** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ 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. A For the 2021 calendar year, or tax year beginning JUN 1, 2021 and ending MAY 31, 2022

Open to Public Inspection

В	Check if applicab	C Name of organization			D Employer identific	cation number		
	Addre	SS T						
	chang Name				30-0332046			
	chanç Initial	<u> </u>	d d	D = = == /=i+=				
	returr Final	Number and street (or P.O. box if mail is not delivered to street at 1811 Briar Oaks Lane	aaress)	Room/suite	E Telephone numbe 713-622-4191			
	returr	/	antal anda			8,724,467.		
	ated Amer		ostai code		G Gross receipts \$			
	returr Appli	•			H(a) Is this a group re for subordinates			
	tion pendi	same as C above			H(b) Are all subordinates in			
$\overline{}$	Тах-ех	empt status: X 501(c)(3) 501(c) (4947(a)(1)	or 527	1 ` ′	list. See instructions		
		te: via www.jlh.org	10 17 (4)(1)	01 021	H(c) Group exemptio			
		forganization: X Corporation Trust Association	Other >	L Year		M State of legal domicile: TX		
	art I	Summary	·	1 = 100.		otato or rogar dormono,		
_	1	Briefly describe the organization's mission or most significant activ	rities: See Sc	hedule O				
Activities & Governance	3							
2	2	Check this box if the organization discontinued its opera	ations or dispos	sed of more	than 25% of its net ass	sets.		
۶	3	Number of voting members of the governing body (Part VI, line 1a)			3	9		
Č	4	Number of independent voting members of the governing body (Pa	art VI, line 1b)			9		
ď	5 5	Total number of individuals employed in calendar year 2021 (Part \				0		
Ξ	6	Total number of volunteers (estimate if necessary)				12		
1	7 a	Total unrelated business revenue from Part VIII, column (C), line 12				0.		
_	<u> </u>	Net unrelated business taxable income from Form 990-T, Part I, lin	e 11	·····		0.		
					Prior Year	Current Year		
4	8	Contributions and grants (Part VIII, line 1h)			28,534.	48,808.		
Revenue	9	Program service revenue (Part VIII, line 2g)						
ă	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			1,057,572.	1,064,585.		
	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1			1,086,106.	1,113,393.		
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column Grants and similar amounts paid (Part IX, column (A), lines 1-3)			472,477.	507,074.		
	13				0.	0.		
	4-	Salaries, other compensation, employee benefits (Part IX, column ((Δ) lines 5-10)		0.	0.		
Fxnenses] 16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.		
9	100 b	Total fundraising expenses (Part IX, column (D), line 25)						
Ĭ	آ ₁₇	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			102,844.	105,073.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), lin			575,321.	612,147.		
		Revenue less expenses. Subtract line 18 from line 12			510,785.	501,246.		
or	S				ginning of Current Year	End of Year		
sets	혈 20	Total assets (Part X, line 16)			20,367,107.	24,440,305.		
Net Assets or	ਤੂੰ 21	Total liabilities (Part X, line 26)			472,477.	507,074.		
2	∄ 22	Net assets or fund balances. Subtract line 21 from line 20			19,894,630.	23,933,231.		
	art II	Signature Block						
		alties of perjury, I declare that I have examined this return, including accomp			•	/ knowledge and belief, it is		
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all	information of wi	hich preparer	has any knowledge.			
٠.		Electronically Filed Signature of officer			I Date			
Sig		Caroline Kennedy, Chair			Date			
He	re	Type or print name and title						
			turo	T	Date Check	PTIN		
Pai	d	Print/Type preparer's name Preparer's signa Barbara Murphy Barbara	a Murphy		02/23/23 if self-employ			
	parer	Firm's name Blazek & Vetterling	, [Firm's EIN	76-0269860			
	Only	Firm's address 2900 Weslayan, Suite 200		THIII 3 LIIV				
201	,	Houston, TX 77027			Phone no.713	-439-5739		
Ma	v the I	RS discuss this return with the preparer shown above? See instruct	tions		[1 Hone Ho. 20	X Yes No		
1710	., iii C I	The Design of Design of Design of Matter and the control of the Co				<u> 165 NO</u>		

Pa	Statement of Program s	·		
		response or note to any line in this Part III		
1	Briefly describe the organization's mis			
		Foundation was formed for charit		
		operate for the exclusive benefit	of The	
	Junior League of Houston, In	iC.		
2		gnificant program services during the year whi		
				Yes X No
	If "Yes," describe these new services			
3	Did the organization cease conducting	g, or make significant changes in how it condu	ucts, any program services?	Yes X No
	If "Yes," describe these changes on S			
4		service accomplishments for each of its three		
	Section 501(c)(3) and 501(c)(4) organi	zations are required to report the amount of g	rants and allocations to others, the tot	al expenses, and
	revenue, if any, for each program serv			
4a	(Code:) (Expenses \$)
		eague of Houston Foundation is to		
		designated Community Program in pe		
		n, Inc.'s designated Community Pro		
		community assistance grants, col		
		unity related events or activities	as	
	determined by the Junior Lea	gue's Board of Directors.		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe on	Schedule O.)		
	(Expenses \$	including grants of \$) (Revenue \$)
4e	Total program service expenses	507,074.	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,
		· ·		200

Form 990 (2021) Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Rev. Proc. 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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?			,
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		11a		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	IIa		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	115		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes, " complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	١		ļ "
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		x
20a	complete Schedule G, Part III	20a		X
zua b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 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 (2021)

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? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	l		
	Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
204	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
-	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		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	l		
_	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30		30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? 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	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Pai	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	30		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

O21) Junior League of Houston Foundation

Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2021)
Part V Sta

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			۱
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		17
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
	to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	7.		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
Ŭ	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
D	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 13b			
	Did the appropriation was in any assessment for independent in a surface during the target and	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form 990 (2021)

Junior League of Houston Foundation

30-0332046

Page

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	to line oa, ob, or rob below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
<u>Soc</u>	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management	<u></u>		Х
360	tion A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		163	NO
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	, , , , ,			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	, , , , , , , , , , , , , , , , , , , ,	15a		Х
b	7 1 7	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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			
0	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Becky Pivec - 713-871-6656			
	1811 Briar Oaks Lane, Houston, TX 77027			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

	I	organization compensate					sate	ated any current officer, director, or trustee.						
(A)	(B)			(O	C)			(D)	(E)	(F)				
Name and title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated				
	hours per	box	box, unless person officer and a direct		rson i irecto	on is both an ector/trustee)		compensation	compensation	amount of				
	week (list any	_						from the	from related organizations	other compensation				
	hours for	direct				,		organization	(W-2/1099-MISC/	from the				
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization				
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		1099-NEC)	,	and related				
	below	vidual	tution	Je.	empl	loyee	ner			organizations				
	line)	Indi	Inst	Officer	Key	High	Former							
(1) Beth Zdeblick	2.00	1												
Chair	2.00	Х		Х				0.	0.	0.				
(2) Caroline Kennedy	1.00	1												
Vice Chair	0.00	Х		Х				0.	0.	0.				
(3) Melissa Schuck	1.00	1												
Treasurer	2,00	Х		Х				0.	0.	0.				
(4) Pamela Lovett	1.00	1												
Secretary	0.00	Х		Х				0.	0.	0.				
(5) Phillip Greendyke	1.00	1												
Director	0.00	Х						0.	0.	0.				
(6) Connelly McGreevy	1.00	1												
Director	0.00	Х						0.	0.	0.				
(7) Whitney Mears	1.00													
Director	0.00	Х						0.	0.	0.				
(8) Kristina Somerville	1.00													
Director	0.00	Х						0.	0.	0.				
(9) Alan Stewart	1.00	1												
Director	0.00	Х						0.	0.	0.				
		1												
		1												
		1												
		1												
		1												
		<u> </u>	_											
		4												
		<u> </u>	_			_								
		4												
		<u> </u>	_			_								
		4												

132007 12-09-21 Form **990** (2021)

Form 990 (2021) Junior Leagu	e of Housto	n F	oun	dat	ion	ı			30-03	3204	6	Р	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average hours per		not c		more	than o		Reportable	Reportable			stimate	
	week		ox, unless person is be fficer and a director/tr				compensation from	compensatio		ar	nount other		
	(list any	ctor						the	organization		com	pensa	
	hours for	Individual trustee or director	a.			ted		organization	(W-2/1099-MIS		fr	om th	ie
	related organizations	nstee (trustee		ao	beusa		(W-2/1099-MISC/	1099-NEC)			anizat	
	below	lual tr	tional		ploye	st com	_	1099-NEC)				d relat anizati	
	line)	Individ	Institutional t	Officer	Key employee	Highest compensated employee	Former				o.g.		10110
		1											
		-											
		1											
										-			
		1											
1b Subtotal							>	0.		0.			0.
c Total from continuation sheets to Part V								0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	0.		0.			0.
2 Total number of individuals (including but r	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	;			0
compensation from the organization												Yes	No
3 Did the organization list any former officer	director trust	00 k	·0\/ (mnl	0.404	0 Or	hio	shoet componented omn	lovoo on	ſ		163	NO
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s											3		х
4 For any individual listed on line 1a, is the si											3		
and related organizations greater than \$15											4		х
5 Did any person listed on line 1a receive or													
rendered to the organization? If "Yes." con											5		х
Section B. Independent Contractors	•												
1 Complete this table for your five highest co	mpensated inc	lepe	nde	nt co	ontra	acto	rs th	hat received more than \$	100,000 of comp	ensat	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)			(0		
Name and business	address	NO	NE					Description of s	ervices		ompe	nsatio	n
							-						
-													
							-						
							\dashv						
2 Total number of independent contractors (ncluding but n	ot lin	nited	d to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organ				-		0	-	,					

Form 990 (2021) Junior Leag Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any line	e in this Part VIII			
		Check ii Genedale O contains a response	Of flote to arry life	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt		Revenue excluded
					function revenue	business revenue	from tax under
							sections 512 - 514
nts ts		Federated campaigns 1a					
irai our	b	Membership dues 1b					
A,	С	Fundraising events					
ii.	d	Related organizations 1d					
s, G	е	Government grants (contributions)					
Sig		All other contributions, gifts, grants, and					
er Er		similar amounts not included above 1f	48,808.				
₽₽		Noncash contributions included in lines 1a-1f	,				
Contributions, Gifts, Grants and Other Similar Amounts	•	Total. Add lines 1a-1f		48,808.			
OB		Total. Add lines 1a-11	Business Code	10,000.			
	_		Busiliess Code				
<u>e</u>	2 a						
er v	b						
S	С	·					
an ev	d	<u> </u>					
Program Service Revenue	е						
<u> </u>	f	All other program service revenue					
	g	Total. Add lines 2a-2f)				
	3	Investment income (including dividends, inter-					
		other similar amounts)	>	457,124.			457,124.
	4	Income from investment of tax-exempt bond					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
		· · · · · · · · · · · · · · · · · · ·					
	C						
		Net rental income or (loss) Gross amount from sales of (i) Securities	/ii) Othor				
	7 a	(7	(ii) Other				
		assets other than inventory 7a 8,218,535	•				
	b	Less: cost or other basis					
Jue		and sales expenses 7b 7,611,074.					
Revenue	С	Gain or (loss) 7c 607,461					
	d	Net gain or (loss)	>	607,461.			607,461.
ЭĒ	8 a	Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	ı				
	b	Less: direct expenses	,				
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
	- u	Part IV, line 199a	,				
	h	Less: direct expenses 9t					
			<u>'</u>				
		Net income or (loss) from gaming activities					
	ю а	Gross sales of inventory, less returns					
		and allowances 10					
		Less: cost of goods sold	1				
\dashv	С	Net income or (loss) from sales of inventory					
<u>s</u>			Business Code				
eor Ie	11 a						
<u>a</u> n	b	·					
Sev Sev	С						
Miscellaneous Revenue		All other revenue					
		Total. Add lines 11a-11d					
	12	Total revenue See instructions	▶	1 113 393.	0 .	I 0.	1 064 585.

Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21	507,074.	507,074.							
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees									
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages									
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (nonemployees):									
а	Management									
b	Legal									
С	Accounting	6,100.		6,100.						
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees	91,428.		91,428.						
g	Other. (If line 11g amount exceeds 10% of line 25,									
	column (A), amount, list line 11g expenses on Sch 0.)	4,678.		4,678.						
12	Advertising and promotion									
13	Office expenses	289.		289.						
14	Information technology									
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	120.		120.						
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance	2,458.		2,458.						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)									
а										
b										
С										
d										
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	612,147.	507,074.	105,073.	0.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									

Form 990 (2021)
Part X Balance Sheet

		Check if Schedule O contains a response or no	te to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		2,498.	2	11,069.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current o				
		trustee, key employee, creator or founder, subs	tantial contributor, or 35%			
		controlled entity or family member of any of the	se persons		5	
	6	Loans and other receivables from other disqual				
		under section 4958(f)(1)), and persons describe			6	
S	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges		1,633.	9	1,431.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		20,362,976.	11	23,629,517.
	12	Investments - other securities. See Part IV, line		·	12	
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		0.	15	798,288.
	16	Total assets. Add lines 1 through 15 (must equ		20,367,107.	16	24,440,305.
	17	Accounts payable and accrued expenses		·	17	, ,
	18	Grants payable	472,477.	18	507,074.	
	19	Deferred revenue		·	19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete			21	
"	22	Loans and other payables to any current or form				
Liabilities		trustee, key employee, creator or founder, subs				
ig		controlled entity or family member of any of the	·		22	
Ë	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on line	•			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		472,477.	26	507,074.
		Organizations that follow FASB ASC 958, che	eck here 🕨 🗓			
es		and complete lines 27, 28, 32, and 33.				
anc	27	Net assets without donor restrictions		12,208,769.	27	17,362,902.
Bal	28	Net assets with donor restrictions		7,685,861.	28	6,570,329.
P		Organizations that do not follow FASB ASC 9				
Ē		and complete lines 29 through 33.				
ō	29	Capital stock or trust principal, or current funds			29	
sets	30	Paid-in or capital surplus, or land, building, or e			30	
As	31	Retained earnings, endowment, accumulated in	T T		31	
Net Assets or Fund Balances	32	Total net assets or fund balances		19,894,630.	32	23,933,231.
	33	Total liabilities and net assets/fund balances		20,367,107.	33	24,440,305.

Form **990** (2021)

Pai	Tt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1				393.
2	Total expenses (must equal Part IX, column (A), line 25)	2				147.
3	Revenue less expenses. Subtract line 2 from line 1	3				246.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		19,	894,	630.
5	Net unrealized gains (losses) on investments	5		-2,	668,	460.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		6,	205,	815.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10		23,	933,	231.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					<u> </u>
			_		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 on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>L</u>	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		_ 2	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	it			
	Act and OMB Circular A-133?		<u>L</u> :	За		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t 🗆			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		:	3b		ı

SCHEDULE A

(Form 990)

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

2021

Open to Public Inspection

Employer identification number Name of the organization Junior League of Houston Foundation 30-0332046 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No Yes above (see instructions)) The Junior League of Houston, Inc. 74-1185659 7 Х 612,147 612,147 0. 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	• •		, ,		, ,	,,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ů	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instruction	nne)			12	
	First 5 years. If the Form 990 is for th	•					
.0	organization, check this box and stop	-			•		
Sec	ction C. Computation of Publi						······
	Public support percentage for 2021 (li			column (f))		14	%
	Public support percentage from 2020					15	%
	33 1/3% support test - 2021. If the c					nore, check this bo	x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the o	rganization did no	ot check a box on				
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	•	• • •				
	and if the organization meets the facts	_					·
	meets the facts-and-circumstances te		•	-	•	Trice and organiz	
h	10% -facts-and-circumstances test	-		*	-		
~	more, and if the organization meets th	_					. = . • • .
	organization meets the facts-and-circu				-		ightharpoonup
18	Private foundation. If the organization						
	ato roundation. Il tile organizatio	i ala not oncol a	20X 011 III 0 10, 10	α, 100, 11α, 01 111	o, or look a lib box a	and ood moducions	·

Schedule A (Form 990) 2021 Junior League of Houston Foundation 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.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1	х	
•		
2		Х
3a		Х
3b		
30		
3c		
4a		Х
4b		
4c		
5a		Х
5b		
5c		
		Х
6		Λ
7		х
8		Х
9a		Х
61		Х
9b		^
9c		х
30		
10a		х
10b		
le Δ (Forn	~ aan)	2021

Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		Х
b	A family member of a person described on line 11a above?	11b		Х
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		Х
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Х	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			v
<u>Sac</u>	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		X
360	aon or typo it outporting organizations		Va	Nic
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
'	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in:		. \	
2	Activities Test. Answer lines 2a and 2b below.	struction	yes	No
z a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		169	140
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		·	
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount (A) Prior Y				(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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	Illy integrated	d Type III supporting orga	nization (see
	instructions).	-		

Schedule A (Form 990) 2021

		. \/0\ 0							
Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D - Distributions				Current Year				
1	Amounts paid to supported organizations to accomplish exer		1						
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported							
	organizations, in excess of income from activity			2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3					
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.			6					
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which the	ne organization is responsive	1						
	(provide details in Part VI). See instructions.			8					
9_	Distributable amount for 2021 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount			10					
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ıs	(iii) Distributable Amount for 2021				
1	Distributable amount for 2021 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2021 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2021								
a	From 2016								
b	From 2017								
С	From 2018								
d	From 2019								
е	From 2020								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
<u>h</u>	Applied to 2021 distributable amount								
i_	Carryover from 2016 not applied (see instructions)								
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2021 from Section D,								
	line 7: \$								
<u>a</u>	Applied to underdistributions of prior years								
b	Applied to 2021 distributable amount								
c	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
	Part VI. See instructions.								
7	Excess distributions carryover to 2022. Add lines 3j								
	and 4c.								
8_	Breakdown of line 7:								
<u>a</u>	Excess from 2017								
	Excess from 2018								
	Excess from 2019								
d	Excess from 2020								
е	Excess from 2021								

Schedule A (Form 990) 2021

Part VI	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.)
-	
-	

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Employer identification number

Ju	nior League of Houston Foundation	30-0332046			
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				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	is covered by the General Rule or a Special Rule .)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.			
deneral ridic					
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor's	•			
Special Rules					
sections 509(a)(1) contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, ang the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) IZ, line 1. Complete Parts I and II.	d that received from any one			
For an organization	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	any one			
contributor, durin	g the year, total contributions of more than \$1,000 exclusively for religious, charitable, sc	ientific,			
•	ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (e b) instead of the contributor name and address), II, and III.	ntering			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
ū	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fore 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,	,,			
	ng requirements of Schedule B (Form 990).	, , , , , , , , , , , , , , , , , , ,			
LHA For Paperwork Reduc	tion Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2021)			

Name of organization

Employer identification number

Junior League of Houston Foundation

30-0332046

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.

Name of organization

Employer identification number

Junior League of Houston Foundation

30-0332046

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

Employer identification number

Name of organization

nior Leag	ue of Houston Foundation			30-0332046
fr	xclusively religious, charitable, etc., contribution any one contributor. Complete columns (a) ompleting Part III, enter the total of exclusively religious, of lise duplicate copies of Part III if additional states.	through (e) and the following line entry charitable, etc., contributions of \$1,000 or le	/. For organizations	
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of tra	ansferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
<u>rt I </u>				
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of tra	ansferor to transferee
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
_		(e) Transfer of gift		
_	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	ansferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
$-\begin{vmatrix} - \\ - \end{vmatrix}$				
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of tra	ansferor to transferee
	n ansieree s name, audress, ar	M &IF T T	กอเสนบกรกฤษ บา โกร	
1				

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.

2021 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

30-0332046 Junior League of Houston Foundation Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Othe	r Simila	r Assets	(conti	nued)	
3	Usin	g the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make s	significant	use of its		-	
	colle	ction items (check all that apply):								
а		Public exhibition	d	Loan or excl	nange program					
b		Scholarly research	е	Other						
С		Preservation for future generations								
4	Prov	ide a description of the organization's co	llections and explain	how they further th	e organization's exe	mpt purpo	se in Part	XIII.		
5	Durir	ng the year, did the organization solicit o	r receive donations o	of art, historical treas	ures, or other simila	r assets		_		
_		sold to raise funds rather than to be ma						Yes		No
Par	t IV	Escrow and Custodial Arrang		ete if the organization	n answered "Yes" or	n Form 990), Part IV, I	ine 9, or		
		reported an amount on Form 990, Par	· · ·							
1a		e organization an agent, trustee, custodi						_		1
		orm 990, Part X?						Yes		No
b	If "Ye	es," explain the arrangement in Part XIII	and complete the fol	lowing table:			T			
								Amoun	τ	
C	-	nning balance								
d		tions during the year								
e		ibutions during the year								
f		ng balance						7		
2a		he organization include an amount on Fo	·	·				Yes		No
Par		es," explain the arrangement in Part XIII. Endowment Funds. Complete in								
· u	• •	Endownient Fands: Complete	(a) Current year	(b) Prior year		(d) Three	vears hack	(e) Fou	r vears h	nack
10	Pogi	nning of year halance	19,894,630.	15,358,694.	15,165,199.	'	53,921.	_ ` _	,664,6	
1a h		nning of year balance ributions	48,808.	28,534.	26,637.		04,070.		47,8	
b		nvestment earnings, gains, and losses	-1,695,302.	4,993,991.	651,249.		32,882.			
d		its or scholarships	507,074.	472,477.	470,412.		10,620.	365,000.		
e		er expenditures for facilities	227,2720	,	211, 222		, ,		,	•
C		•								
f		programs inistrative expenses	13,646.	14,112.	13,979.		15,054.		14,2	263.
g		of year balance	17,727,416.	19,894,630.	15,358,694.		65,199.	14	,553,9	
2		ide the estimated percentage of the curr		e (line 1g. column (a)			<u> </u>			
a		d designated or quasi-endowment	62.9400	%	,					
b		nanent endowment > 27.1500	%	— / -						
С		n endowment 9.9100								
		percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За		here endowment funds not in the posses	•	tion that are held an	d administered for the	he organiz	ation			
	by:	·	•			· ·			Yes	No
	(i) U	Unrelated organizations						3a(i)		Х
		Related organizations						3a(ii)		Х
b	If "Ye	es" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b		
4	Desc	cribe in Part XIII the intended uses of the		wment funds.						
Par	t VI	Land, Buildings, and Equipm	ent.							
		Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.				
		Description of property	(a) Cost or o basis (investn	, , , , , ,	1 ' '	Accumulate epreciation		(d) Boo	k value	•
1a	Land	I								
b	Build	lings								
С		ehold improvements								
d	Equi	pment								
	Othe	r								
Total	. Add	lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 10	Oc.)		>			0.

			11b. See Form 990, Part X, line 12.	
	n of Security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market valu
	derivatives			
-	ld equity interests			
Other _				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
al. (Col. (b) art VIII I	must equal Form 990, Part X, col. (B) line 12.) ► Investments - Program Related.			
	Complete if the organization answered "Yes" of	on Form 000 Part IV line	11c Soc Form 000 Part V line 13	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd of year market valu
(4)	(a) Description of investment	(b) BOOK value	(c) Wethod of Valuation. Cost of e	nu-or-year market valu
(1) (2)				
(2)				
(3)				
<u>(4)</u>				
(5)				
(6) (7)				
(7)				
(8)				
(9)	must squal Form 000 Port V sel. (P) line 10 \			
Part IX	must equal Form 990, Part X, col. (B) line 13.)			
	Complete if the organization answered "Yes" o	on Form 990 Part IV line	11d See Form 990 Part X line 15	
		Description		(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·	1		()
<u>\''</u>				
(2)				
(2)				
(3)				
(3) (4)				
(3) (4) (5)				
(3) (4) (5) (6)				
(3) (4) (5) (6) (7)				
(3) (4) (5) (6) (7) (8)				
(3) (4) (5) (6) (7) (8) (9)	n (h) must equal Form 990. Part Y. col. (R) line	15)		
(3) (4) (5) (6) (7) (8) (9)	n (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	15.)		
(3) (4) (5) (6) (7) (8) (9) tal. (Columniant X)	Other Liabilities.			25.
(3) (4) (5) (6) (7) (8) (9) tal. (Columniant X)	n (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" of the complete if the organization of liability			
(3) (4) (5) (6) (7) (8) (9) (al. (Columniant X)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			
(3) (4) (5) (6) (7) (8) (9) (al. (Columniart X)	Other Liabilities. Complete if the organization answered "Yes" o			
(3) (4) (5) (6) (7) (8) (9) (al. (Columniant X) (1) Federa (2)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			
(3) (4) (5) (6) (7) (8) (9) (al. (Column art X) (Column (Colum	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			
(3) (4) (5) (6) (7) (8) (9) tal. (Column art X C (1) Feders (2) (3) (4)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			
(3) (4) (5) (6) (7) (8) (9) tal. (Column art X (0) (1) Federa (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			
(3) (4) (5) (6) (7) (8) (9) tal. (Column art X (2) (1) Federa (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			
(3) (4) (5) (6) (7) (8) (9) tal. (Column (1) Federa (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			25. (b) Book value
(3) (4) (5) (6) (7) (8) (9) tal. (Column art X (2) (1) Federa (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered "Yes" of a Description of liability			

1 Total re	,	, line 12a.			
	venue, gains, and other support per audited financial statements			1	4,559,320.
2 Amount	ts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unr	ealized gains (losses) on investments	2a	-2,668,460.		
b Donate	d services and use of facilities	2b			
c Recove	ries of prior year grants	2c			
d Other ([Describe in Part XIII.)	2d	6,205,815.		
e Add line	es 2a through 2d			2e	3,537,355.
3 Subtract	t line 2e from line 1			3	1,021,965.
4 Amount	s included on Form 990, Part VIII, line 12, but not on line 1:				
a Investm	ent expenses not included on Form 990, Part VIII, line 7b	4a	91,428.		
b Other ([Describe in Part XIII.)	4b			
c Add line	es 4a and 4b			4c	91,428.
5 Total re	venue. Add lines 3 and 4c. (This must equal Form 990. Part I. line	12.)	<u></u>	5	1,113,393.
	Reconciliation of Expenses per Audited Financial S		Expenses per F	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line 12a.			
				1	520,719.
2 Amount	ts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
a Donate	d services and use of facilities	2a			
b Prior ye	ar adjustments	2b			
c Other lo	osses	2c			
d Other ([Describe in Part XIII.)	2d			
e Add line	es 2a through 2d			2e	0.
3 Subtract	t line 2e from line 1			3	520,719.
4 Amount	ts included on Form 990, Part IX, line 25, but not on line 1:				
a Investm	ent expenses not included on Form 990, Part VIII, line 7b	4a	91,428.		
b Other ([Describe in Part XIII.)	4b			
c Add line	es 4a and 4b			4c	91,428.
5 Total ex	spenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line				
David VIIII		e 18.)		5	612,147.
Part XIII	Supplemental Information.	, 			·
Provide the delines 2d and 4	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar lb; and Part XII, lines 2d and 4b. Also complete this part to provide	nd 4; Part IV, lines 1b a	and 2b; Part V, line 4		
Part XIII S Provide the delines 2d and 4	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar lb; and Part XII, lines 2d and 4b. Also complete this part to provide	nd 4; Part IV, lines 1b a	and 2b; Part V, line 4		·
Provide the delines 2d and 4	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar lb; and Part XII, lines 2d and 4b. Also complete this part to provide	nd 4; Part IV, lines 1b a e any additional inform	and 2b; Part V, line 4		·
Part XIII S Provide the delines 2d and 4 Part V, li	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar b; and Part XII, lines 2d and 4b. Also complete this part to provide ne 4:	nd 4; Part IV, lines 1b a e any additional inform	and 2b; Part V, line 4		-
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar lb; and Part XII, lines 2d and 4b. Also complete this part to provide the second s	nd 4; Part IV, lines 1b a e any additional inform	and 2b; Part V, line 4		-
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are lib; and Part XII, lines 2d and 4b. Also complete this part to provide the second	nd 4; Part IV, lines 1b a e any additional inform	and 2b; Part V, line 4		-
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated of The Jun	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are lib; and Part XII, lines 2d and 4b. Also complete this part to provide the second	nd 4; Part IV, lines 1b a e any additional inform	and 2b; Part V, line 4		
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated of The Jun Part XI, L	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are lab; and Part XII, lines 2d and 4b. Also complete this part to provide the part to provide the second	nd 4; Part IV, lines 1b are any additional inform	and 2b; Part V, line 4 ation.		
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated of The Jun Part XI, L	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar Ib; and Part XII, lines 2d and 4b. Also complete this part to provide the second s	nd 4; Part IV, lines 1b a e any additional inform	and 2b; Part V, line 4 ation.		-
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated of The Jun Part XI, L	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are lab; and Part XII, lines 2d and 4b. Also complete this part to provide the part to provide the second	nd 4; Part IV, lines 1b are any additional inform	and 2b; Part V, line 4 ation.		-
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated of The Jun Part XI, L	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are lab; and Part XII, lines 2d and 4b. Also complete this part to provide the part to provide the second	nd 4; Part IV, lines 1b are any additional inform	and 2b; Part V, line 4 ation.		
Part XIII S Provide the delines 2d and 4 Part V, li The Junior designated of The Jun Part XI, L	Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a are lab; and Part XII, lines 2d and 4b. Also complete this part to provide the part to provide the second	nd 4; Part IV, lines 1b are any additional inform	and 2b; Part V, line 4 ation.		·

Schedule D (Form 990) 2021

SCHEDULE I (Form 990)

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

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

Attach to Form 990.

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

2021
Open to Public Inspection

Name of the organization							Employer identification number
Junior League		oundation					30-0332046
Part I General Information on Grants a							
1 Does the organization maintain records t							
criteria used to award the grants or assis	stance?						Yes No
2 Describe in Part IV the organization's pro						· "	W. F. Od. 6
Part II Grants and Other Assistance to I recipient that received more than 9					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
The Junior League of Houston, Inc.							
1811 Briar Oaks Lane							Support for JLH Community
Houston, TX 77027	74-1185659	501(c)(3)	507,074.	0.			Program
2 Enter total number of section 501(c)(3) a	nd government org	ganizations listed in th	e line 1 table				1 .
3 Enter total number of other organizations	s listed in the line 1	I table					

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	<u> </u>
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
Part I, Line 2:					
The purpose of the Foundation's Community Endowment	t Fund is to	finance,			
sustain, expand and initiate The Junior League of 1	Houston, Inc.	's (the			
"League") designated Community Program. The Foundate	tion adheres	to a strict			
spending policy that provides for an allowable form	nulaic distri	bution when			
Foundation assets exceed \$10 million on May 31 of					
coincides with the end of the fiscal year for both					
Foundation board submits the amount available for	ustribution	to the			
League board after the August Foundation board meet	ting. The Lea	gue board			

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Junior League of Houston Foundation

Employer identification number 30-0332046

Form 990, Part I, Line 1, Description of Organization Mission:
The Junior League of Houston Foundation was formed for charitable and
educational purposes and to serve as custodian of funds for The Junior
League of Houston, Inc.
Form 990, Part VI, Section A, line 7a:
A majority of the directors of the Foundation are selected by the
Foundation's supported organization, The Junior League of Houston, Inc.
Form 990, Part VI, Section B, line 11b:
All directors are provided a copy of the Form 990 via email for their
review prior to filing with the IRS.
Form 990, Part VI, Section B, Line 12c:
Annually all directors receive a copy of the Code of Ethics and Conflict of
Interest policy for the Foundation. The Directors are asked to read both
documents and sign an annual statement that they have reviewed and will
comply with the contents. In connection with any actual or possible
conflict of interest, an interested person must disclose the existence of
the financial interest and be given the opportunity to disclose all
material facts to the directors considering the proposed transaction or
arrangement. Detailed procedures for dealing with a potential conflict are
explained within the Conflict of Interest Policy document.
Form 990 Part VI Section C Line 19.
Form 990, Part VI, Section C, Line 19:

Documents are available to the public upon request.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

Junior League of Houston Foundation

Employer identification number

30-0332046

Open to Public Inspection

OMB No. 1545-0047

					-			
Part I Identification of Disregarded Entities. Comple	ete if the organization answered "Yes	s" on Form 990, Part IV, line 3	3.					
(a)	(b)	(c)	(d)	(e)		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea	ır assets		ontrolling ntity	g
	_							
	_							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	n answered "Yes" on Form 990	D, Part IV, line 34, I	pecause it had one	or more	related tax-exer	mpt	
(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity		(f) ct controlling	cont	g) 512(b)(13) rolled
of related organization		foreign country)	section	status (if section 501(c)(3))		entity		tity?
The Junior League of Houston, Inc				001(0)(0))			Yes	No
74-1185659, 1811 Briar Oaks Lane, Houston,								
TX 77027	Community support	Texas	501(c)(3)	7	N/A			Х
	_							

		0 11 70 1	W/ " F 000	D 10/10 041 01	
Dort III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990,	, Part IV, line 34, because it r	nad one or more related
art III	organizations treated as a partnership during the tax year.				

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Dispropor		Code V-UBI	General o	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
				1					1		

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		tion b)(13) rolled tity?
		country						Yes	No

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

Yes No

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

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

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
	Gift, grant, or capital contribution to related organization(s)				1b	Х	
С	Gift, grant, or capital contribution from related organization(s)				1c		Х
	Loans or loan guarantees to or for related organization(s)				1d		Х
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)				1f		Х
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		X
i	Exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
					11		Х
					1m	Х	
					10	Х	
р	Reimbursement paid to related organization(s) for expenses				1р	Х	
r	Other transfer of cash or property to related organization(s)				1r		Х
					1s	Х	
	(a)	'h)	(c)	(d)			
	Name of related organization Trans		Amount involved	Method of determining amount invo	lved		
	type	e (a-s)					
1)							
2)							
3)							
4)							
5)							
6)							
Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) S other transfer of cash or property from related organization(s) 1 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (a) Name of related organization (b) Transaction type (a·s) Amount involved Method of determining amount in type (a·s) 10 Schedul						n 990)	2021

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?		Gener mana partn Yes	(kal or Perceiging owne	k) entage ership
	-										
	_							Ochodolo			