ireasures, or o	Otner Similar Ass	ets (cont	inuea)
3 Using the organization's acquisition items (check all that apply):	n, accession, and other			a significant use of its	collection	
a Public exhibition		—	change programs			
b Scholarly research		e Other				
c Preservation for future gene	rations					
4 Provide a description of the organize Part XIII.		•	-			
5 During the year, did the organizato be sold to raise funds rather t	han to be maintained	I as part of the organ	ization's collection?.		Yes	No
Escrow and Custodia line 9, or reported an	amount on Form	990, Part X, line	organization ansv 21.	wered 'Yes' on Foi	m 990, F	art IV,
1 a Is the organization an agent, tru on Form 990, Part X?				assets not included	Yes	No
b If 'Yes,' explain the arrangement	t in Part XIII and con	plete the following ta	ıble:			
					Amount	
c Beginning balance						
d Additions during the year						
e Distributions during the year						
f Ending balance				. 1f		
2a Did the organization include an a					Yes	No
b If 'Yes,' explain the arrangement	t in Part XIII. Check I	nere if the explanation	n has been provided	on Part XIII		🔲
Part V Endowment Funds. C	complete if the or	ganization answe	red 'Yes' on For	<u>m</u> 990, Part IV, Iir	<u>ne 10.</u>	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back		years back
1 a Beginning of year balance	14,553,921.	13,664,643.	12,520,097	. 13,392,397.	12,98	88,256.
b Contributions	804,070.	47,891.	31,833	. 35,521.		31,694.
c Net investment earnings, gains,						
and losses	232,882.	1,220,650.	1,371,899	574,997.	69	94,399.
d Grants or scholarships	410,620.	365,000.	245,000	. 320,000.	3.	10,000.
e Other expenditures for facilities and programs				0.		
f Administrative expenses	15,054.	14,263.	14,186	. 12,824.	1	11,952.
g End of year balance	15,165,199.	14,553,921.	13,664,643	. 12,520,097.	13,39	92,397.
2 Provide the estimated percentage	e of the current year	end balance (line 1g	, column (a)) held as	S:		
a Board designated or quasi-endown	nent ► 5	3.36%				
b Permanent endowment ►	31.09%					
c Temporarily restricted endowme		i5 %				
The percentages on lines 2a, 2b, a						
	·					
3a Are there endowment funds not in organization by:	the possession of the o	organization that are ne	eid and administered f	or tne	Υe	es No
(i) unrelated organizations					3a(i)	X
(ii) related organizations					```	X
b If 'Yes' on line 3a(ii), are the rela						X
4 Describe in Part XIII the intende	-				30 /	<u>v</u>
		ation 3 chaowincht it	ilius. Dee rait	VIII		
Part VI Land, Buildings, and Complete if the organ		'Ves' on Form 90	00 Part IV line	112 See Form 99	n Dart Y	ling 10
Description of property	(ir	t or other basis nvestment)	b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Boo	
1 a Land			7,715,077.			15,077.
b Buildings			8,790,222.	6,056,744.	2,7	33,478.
c Leasehold improvements						
d Equipment			633,917.	443,848.	1	90,069.
e Other			1,384,328.	730,734.		53,594.
Total. Add lines 1a through 1e. (Colum	nn (d) must equal Fo	rm 990, Part X, colur				92,218.
BAA	•		•	Schedi	ule D (Form	

(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)		
<u>(F)</u>		
G)		
H)		
(1)		
otal. (Column (b) must equal Form 990, Part X, column (B) line 12.)		27./2
Part VIII Investments — Program Related.	'Yes' on Form 99	N/A 0, Part IV, line 11c. See Form 990, Part X, line 1
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	(2) 20011 14140	(S) meaned or randadom oper or one or your manner rands
(2)		
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(8)		
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(10)		
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.	N/A	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) • Part IX Other Assets. Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1
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Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4)	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4) (5)	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6)	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7)	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1
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Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B)	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 1 (b) Book value
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Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B)	'Yes' on Form 99 scription B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 1 (b) Book value (b) Book value
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Other Assets. Complete if the organization answered (a) Description of liability (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part X, column (E) (a) Description of liability (1) Federal income taxes (2) Refundable deposits (3) (4) (5) (6) (7) (8)	'Yes' on Form 99 scription B) line 15.) orm 990, Part IV, line 1 (b) Book value	O, Part IV, line 11d. See Form 990, Part X, line 1 (b) Book value (b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13.) (a) Description (b) must equal Form 990, Part X, column (B) (c) (Column (b) must equal Form 990, Part X, column (B) (d) (Description of liability (e) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (B) (a) Description of liability (f) Federal income taxes (g) Refundable deposits (g) (h) (g) (g)	'Yes' on Form 99 scription B) line 15.) orm 990, Part IV, line 1 (b) Book value	O, Part IV, line 11d. See Form 990, Part X, line 1 (b) Book value (b) Book value
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Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (C) (a) Description of liability (1) Federal income taxes (2) Refundable deposits (3) (4) (5) (6) (7) (8)	"Yes' on Form 99 scription "B) line 15.) prm 990, Part IV, line 1 (b) Book value	O, Part IV, line 11d. See Form 990, Part X, line 1 (b) Book value

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
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	6,354,943.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments. 2a -267, 367.		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) See Part XIII 2d 626,332.		
d Other (Describe in Part XIII.) See Part XIII 2d 626,332.		
e Add lines 2a through 2d.	2 e	358,965.
3 Subtract line 2e from line 1.	3	5,995,978.
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		
b Other (Describe in Part XIII.) See Part XIII 4b 968,228.		
c Add lines 4a and 4b.	4 c	1,004,508.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	7,000,486.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	r n.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	5,495,374.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.) See Part XIII 2d 425,674.		
e Add lines 2a through 2d.	2 e	425,674.
3 Subtract line 2e from line 1.	3	5,069,700.
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		
b Other (Describe in Part XIII.) See Part XIII 4b 1,378,848.		1 415 100
c Add lines 4a and 4b	4 c	1,415,128. 6,484.828.
J TOTAL CAPOLISOS. Mad IIITOS J ALIA 📆 (THIS THUST EQUAL FORM SOL, FALL, IIITO 10./		0,404,020.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, Line 4 - Intended Uses Of Endowment Fund

The endowment funds held by the Junior League of Houston Foundation are designated to initiate, finance, sustain and expand the Community Program of The Junior League of Houston, Inc.

Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990

Amounts eliminated in consolidation	\$ -410,620.
Revenue of Foundation	1,036,952.
Total	\$ 626,332.

BAA Schedule D (Form 990) 2018

Schedule D, Part XI, Line 4b Other Revenue Included On Form 990 But Not Included In F/S			
Tea Room expenses	Total	\$ \$	968,228. 968,228.
Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S			
Expenses of Foundation	Total	\$ \$	425,674. 425,674.
Schedule D, Part XII, Line 4b Other Expenses Included On Form 990 But Not Included In F/S			
Amounts eliminated in consolidation. Tea Room expenses.			410,620. 968,228. 1,378,848.

BAA Schedule D (Form 990) 2018 TEEA3305L 10/10/18

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization Employer identification number 74-1185659 The Junior League of Houston, Inc. **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. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key **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. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No 1 2 3 5 6 7 9 10 Total. 0. 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.

Schedule G (Form 990 or 990-EZ) 2018 The Junior League of Houston, Inc. 74-1185659 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. (d) Total events (a) Event #1 **(b)** Event #2 (c) Other events (add column (a) None Charity Ball through column (c) (event type) (event type) (total number) REVENUE **1** Gross receipts..... 625,153. 625,153. 2 Less: Contributions..... 454,768 454,768. **3** Gross income (line 1 minus line 2)..... 170,385 170,385. Rent/facility costs..... 35,028. 35,028. 7 Food and beverages 54,666 54,666. 48,436 48,436. Other direct expenses..... 110,234. 110,234. 10 Direct expense summary. Add lines 4 through 9 in column (d) 248,364. Net income summary. Subtract line 10 from line 3, column (d)..... -77,979. Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add column (a) through column (c)) REVENUE (a) Bingo bingo/progressive bingo (c) Other gaming Gross revenue..... **2** Cash prizes..... D X P E N C T S Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No 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?

b If 'No,' explain:

b If 'Yes,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

sch	ledule G (Form 990 or 990-EZ) 2018 The Junior League of Houston, Inc.	74-1185	659	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed administer charitable gaming?	to [Yes	No
	Indicate the percentage of gaming activity conducted in:			0
	a The organization's facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record			70
•				
	Name ►			
	Address ►			
15	a Does the organization have a contract with a third party from whom the organization receives gaming reve	nue?	Yes	No
		I the amount	t	
	of gaming revenue retained by the third party ► \$			
	c If 'Yes,' enter name and address of the third party:			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided ►			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the)		
	state gaming license?	in the	Yes	No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent organization's own exempt activities during the tax year ► \$	in the		
Pa	Irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, or	columns (i	ii) and (v):
	and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a	any addition	onal	,,
	information. See instructions.			

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

The Junior League of Houston, Inc.

General Information on Grants and Assistance

Employer identification number 74-1185659

1 Does the organization maintain records the selection criteria used to award the	to substantiate the amone grants or assistant	ount of the grants or	assistance, the grantees'				X Yes No
2 Describe in Part IV the organization's pro	ocedures for monitoring	g the use of grant fu	nds in the United States.		See I	Part IV	
Part II Grants and Other Assistar							
Form 990, Part IV, line 21,	for any recipient	triat received r	nore than \$5,000. F	rart ii can be dupii	cated if additiona	space is neede	·u.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Texas Children's Hospital							
6621 Fannin							External
Houston, TX 77030	74-1100555	501(c)(3)	54,974.	0.			Project Support
(2) Ronald McDonald House of Hous							
1907 Holcombe Blvd.							External
Houston, TX 77001	74-1984499	501(c)(3)	20,095.	0.			Project Support
(3) Casa de Esperanza de los Niños							
P.O. Box 66581							External
Houston, TX 77266	76-0105306	501(c)(3)	34,200.	0.			Project Support
(4) Child Advocates, Inc.							
2401 Portsmouth, Ste. 210							External
Houston, TX 77098	76-0111345	501 (C) (3)	32,009.	0.			Project Support
(5) Texas Children's Hospital							Mobile
6621 Fannin Street							Pediatric
Houston, TX 77030	74-1100555	501(c)(3)	12,000.	0.			Clinic
(6) Kids' Meals							
205 W. Crosstimbers							External
Houston, TX 77018	76-0330447	501(c)(3)	44,208.	0.			Project Support
(7) Children's Museum of Houston							
1500 Binz							External
Houston, TX 77004	74-2178563	501(c)(3)	38,373.	0.			Project Support
(8) BEAR-BE A Resource CPS Kids							
2223 West Loop South							External
Houston, TX 77027	31-1516122		47,460.	0.			Project Support
2 Enter total number of section 501(c)(3	•	-					29
3 Enter total number of other organization	ions listed in the line	1 table					0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

The JLH Community Project Support line items are for agencies to which the Junior League of Houston has committed both volunteers and financial support on an ongoing basis. Unlike the JLH Community Project Support line items, the External Community Assistance line items will change each fiscal year. The Junior League of Houston provides Community Assistance Grants to 501(c)(3) organizations that do not receive ongoing volunteer support or financial assistance through the League's existing community projects. The League's Community Assistance Committee reviews the grant requests, prioritizes them based on their alignment with member-determined focus areas and conducts site visits before making recommendations for funding. When selecting recipients, the committee considers whether an agency's request would

74-1185659

The Junior League of Houston, Inc.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (continued)

address a critical or basic need, fund a pilot project or expand a significant service to the community.

Each recipient agency must sign a contract with the League setting forth the purpose of the grant and agreeing to the League's grant disbursement terms. The agency must also provide documentation including receipts that demonstrate that the funds were used as specified in the contract.

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2018

Continuation Page 1 of 3

Schedule I Cont (Form 990) 2018

Name of the organization

The Junior League of Houston, Inc.

Employer identification number 74-1185659

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Baylor College of Medicine							
1504 Ben Taub Loop							External
Houston, TX 77030	74-1613878	501(c)(3)	33,616.				Project Support
<u>Star_of_Hope</u>							
_ 6897 Ardmore Street							External
Houston, TX 77054	74-1152599	501(c)(3)	22,923.				Project Support
<u> American Diabetes Association</u>							
<u> 1701 North Beauregard St.</u>							External
Alexandria, VA 22311	13-1623888	501(c)(3)	8,959.				Project Support
_ AIDS Foundation Houston, Inc.							
3202 Weslayan Street							External
Houston, TX 77027	76-0073661	501(c)(3)	18,595.				Project Support
_ <u>Dress for Success Houston</u>							
3310 Eastside Street							External
Houston, TX 77098	76-0579697	501(c)(3)	10,490.				Project Support
<u> Northwest Assis Ministries</u>							
15555							Community
Houston, TX 77090	76-0088702	501(c)(3)	12,000.				Assistance
_ <u>The Woods Project</u>							
2700_Southwest_Freeway							Community
Houston, TX 77098	26-2959996	501(c)(3)	19,000.				Assistance
The_Westview_School							
1900_Kersten_Dr							External
Houston, TX 77043	76-0487522	501(c)(3)	20,620.				Project Support
<u> Memorial Hermann Hospital </u>							
_ 909 Frostwood Ste 2100							External
Houston, TX 77024	74-1152597	501(c)(3)	8,400.				Project Support
BakerRipley							
PO_Box_271389							External
Houston, TX 77277	23-7062976	501(c)(3)	11,211.				Project Support

TEEA4001L 07/13/18

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2018

Continuation Page 2 of 3

Name of the organization

The Junior League of Houston, Inc.

Employer identification number
74-1185659

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)												
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance					
The Houston Food Bank												
535_Portwall_St							External					
Houston, TX 77029	74-2181456	501(c)(3)	11,000.				Project Support					
_ Houston Zoo												
6200 <u>Hermann Park Drive</u>							Swap Shop -					
Houston, TX 77030	74-1590271	501(c)(3)	5,487.				Project Support					
Blessings in a Backpack, Inc.												
4121 Shelbyville Rd							Community					
Louisville, KY 40207	26-1964620	501(c)(3)	30,000.				Assistance					
MD Anderson Cancer Center												
PO_Box_4486							External					
Houston, TX 77210	74-6001118	501(c)(3)	5,165.				Project Support					
Chinquapin Preparatory School												
2615 E Wallisville Rd							External					
Highlands, TX 77562	74-1616827	501(c)(3)	5,386.				Project Support					
Candlelighters Childhood CFA							Community					
12919 Southwest Fwy Suite 100							Assistance					
Stafford, TX 77477	76-0367440	501(c)(3)	13,650.									
Children Literacy Initiative												
1235 N Loop W #930							Community					
Houston, TX 77022	23-2515768	501(c)(3)	21,250.				Assistance					
ECHOS												
9600 S Gessner Rd							Community					
Houston, TX 77071	76-0645238	501(c)(3)	11,800.				Assistance					
Free the Captives												
2211 Rayford Road # 111-418							Community					
Spring, TX 77386	45-2214142	501(c)(3)	15,000.				Assistance					
Sickle Cell Asso of TX MT Fdn												
2500 E T C Jester Blvd #150A							Community					
Houston, TX 77008	74-2934173	501(c)(3)	13,100.				Assistance					

TEEA4001L 07/13/18

Schedule I Cont (Form 990) 2018

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2018

Continuation Page 3 of 3

Name of the organization Employer identification number The Junior League of Houston, Inc. 74-1185659 Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.) (c) IRC section (g) Description of (a) Name and address of organization or government (b) EIN (d) Amount of cash (f) Method of (h) Purpose of (e) Amount of nongrant or assistance (if applicable) valuation (book, grant cash assistance noncash FMV, appraisal, assistance other) C.G. Jung Educational Center ___5200 Montrose Blvd____ Community 74-1478433 501 (c) (3) Houston, TX 77006 10,000. Assistance __Undies_for_Everyone__ 4019 S Braeswood Blvd Community Focus Houston, TX 77025 46-0640114 501 (c) (3) 10,000. Event

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information**

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

74-1185659

Name of the organization The Junior League of Houston, Inc.

Par	t I Questions Regarding Compensation			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	Part		103	140
	First-class or charter travel Housing allowance or residence for personal				
	Travel for companions Payments for business use of personal resi	dence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (such as maid, chauffeur)	, chef)			
Ł	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain		1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors				
2	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	, 	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organiz establish compensation of the CEO/Executive Director, but explain in Part III.	ation to			
	Compensation committee Written employment contract				
	Independent compensation consultant Compensation survey or study				
	Form 990 of other organizations Approval by the board or compensation con	nmittee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:				
	Receive a severance payment or change-of-control payment?		4 a		Χ
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		Χ
C	Participate in, or receive payment from, an equity-based compensation arrangement?		4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:				
	The organization?		5 a	Χ	
k	nany related organization?		5 b		X
	If 'Yes' on line 5a or 5b, describe in Part III.	art III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:				
a	The organization?		6a		Х
Ł	Any related organization?		6b		Χ
	If 'Yes' on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.		7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.		8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9		
BAA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (F	Form	1 990)	2018

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

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

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

(A) Name and Title (B) Season of the virtual state of the pendits		(B) Breakdown	of W-2 and/or 1099-MI	SC compensation	(C) Detirement	(D) Namtavahla	(E) Total of	(E) Componentian	
1 Tea Room Gen Mgr (6) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.			(i) Base compensation (ii) Bonus & incentive compensation (iii) Other reportable compensation		l deferred	benefits	columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
1 Tea Room Gen Mgr (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Malcolm Rowland	(i)	144,089.	45,596.	600.	0.	10,810.	201,095.	0.
Columbia	1 Tea Room Gen Mgr	(ii)		0.	0.	0.	0.		
Columbia									
3 (i) (i) (ii) (ii) (ii) (iii)	2								
4 (i) (ii) (ii) (ii) (ii) (ii) (ii) (ii)				L		L		L	
4 (i) (i) (i) (i) (ii) (ii) (ii) (ii) (i	3								
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5 (i) (i) (i) (ii) (ii) (iii)	4								
6 (i) (ii) (ii) (ii) (iii) (ii				<u> </u>		L			
6 (i) (i) (i) (ii) (ii) (iii)	5								
7 (i) (ii) (iii) (<u> </u>		L		L	
7 (i) (i) (i) (ii) (ii) (ii) (ii) (ii) (6								
8 (i) (i) (i) (ii) (ii) (ii) (iii) (
8 (i) (i) (i) (ii) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii	7								
9 (i) (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiii) (iiiiii) (iiiiiii) (iiiiiiii									
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10 (i) (ii) (ii) (iii) (L			
10 (i) (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiii) (iiiiii) (iiiiii) (iiiiiii) (iiiiiiii	9								
11 (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiiii) (iiiiiii) (iiiiiiii				 		L		<u> </u>	
11 (i) (i) (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiiiii) (iiiiiiii	10								
(i) (ii) (ii) (iii) (iiii) (iiii) (iiiiiiii				 				 	
12 (ii) (ii) (iii) (iiii) (iiii) (iiiiii) (iiiiiiii	11								
13 (i) (ii) (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iiii) (iiiiiiii				 				 	
13 (i) (i) (i) (ii) (ii) (ii) (ii) (iii)	12								
14 (i) (i) (i) (ii) (ii) (ii)				 				 	
14 (ii) (i) (ii) (ii) (ii)	13								
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15 (ii) (i) (ii) (ii)	14								
16 (i)				 				L	
16 (ii)	15								
				 				L	
		(ii)							

BAA

TEEA4102L 10/29/18

Schedule J (Form 990) 2018

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 5 - Compensation Contingent On Revenues Or Related Organization

The Tea Room General Manager's compensation includes an incentive amount. The incentive amount is based on a percentage calculation of revenues and has been consistent for several years.

Part III - Additional Information

The League does not compensate its CEO/Executive Director. In determining the compensation for the Tea Room General Manager (key employee shown in Part II), the League will periodically reference a compensation survey. Approval for increases are handled by the compensation committee, which is a subset of the personnel committee.

TEEA4103L 10/29/18

SCHEDULE M (Form 990)

Name of the organization

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service ► Go to www.ii

The Junior League of Houston, Inc.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

74-1185659

Par	rt I Types of Property							
		Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Meth noncash	od of o	d) determir bution a	
1	Art – Works of art							
2								
3								
4								
5								
6								
7								
8								
9								
10								
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18								
19								
20								
21	Taxidermy							
22								
23								
24								
25			161	74,040.	Sales	nro	ceeds	
26		X	2	· · · · · · · · · · · · · · · · · · ·		рто	cccab	
27				1,330.	1111			
28								
29			vear for contributions for	or which the				
23	organization completed Form 8283, Part IV, I				29			
							Yes	No
20	Denies Herman did Hermanis-Historia			l E 1 H				
зua	a During the year, did the organization receive by it must hold for at least three years from the							
	for exempt purposes for the entire holding pe					30 a		Х
b	b If 'Yes,' describe the arrangement in Part II.							
	Does the organization have a gift acceptance	policy that requi	res the review of any	nonstandard contributio	ns?	31	Х	
	a Does the organization hire or use third parties							
JŁa	noncash contributions?					32 a		Х
b	b If 'Yes,' describe in Part II.							
	If the organization didn't report an amount in describe in Part II.	column (c) for a	type of property for w	hich column (a) is chec	ked,			

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

BAA TEEA4602L 10/22/18 Schedule M (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

The Junior League of Houston, Inc.

Employer identification number 74–1185659

Form 990, Part III, Line 1 - Organization Mission

The Junior League of Houston, Inc. is an organization of women committed to promoting voluntarism, developing the potential of women, and improving communities through the effective action and leadership of trained volunteers. Its purpose is exclusively educational and charitable. The League has been "Building A Better Community" by addressing community needs, including basic needs, abuse of women and children, healthcare, education and cultural enrichment.

Form 990, Part III, Line 4d - Other Program Services Description

Publishing: The publishing and sale of cookbooks is a long-standing tradition of Junior Leagues. The League's activities in developing, publishing, and selling cookbooks further the League's exempt purpose by providing an additional training arena for members. Publishing a cookbook is a collaborative effort that generates camaraderie and commitment to the League among the entire membership. League volunteers who participate in publishing activities are trained in numerous skills that they may use in their volunteer and professional lives.

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

Provisional: Provisional members are those engaged in complying with the requirements for admission to active membership and are not eligible to vote or hold office. Actives: Active members have completed the requirements for provisional membership and fulfill the League's requirements for active membership until the end of the fiscal year in which they either attain the age of 40 or complete their tenth year of service in the League. Sustainer members: Sustainer members have reached the age of 40 or have completed ten or more years of active service. Emeritus: Emeritus membership is granted to any sustainer who has reached the age of 80 years.

Name of the organization

Employer identification number

The Junior League of Houston, Inc.

74-1185659

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Members elect a 7 person nominating committee from a slate of 14 names. The nominating committee slates the Executive Committee officers of the League under the leadership of the Nominating Chairman who is the League President two years removed. Active members approve the slate by acclamation or may propose an alternative slate of officers of the League prior to 14 days before the Annual Meeting in February. Officers shall assume their duties at the general meeting in May and shall serve for one year. The membership also votes to approve the Board of Directors proposed by the Executive Committee.

Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders

The membership votes to approve the League budget and material financial changes thereto (if applicable), approves by acclamation the Community Projects at the Annual Meeting in February, votes to approve the changes to the bylaws, votes to approve the Long Range Plan (if applicable) and approves by acclamation the minutes of the previous general meeting.

Form 990, Part VI, Line 11b - Form 990 Review Process

The Administrative Director manages the preparation of the tax return, including communications with the accounting firm. The Administrative Director reviews and comments on the draft return with input, as appropriate, from the Accounting Coordinator and Financial Vice President. The President, President-Elect and Communications Director then review the draft return. After all comments have been addressed, the tax return is provided to both the Finance Council and Board of Directors either in hard copy or by email. Finance Council and Board members are provided an opportunity to ask questions and comment on the tax return prior to filing with the IRS.

Name of the organization

Employer identification number

The Junior League of Houston, Inc.

74-1185659

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Prior to a Board of Directors, Council or Sub-Council action or discussion of a proposed action, members of the Board of Directors, Council or Sub-Council shall disclose any potential interest (personal, financial or business) of the member or member's family that would be affected by any action being considered for a vote by the Board of Directors, Council or Sub-Council. Such disclosure must be of record in the minutes. A member who has a conflict of interest may not participate in the discussion or vote and is required to excuse herself from the discussion of and vote on the action with which she has a conflict of interest. Prior to the meeting she may contact the moderator of the meeting to disclose material facts and to respond to questions. She may not attempt to exert her personal influence either at or outside the meeting. Each member shall annually complete a disclosure form identifying any relationships, positions, or circumstances in which she or any member of her family is involved that could contribute to a conflict of interest. Such relationships, position, or circumstances might include service as a trustee, director or consultant to a nonprofit organization or ownership of a business that might provide goods or services. Any changes during the year must be reported.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

A sub-set of the Personnel Committee, consisting of the President, President-Elect, and Financial Vice President, meets annually to review the performance and approve the compensation of the Tea Room General Manager. The Committee considers his performance, current salary comparability data and the organization's overall budget in making compensation decisions.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The audited financial statements, governing documents and conflict of interest policy are provided upon request.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Part I Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

2018

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Junior League of Houston, Inc.

Employer identification number 74-1185659

(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year assets		(f) Direct controlli entity		lling
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
Part II Identification of Related Tax-Exempt Or had one or more related tax-exempt organized to the control of	r ganizations anizations d	. Complete uring the ta	if the org	janization	answered	d 'Yes'	on Form 99	0, Part	: IV, line 34,	becau	se it	
(a) Name, address, and EIN of related organization	(b) Primary	(b) Primary activity		c) icile (state n country)	(d) Exempt (section	Code Public char (if section 5		status (c)(3))	(f) Direct controlling entity		Sec 512(b)(13 controlled entit	
(1) Junior League of Houston Fdn 1811 Briar Oaks Lane Houston, TX 77027 30-0332046	Hous	Support JL of Houston Community		···X	501 (c) (3)		12a		The Jun League Houston,	of	Yes X	No
(2) 		, = 0	_			(-)						
<u>(3)</u>												
<u>(4)</u>												

TEEA5001L 06/07/18

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	(g) Share of end-of-year assets	tionate amount in boallocations? 20 of Schedu K-1 (Form		20 of Schedule K-1 (Form	General or managing partner?		(k) Percentage ownership
		country)		512-514)			Yes	No	1065)	Yes	No	
(1)												
(2)												
(3)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled) (b)(13) d entity?
		country)	entity	or trust)				Yes	No
(1)									
(2)									
(3)									

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

Χ

Yes No

1 a

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

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

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

b Gift, grant, or capital contribution to related organization(s)			1b		X
c Gift, grant, or capital contribution from related organization(s)			1с	X	
d Loans or loan guarantees to or for related organization(s)			1 d		Χ
e Loans or loan guarantees by related organization(s)			1е		Χ
f Dividends from related organization(s)			1f		Х
g Sale of assets to related organization(s)			1g		Х
h Purchase of assets from related organization(s)			1h		Χ
i Exchange of assets with related organization(s)			1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)			1j		X
k Lease of facilities, equipment, or other assets from related organization(s)			1k		Х
I Performance of services or membership or fundraising solicitations for related organization(s)				Х	
m Performance of services or membership or fundraising solicitations by related organization(s)				21	Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				X	
o Sharing of paid employees with related organization(s)				X	
G channy of paid omployoos marrolation organization(s)				Λ	
p Reimbursement paid to related organization(s) for expenses			1р		Х
q Reimbursement paid by related organization(s) for expenses.			<u> </u>	X	
The modusement paid by related organization(s) for expenses.			14	Λ	
r Other transfer of cash or property to related organization(s)			1r		v
s Other transfer of cash or property from related organization(s)					X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including cover			15		X
<u> </u>				1/	
(a) Name of related organization	(b) Transaction	(c) Amount involved	(Method of	detern	nining
	type (a-s)		amount	involv	ed
1) Junior League of Houston Fdn	С	410,620.	Amount	accr	rued
2)					
•					
3)					
<i>א</i>					
A\					
4)					
5)					
6)					
AA TEEA5003L 06/07/18		Schedu	e R (Forn	1 990)	2018

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		section		Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(Yes	No	•				
<u>(1)</u>	-																
<u>(2)</u>																	
<u>(3)</u>	-																
<u>(4)</u>																	
<u>(5)</u>	-																
<u>(6)</u>																	
<u>(7)</u>																	
<u>(8)</u>	-																
DAA					06/07/1					Cabadu	a D /	OC	201 2019				

Provide additional information for responses to questions on Schedule R. See instructions.

BAA Schedule R (Form 990) 2018 TEEA5005L 06/07/18