** PUBLIC DISCLOSURE COPY **

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

Inspection

Department of the Treasury Internal Revenue Service

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

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

Open to Public

<u>A</u>	For the	2021 calendar year, or tax year beginning J	UN 1, 2021	and	ending M	AY 31, 2022				
	Check if applicable	C Name of organization				D Employer ide	ntificat	tion number		
	Addres		: .							
	Name change					74-1185	659			
	Initial return	Number and street (or P.O. box if mail is not de	livered to street address)		Room/suite	E Telephone nu	mber			
	Final	1811 Briar Oaks Lane	mvorou to otroot addrood,		Troom, cano	713-622-4				
	return/ termin- ated	City or town, state or province, country, and	7IP or foreign postal c	ode		G Gross receipts \$		15.3	39,754.	
	Amend	ed Houston, TX 77027	Zii oi ioloigii pootai o	ouo		H(a) Is this a gro	up retu		,	
	Applica	,	Sears			for subordir	•		X No	
	pendin	same as C above				H(b) Are all subordin			No	
T	Tax-exe	empt status: X 501(c)(3) 501(c) ((insert no.) 49	947(a)(1)	or 527	7 `´		t. See instruct		
		e: www.jlh.org	4 (mosternor)	· · · (\alpha)(· /	0. 02.	H(c) Group exem				
		<u> </u>	ssociation Other	>	L Year	of formation: 1925		State of legal do	micile: TX	
		Summary	·		1 = 1000	or rormanon,	1 0	rato or rogar ao		
	1	Briefly describe the organization's mission or most	significant activities:	See Sc	hedule 0					
Governance		,	· ·							
<u> </u>	2	Check this box if the organization disco	ntinued its operations	or dispo	sed of more	than 25% of its ne	t assets	s.		
Ş.	3	Number of voting members of the governing body		3		21				
Ğ	4	Number of independent voting members of the go					4		21	
8	5	Total number of individuals employed in calendar y	ear 2021 (Part V, line 2	2a)			5		53	
/itie	6	Total number of volunteers (estimate if necessary)					6		4288	
Activities	7 a	Total unrelated business revenue from Part VIII, co					7a	2,5	40,682.	
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11				7b		0.	
Φ						Prior Year		Current Y	ear	
	8	Contributions and grants (Part VIII, line 1h)				2,412,1			97,399.	
Revenue	9	Program service revenue (Part VIII, line 2g)				1,017,3		13,322.		
ě	10	investment income (Part VIII, column (A), lines 3, 4		725,5			61,264.			
ш	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)			16,5	_		47,319.	
_	1	Total revenue - add lines 8 through 11 (must equal		4,171,4			24,666.			
		Grants and similar amounts paid (Part IX, column (732,7		7	31,583.	
	14	Benefits paid to or for members (Part IX, column (A	A), line 4)				0.	0.		
S	15	Salaries, other compensation, employee benefits (I				1,629,8		1,872,256.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), I	ine 11e)				0.		0.	
Ž	b	Total fundraising expenses (Part IX, column (D), lin								
ш	''	Other expenses (Part IX, column (A), lines 11a-11d				2,072,2			51,670.	
		Total expenses. Add lines 13-17 (must equal Part I				4,434,8			55,509.	
	19	Revenue less expenses. Subtract line 18 from line	12			-263,3			69,157.	
10 8					В	eginning of Current Y		End of Yo		
Sset	20					26,123,7			02,618.	
Net Assets or	21	Total liabilities (Part X, line 26)				2,355,8	_	•	57,224. 45,394.	
	22 art II	Net assets or fund balances. Subtract line 21 from Signature Block	line 20			23,707,0	32.	17,5	45,394.	
		ties of perjury, I declare that I have examined this return,	including accompanying	echadula	e and etatem	ente and to the heet	of my kn	nowledge and he	aliaf it ic	
		t, and complete. Declaration of preparer (other than office					of fifty Kit	iowicage and be	,1101, 11 13	
truc	, 001100	Electronically Filed	or y to buood on an informa	11011 01 11	mon propuror	nas any knowleage.				
Sig	ın İ	Signature of officer				Date				
He		Anne Sears, President								
		Type or print name and title								
		Print/Type preparer's name	Preparer's signature			Date Che	ck	PTIN		
Pai	d	Barbara Murphy	Barbara Mi	wph	y	02/23/23 if self-	emploved	P01386215		
	- parer	Firm's name Blazek & Vetterling				Firm's EIN		76-0269860		
	Only	Firm's address 2900 Weslayan, Suite 200)			5 EII	_			
	_	Houston, TX 77027				Phone no.	713-4	39-5739		
Ma	y the IF	S discuss this return with the preparer shown abo	ve? See instructions					X Yes	No	

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х Х
1	Briefly describe the organization's mission:	
	See Schedule O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2		Yes X No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	1103 [110
3		Yes No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expe	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expen	ses, and
	revenue, if any, for each program service reported.	
4a		3,413,322.
	Tea Room - See Schedule O	
4b	(Code:) (Expenses \$ 935,378. including grants of \$ 731,083.) (Revenue \$	
710	Community Program and Community Support Services - See Schedule O	,
4c	(Code:) (Expenses \$289,125. including grants of \$500.) (Revenue \$\$ Membership Services, Training and Education - See Schedule O)
	Membership Services, Training and Education - See Schedule O	
<u>4</u> d	Other program services (Describe on Schedule O.)	
-ru	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 4,603,123.	

Form 990 (2021) The Junior League of Houston, Inc. 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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	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?			l
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	l		١.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	l		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	Х
e	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			x
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			x
	Schedule D, Parts XI and XII	12a		_
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	х	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		х
13		13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	-:-		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	_ 		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_ _		
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	<u>. </u>		
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
				-

Form 990 (2021) The Junior League of Houston, Inc.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		x
h	Schedule K. If "No," go to line 25a	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		<u> </u>
C		24c		
	any tax-exempt bonds?	24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			.,
	Schedule L, Part I	25b		Х
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			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	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? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? 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?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 26		. 53	1.40
	Enter the number reported in box 5 of 10fm 1050. Enter 40 in not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(mark lie) where the parties are 10	1c	Х	
-	(gambling) winnings to prize winners?	וו		

74-1185659

Form 990 (2021) The Junior League of Houston, Inc.

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 53			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		x
h	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).	0.0		
и а	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	
h	75 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M	7b	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	15		
Ŭ	to file Form 8282?	7с		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
۰ م	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
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:	0.0		
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
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.)			
12a	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.			
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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	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) The Junior League of Houston, Inc. 74-1185659 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.

	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	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 21			
	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 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		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	<u> </u>		
	more members of the governing body?	7a	х	
h	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	
a b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD		
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9	l	
000	tion B. Follolog (This Section B requests information about policies not required by the internal Revenue Gode.)		Vaa	Na
10-	Did the exemination have lead charters branches as efficiency	100	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
D	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		
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
		па	21	
b 40-	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	х	
12a	1 , " '16, go to "10 '1	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Α	
С	, , , , , , , , , , , , , , , , , , , ,	1.0		
40	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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?			
	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	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			
	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))	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website 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	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	_		
	Rebecca Pivec - 713-622-4191			
	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.

X Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	not c	Pos			nne	Reportable	Reportable	Estimated
	hours per	box	, unle: cer ar	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		l a		l	1711 43		from	from related	other
	(list any hours for	director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or (stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru		oyee	nd mc		1099-NEC)	, , , , , , , , , , , , , , , , , , , ,	and related
	below	ndividual trustee or	Institutional trustee	er	employee	Highest compensated employee	Jer.			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) Rebecca Pivec	42.00									
Administrative Dir	1.00					Х		125,459.	0.	1,007.
(2) Jennifer Scheifley Roberts	35.00	1								
President	1.00	Х		Х				0.	0.	0.
(3) Anne Sears	30.00	1								
President-Elect	1.00	Х		Х				0.	0.	0.
(4) Sameka Wood	30.00	_								
Community Vice President	0.00	Х		Х				0.	0.	0.
(5) Jennifer Weinstock	30.00	-						_	_	_
Development Vice President	0.00	Х		Х				0.	0.	0.
(6) Megan Ryan	30.00	-						_	_	_
Financial Vice President	1.00	Х		Х				0.	0.	0.
(7) Sara-Nell Van Lant	30.00									
Membership Vice President	0.00	Х		Х				0.	0.	0.
(8) Shems Blomberg	25.00									
Recording Secretary	0.00	Х		Х				0.	0.	0.
(9) Megan Anson	10.00									
Director	0.00	Х						0.	0.	0.
(10) Wendy Armstrong	10.00	-						_	_	_
Director	0.00	Х						0.	0.	0.
(11) Amanda Hanks Bayles	10.00	ł								
Director	0.00	Х						0.	0.	0.
(12) Jenny Childers	10.00	.,							_	
Director	0.00	Х						0.	0.	0.
(13) Tonyel Edwards	10.00	Ţ							,	
Director (14) Elizabeth Garcia	20.00	Х						0.	0.	0.
,,	0.00							0	_	_
Director (15) Sydney Goss	6.00	^						0.	0.	0.
Director-at-Large	-	Х						0.	0.	0.
(16) Kathleen Hays	10.00	^						0.	0.	0.
Director	-	Х						0.	0.	0.
(17) Elizabeth Kendrick	10.00		\vdash		\vdash	\vdash	-	1	· · ·	•
Director	1.00	Х						0.	0.	0.
D1100001	1.00	-23		l	L		l	1	١.	000

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

	(B) Average			(C Posi	-			(D) Reportable	(E) Reportable			(F) stimate	ad
Name and title	hours per		not c	heck r	more t	than c		compensation	compensation	1		nount	
	week	offi	icer an					from	from related			other	
	(list any hours for	Individual trustee or director						the	organizations			pensa	
	related	e or di	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISO 1099-NEC)	/ز		rom th janizat	
	organizations	truste	al trus		yee	m pen		1099-NEC)	1099-1120)		_	d relat	
	below	/idual	Institutional trustee	Je.	Key employee	Highest compensated employee	ner	,			org	anizati	ons
	line)	Indi	Insti	Officer	Key	High emp	Former						
(18) Diana Martinez	6.00	1						_					_
Director-at-Large	0.00	Х	⊢		$\vdash\vdash$			0.		0.			0.
(19) Tamra Wilkerson Politte	10.00	٠,						0		_			0
Director	0.00	Х	\vdash		$\vdash\vdash$			0.		0.			0.
(20) Emily Shushtari Director-at-Large	0.00	x						0.		0.			0.
(21) Jennifer Stewart	10.00	<u> </u>	\vdash		\vdash			0.		٠.			٠.
Director	0.00	x						0.		0.			0.
(22) Jennifer Williams	6.00		\vdash		\vdash			0.		٠.			٠.
Director-at-Large	0.00	x						0.		0.			0.
	0.00		\vdash		\Box			0.		٠.			••
		1											
			\vdash		П								
		1											
			Т										
		1											
1b Subtotal							>	125,459.		0.		1,	007.
c Total from continuation sheets to Part							>	0.		0.			0.
d Total (add lines 1b and 1c)		<u></u>	<u></u>		<u></u>		<u> </u>	125,459.		0.		1,	007.
2 Total number of individuals (including but		ose	liste	d ab	ove)) wh	o re	ceived more than \$100,0	000 of reportable				
compensation from the organization	<u> </u>											V	1
0 5:11										1		Yes	No
3		-	-	emple	3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on								
line 1a? If "Yes," complete Schedule J for such individual												v	
											3		Х
4 For any individual listed on line 1a, is the	e sum of reportab	le co	ompe	ensat	tion	and	oth	er compensation from the	ne organization				
4 For any individual listed on line 1a, is the and related organizations greater than \$	e sum of reportable 150,000? <i>If</i> "Yes,	le co ." <i>co</i>	ompe omple	ensat ete S	tion Sche	and and	oth	er compensation from the	ne organization		3		X
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive 	e sum of reportable 150,000? <i>If</i> "Yes, or accrue comper	le co " <i>co</i> nsati	ompe omple ion fr	ensat ete S om a	tion Sche any	and andedule	oth J fo	er compensation from the or such individual and organization or individual	ne organization		4		Х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." or 	e sum of reportable 150,000? <i>If</i> "Yes, or accrue comper	le co " <i>co</i> nsati	ompe omple ion fr	ensat ete S om a	tion Sche any	and andedule	oth J fo	er compensation from the or such individual and organization or individual	ne organization				
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes," of Section B. Independent Contractors 	e sum of reportable 150,000? If "Yes, or accrue comper complete Schedule	le co " co nsati e J fe	omple ion fr	ensat ete S om a uch p	tion Sche any	and edule unre	oth J fo	er compensation from the compensation from the compensation from the compensation or individual compensation from the compensation	ne organization ual for services		5	om	Х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes," C Section B. Independent Contractors Complete this table for your five highest 	e sum of reportable 150,000? If "Yes, or accrue compercomplete Schedule compensated inc	le co " <i>co</i> nsati e <i>J f</i> e	ompe omple ion fr for su ender	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the compensation from the compensation or individual ed organization or individual entreceived more than \$	ual for services		5	om	Х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." C Section B. Independent Contractors Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " <i>co</i> nsati e <i>J f</i> e	ompe omple ion fr for su ender	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe		4 5 tion from		Х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." of Section B. Independent Contractors Complete this table for your five highest the organization. Report compensation in the section in the secti	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " <i>co</i> nsati e <i>J f</i> e	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	om C) nsatio	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." Considered to the organization? Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." C Section B. Independent Contractors Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive rendered to the organization? If "Yes." C Section B. Independent Contractors Complete this table for your five highest the organization. Report compensation (A) 	e sum of reportable sum of reportable 150,000? If "Yes, or accrue comper complete Schedule compensated incompensated incompensat	le co " co nsati e J fo depe	ompe omple ion fr for su ender endir	ensatete Som a com a uch p	tion Sche any perso	and edule unre on	oth J fo	er compensation from the or such individualed organization or individual at received more than \$ the organization's tax years.	ual for services 100,000 of compe	 ensat	4 5 tion fro	C)	х

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

		Check if Schedule O cor	ntains a i	response (or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1 a	Federated campaigns		1a					
ant		Membership dues		1b	701,670.				
9		Fundraising events		1c	526,966.				
Contributions, Gifts, Grants and Other Similar Amounts		Related organizations		1d	507,074.				
ig ig					668,223.				
Sir.		Government grants (contribu		1e	000,223.				
utio	T	All other contributions, gifts, gra			693 166				
		similar amounts not included ab		1f	693,466.				
out	_	Noncash contributions included in lines		1g \$	143,421.	2 007 200			
O g	n	Total. Add lines 1a-1f				3,097,399.			
					Business Code	2 412 200	222 222	0.502.220	
<u>e</u>	2 a	Tea Room			722511	3,413,322.	909,990.	2,503,332.	
erv	b								
ı S.	С								
ran Sev	d								
Program Service Revenue	е								
<u>a</u>	f	All other program service rev	enue						
	g	Total. Add lines 2a-2f				3,413,322.			
	3	Investment income (including	g divider	nds, intere	st, and				
		other similar amounts)			>	278,164.			278,164.
	4	Income from investment of ta							
	5	Royalties			>				
			(i)	Real	(ii) Personal				
	6 a	Gross rents 6	ia						
	b		ib						
	С	Rental income or (loss) 6	ic						
	d	Net rental income or (loss)							
		Gross amount from sales of	(i) Se	ecurities	(ii) Other				
			a 8,2	46,245.					
	b	Less: cost or other basis							
<u>o</u>		and sales expenses 7	b 7,9	63,145.					
Revenue	c	Gain or (loss)		83,100.					
Şe.		Net gain or (loss)	- 1			283,100.			283,100.
her F		Gross income from fundraising				,			,
Ğ	0 4		6,966.	I .					
Ŭ		contributions reported on line		' I					
		Part IV, line 18	,		267,180.				
	h	Less: direct expenses			351,943.				
		Net income or (loss) from fur				-84,763.			-84,763.
		Gross income from gaming a				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Ja	Part IV, line 19		I .					
	h	Less: direct expenses							
		Net income or (loss) from gai							
		Gross sales of inventory, less							
	10 a			I	94.				
	L	and allowances		I					
		Less: cost of goods sold			<u>`</u>	94.	94.		
\rightarrow	С	Net income or (loss) from sal	ics of IU/	entory	Business Code	74.	74.		
S _I	44 -	Houston News ads			541800	37,350.		37,350.	
e e	11 a	-			241000	57,330.		37,330.	
Miscellaneous Revenue	b								
Sce	C								
Ξ̈́		All other revenue				37 350			
		Total Add lines 11a-11d			·····	37,350.	010 004	2 540 602	476 E01
	12	Total revenue. See instructions				7,024,666.	910,084.	2,540,682.	476,501.

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).

Jecli	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			ipiete column (A).	
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	_ (D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		5,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	general expenses	57,5511000
	and domestic governments. See Part IV, line 21	731,583.	731,583.		
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	1,519,721.	1,177,269.	325,881.	16,571.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	230,049.	208,741.	19,673.	1,635.
10	Payroll taxes	122,486.	90,345.	28,500.	3,641.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	2,001.		2,001.	
С	Accounting	38,925.	13,624.	17,761.	7,540.
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	53,500.		53,500.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	61,681.	19,892.	41,789.	
12	Advertising and promotion				
13	Office expenses	308,609.	259,825.	7,331.	41,453.
14	Information technology	55,700.	40,066.	15,634.	
15	Royalties				
16	Occupancy	526,265.	490,172.	36,093.	
17	Travel	1,200.	1,200.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	32,486.	32,345.	116.	25.
20	Interest				
21	Payments to affiliates	122,857.	122,857.		
22	Depreciation, depletion, and amortization	424,920.	390,926.	33,994.	
23	Insurance	116,157.	97,432.	18,725.	
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	Tea Room food/beverage	856,409.	800,356.	56,053.	
b	Bank & credit card fees	113,238.	208.	113,030.	
С	Linens & laundry	107,746.	107,746.		
d	Donor recognition/other	29,976.	18,536.		11,440.
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,455,509.	4,603,123.	770,081.	82,305.
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)				
					Earm 990 (2021

Form 990 (2021) Part X Balance Sheet

ı a	IL A	Check if Schedule O contains a response or	note to an	y line in this Part X			
		oneon il concaule o containe a responde or	note to an	y into in the react.	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,374,675.	1	640,094.
	2	Savings and temporary cash investments			362,820.	2	445,835.
	3	Pledges and grants receivable, net			200,850.	3	219,683.
	4	Accounts receivable, net			71,874.	4	157,678.
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ıbstantial c	ontributor, or 35%			
		controlled entity or family member of any of	these perso	ons		5	
	6	Loans and other receivables from other disqu	ualified per	sons (as defined			
		under section 4958(f)(1)), and persons descri	bed in sec	tion 4958(c)(3)(B) L		6	
Ś	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			35,660.	8	55,590.
	9	Prepaid expenses and deferred charges			24,369.	9	21,154.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	8,476,366.	10,651,832.	10c	10,226,913.
	11	Investments - publicly traded securities			12,929,179.	11	6,928,597.
	12	Investments - other securities. See Part IV, lin	ne 11			12	
	13	Investments - program-related. See Part IV, li			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	472,477.	15	507,074.		
	16	Total assets. Add lines 1 through 15 (must e	equal line 3	3)	26,123,736.	16	19,202,618.
	17	Accounts payable and accrued expenses			413,893.	17	381,605.
	18	Grants payable	519,165.	18	542,645.		
	19	Deferred revenue			499,663.	19	495,777.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	ete Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or f	ormer offic	er, director,			
Liabilities		trustee, key employee, creator or founder, su	ıbstantial c	ontributor, or 35%			
iabi		controlled entity or family member of any of	these perso	ons		22	
_	23	Secured mortgages and notes payable to un	related thir	d parties		23	
	24	Unsecured notes and loans payable to unrela	ated third p	parties		24	
	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on li	ines 17-24)	. Complete Part X			
		of Schedule D			923,123.	25	237,197.
	26				2,355,844.	26	1,657,224.
"		Organizations that follow FASB ASC 958,	check her	e 🕨 🗓			
ĕ		and complete lines 27, 28, 32, and 33.					
<u>la</u>	27				23,568,985.	27	17,260,023.
B	28	Net assets with donor restrictions			198,907.	28	285,371.
ů		Organizations that do not follow FASB AS	C 958, che	eck here 🕨 📖			
F		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fur				29	
sse	30	Paid-in or capital surplus, or land, building, o				30	
ţ	31	Retained earnings, endowment, accumulated			02 757 022	31	45 545 001
Š	32	Total net assets or fund balances		·····	23,767,892.	32	17,545,394.
	33	Total liabilities and net assets/fund balances			26,123,736.	33	19,202,618.

Form **990** (2021)

Pa	Heconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	,024,	666.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	5 ,	455,	509.			
3	Revenue less expenses. Subtract line 2 from line 1	3	1	,569,	157.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23	,767,	892.			
5	Net unrealized gains (losses) on investments	5	-1	,585,	840.			
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	17	,545,	394.			
Pa	rt 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 O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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	basis,						
	consolidated basis, or both:							
	Separate basis X Consolidated basis 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?		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit						
	Act and OMB Circular A-133?		За		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2021)			

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

			nior League of						74-1185659	
Pa	rt I	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	S.		
Γhe	organ	nization is not a private found								
1		A church, convention of ch	·		-	•	I)(A)(i).			
2	\Box	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3	一	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	一							(iii). Enter	the hospital's nam	ie.
		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) . Enter the hospital's name, city, and state:								
5		An organization operated for	or the benefit of a col	leae or university owned	or operate	ed by a go	vernmental ur	nit describe	ed in	
•	ш	section 170(b)(1)(A)(iv). (C		9		, 9-				
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).			
	Х	An organization that norma	-					e neneral i	nublic described in	ı
•	ш	section 170(b)(1)(A)(vi). (C	•	mar part of no support in	om a gove	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		o gonorai i		
8		A community trust describe		1)(A)(vi) (Complete Pari	+ II \					
9	H	An agricultural research org			•	ed in coniu	inction with a	land-grant	college	
Ū	ш	or university or a non-land-g				-		-	-	
		university:	grant conege or agrici	altare (see instructions).	Litter tile i	iarric, city	, and state of	ine conege	, 01	
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its sunn	ort from c	ontribution	ns membersh	in fees and	d aross receints fro	
	ш	activities related to its exen								
		income and unrelated busin		·					-	
		See section 509(a)(2). (Con		(ICSS SCOTION STITLEX) ITC	iii busiiics	oco acquii	rea by the org	arnzation	inter durie do, 1373	•
11		An organization organized a	•	vely to test for public sat	faty Saa i	section 50)(a)(A)			
12	H	An organization organized a	•	•	•			ry out the	nurnoses of one or	r
	ш	more publicly supported or	•	•	-			-	•	
		lines 12a through 12d that	-						SHOOK THE BOX OH	
а		Type I. A supporting orga	* *					-	aivina	
_		the supported organization	· · · · · · · · · · · · · · · · · · ·		•	-				
		organization. You must o			majority o	inc ando	nors or trustee	00 01 1110 01	apporting	
b		Type II. A supporting org			ion with it	s sunnorte	ed organization	n(s) hy hav	vina	
~		control or management o	· ·				-		-	
		organization(s). You mus			arrio porco	no triat ooi	intro or manag	jo ti io oupi	501134	
С		☐ Type III functionally inte	-		in connect	ion with. a	and functional	v integrate	ed with.	
_		its supported organization						,eg. a		
d		☐ Type III non-functionally						ted organiz	zation(s)	
_		that is not functionally int						-		
		requirement (see instructi		• ,	•		•			
е		Check this box if the orga	•	•	•			I. Type III		
		functionally integrated, or					31 , 31	, ,,		
f	Ente	er the number of supported o		, 0	0 0					
g		vide the following information		d organization(s).						
	((i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of	monetary	(vi) Amount of oth	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instruct	tions)
	. 1								1	

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.")	2,117,743.	2,443,167.	2,014,829.	2,412,126.	3,097,399.	12,085,264.
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	2,117,743.	2,443,167.	2,014,829.	2,412,126.	3,097,399.	12,085,264.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1,954,457.
6	Public support. Subtract line 5 from line 4.						10,130,807.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	2,117,743.	2,443,167.	2,014,829.	2,412,126.	3,097,399.	12,085,264.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	207,987.	269,781.	346,872.	247,271.	278,164.	1,350,075.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on					103,666.	103,666.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	17,307.					17,307.
11	Total support. Add lines 7 through 10						13,556,312.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	9,044,148.
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						>
Sec	tion C. Computation of Publi		<u>_</u>			Г	
14	11 1 5					14	74.73 %
15	Public support percentage from 2020					15	75.18 %
16a	33 1/3% support test - 2021. If the						
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the						. \Box
	and stop here. The organization qual	•	• •				
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact			-	•	VI how the organiz	ation
	meets the facts-and-circumstances te	· ·		, ,,			
b	10% -facts-and-circumstances test	ū				•	0% or
	more, and if the organization meets the		*		•		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	on did not check a l	oox on line 13, 16a	i, 16b, 17a, or 17b	, check this box a	nd see instructions	_

Schedule A (Form 990) 2021 The Junior League of Houston, Inc. 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		
2		
0-		
3a		
3b		
20		
3c		
4a		
41-		
4b		
4c		
5a		
5b		
5c		
6		
_		
7		
8		
0-		
9a		
9b		
9c		
10a		
10b		
ule A (Forn	n 990)	2021

Pa	rt 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		
b	A family member of a person described on line 11a above?	11b		
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		
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		
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,	_		
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
	tion 217th Type in capporally organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	NO
1	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			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	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	0-		
L	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. Did the organization exercise a substantial degree of direction ever the policies, programs, and activities of each	3a		
O	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	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	ion 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	ally integrate	d Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2021

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	ınızatıons _{(continu}	ıed)	
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	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		1	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				
<u>a</u>	From 2016				
b	From 2017				
<u> </u>	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				
С	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:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	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	A, Part II, Line 10, Explanation for Other Income:
Workers'	comp div / other
	unt: \$ 17,307.
ZOIT ANIO	une. \$ 17,307.

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

Employer identification number

The	Junior League of Houston, Inc.	74-1185659					
Organization type (check o	ne):						
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						
	s 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.					
General Rule							
-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	•					
Special Rules							
sections 509(a)(1) contributor, during	n 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, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) I line 1. Complete Parts I and II.	d that received from any one					
contributor, during literary, or education	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, so anal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (e) instead of the contributor name and address), II, and III.	ientific,					
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 \bigs \(\)							
answer "No" on Part IV, line	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, g requirements of Schedule B (Form 990).	• •					
_HA For Paperwork Reducti	on Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2021)					

Name of organization

Employer identification number

The Junior League of Houston, Inc.

74-1185659

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$360,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$507,074.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$90,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$120,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$668,223.	Person X 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 Oncash Complete Part II for noncash contributions.)

74-1185659

The Junior League of Houston, Inc.

Name of organization Employer identification number

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

Employer identification number

Name of organization

74-1185659 The Junior League of Houston, Inc. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

Name of the organization

The Junior League of Houston, Inc.

Employer identification number

74-1185659 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

Sche	daile = \(\cdot \	League of Houst			74-118		Pa	ge 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Similar Assets	(contir	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make	significant use of its			
	collection items (check all that apply):							
а	Public exhibition	d	Loan or exc	hange program				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	mpt purpose in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations o	f art, historical treas	sures, or other simila	r assets			
	to be sold to raise funds rather than to be ma	intained as part of th	ne organization's col	llection?		Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organizatio	n answered "Yes" o	n Form 990, Part IV,	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contributions	s or other assets not	included			
	on Form 990, Part X?					Yes		No
b	If "Yes," explain the arrangement in Part XIII a							
						Amoun	t	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f	_		
2 a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or cu	istodial account liab	ility?	Yes	Ш	No
_	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete it					() [
	•	(a) Current year	(b) Prior year	· · ·	(d) Three years back	(e) Four		
	Beginning of year balance	19,894,630.	15,358,694.	· · · · · ·	· · · · ·	13,	664,6	
	Contributions	48,808.	28,534.	· · · · · ·	· · · · · · · · · · · · · · · · · · ·	4	47,8	
	Net investment earnings, gains, and losses	-1,695,302.	4,993,991.	· · · · · ·	· · · · · · · · · · · · · · · · · · ·	⊥,	220,6	
	Grants or scholarships	507,074.	472,477.	470,412.	410,620.		365,0	00.
е	Other expenditures for facilities							
	and programs	13,646.	14,112.	13,979.	15,054.		14,2	63
	Administrative expenses	17,727,416.	19,894,630.	· · · · · ·	· · · · · · · · · · · · · · · · · · ·	14	553,9	
g	End of year balance		· · · · · · · · · · · · · · · · · · ·		13,103,133.	11,	333,3	
2	Provide the estimated percentage of the curre Board designated or quasi-endowment	ent year end balance 62.9400	(line rg, column (a) %) neid as.				
a b	Permanent endowment 27.1500	%						
		⁷⁰						
·	The percentages on lines 2a, 2b, and 2c should be considered as the constant of the constant o	, -						
32	Are there endowment funds not in the posses	•	tion that are held an	nd administered for t	he organization			
oa	by:	331011 01 tile organiza	tion that are ned ar	ia administrata for t	ne organization	ſ	Yes	No
	(i) Unrelated organizations					3a(i)	+	x
	(ii) Related organizations					3a(ii)	х	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?			3b	х	
4	Describe in Part XIII the intended uses of the					_ JD		
Par			site idilido.					
	Complete if the organization answered		, Part IV, line 11a. S	ee Form 990, Part X	, line 10.			
	_			· ·				

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a Land		7,715,077.		7,715,077.			
b Buildings		9,026,577.	7,064,513.	1,962,064.			
c Leasehold improvements							
d Equipment		760,159.	609,405.	150,754.			
e Other		1,201,466.	802,448.	399,018.			
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)							

Schedule D (Form 990) 2021

Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part X, line 12. (g) Description according to according to design you declara wave or security. (p) Book value (p) Cosely heid equity interests (g) Other (g) (h) (h) (h) (h) (h) (h) (h)	Part VII	Investments - Other Securities.	on Form 900 Part IV line	o 11h Soo Form 000 Part V line 12	: - <u>.g</u> -
(1) Financial derivatives (2) Closely hald equity interests (3) Other (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	(a) Descrir		· · · · · · · · · · · · · · · · · · ·	<u> </u>	-of-vear market value
			(b) Dook value	(c) Wethod of Valuation. Cost of end	-or-year market value
(3) Other				+	
(A) (B) (Column (b) must equal Form 990, Part X, col. (B) line 12, (B)	Theid equity interests				
(B)					
(C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D					
(b) (c) (d) (d) (d) (d) (e) (e) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f					
(E) (F) (F) (F) (G) (H) (F) (F) (G) (H) (F) (F) (G) (H) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F					
Fig.					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 15.)					
Total (Col. (th) must equal Form 990, Part X, col. (8) line 12.)	(G)				
Part VIII Investments - Program Related.	(H)				
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation. Cost or end of-year market value (d) (e) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	Total. (Col. ((b) must equal Form 990, Part X, col. (B) line 12.)			
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (1) (2) (3) (4) (4) (5) (6) (6) (7) (8) (9) (9) (7) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	Part VIII	_			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description (b) Book value (1) (5) (6) (7) (8) (9) (9) (9) (9) (9) (1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9					
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part X Other Assets. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ Part X Other Liabilities. (a) Description of liability (b) Book value (b) Book value (c) Book value (c		(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(3) (4) (5) (6) (7) (8) (9) Total. (Col. (h) must equal Form 990, Part X, col. (B) line 13.) ▶ Part X Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes (2) Refundable advances (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ Total. (c) (b) Book value	(1)				
(4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part X					
(6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)				_	
(6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (3) (4) (6) (6) (7) (8) (9) (9) (9) (1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (6) (7) (8) (9) (9) (9) (1) Federal income taxes (1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (6) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (9) (9) (9) (1) Form 990, Part X, col. (B) line 25) (1) Form 990, Part X, col. (B) line 25)					
(7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9					
(8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237, 197.					
10 10 10 10 10 10 10 10				+	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶					
Part IX Other Assets.		(1) 15 000 D 17 1 (D) II 10 \ \			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237, 197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)					
(a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25,) ▶ 237,197.	I dit ix		on Form 990 Part IV line	a 11d. See Form 990. Part X. line 15	
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.				1 1 2 2 2 2 3 3 1 1 2 2 2 3 3 3 3 3 3 3	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237, 197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	(1)	()			(-)
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237, 197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)					
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)					
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)					
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	(8)				
Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	(9)				
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	Total. (Colu	umn (b) must equal Form 990, Part X, col. (B) line	e 15.)	>	
1. (a) Description of liability (b) Book value (1) Federal income taxes 237,197. (2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ≥ 237, 197.	Part X				
(1) Federal income taxes (2) Refundable advances (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 237, 197.		-	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
(2) Refundable advances 237,197. (3) (4) (5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1.	(a) Description of liability			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 237,197.					
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.	(2)	fundable advances			237,197.
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 237,197.					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)					
(00.61.11.11.10) 11.11.11.11.11.11.11.11.11.11.11.11.11.		(h)	- 05 \	<u> </u>	237 197

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

	Complete if the organization answered "Yes" on Form 990, Part IV, I	line 12a.			2 426 464
1				1	2,436,184
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 . 1	1 505 040		
	Net unrealized gains (losses) on investments		-1,585,840.	-	
	Donated services and use of facilities			-	
	Recoveries of prior year grants		2 152 560	-	
	Other (Describe in Part XIII.)		-2,153,569.	-	2 720 400
	Add lines 2a through 2d			2e	-3,739,409
3	Subtract line 2e from line 1			3	6,175,593
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1	E3 E00		
	Investment expenses not included on Form 990, Part VIII, line 7b		53,500. 795,573.	-	
	Other (Describe in Part XIII.)		· · · · · · · · · · · · · · · · · · ·	4.	849 073
	Add lines 4a and 4b			4c	849,073 7,024,666
5 Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12 t XII Reconciliation of Expenses per Audited Financial S	2.)tatements With	Expenses per F	5 Return.	7,024,000
· u	Complete if the organization answered "Yes" on Form 990, Part IV, I		Expended per i	.o.ca	
1	Total expenses and losses per audited financial statements			1	4,620,081
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
	Donated services and use of facilities	2a			
b	Prior year adjustments			1	
	Other losses				
d	Other (Describe in Part XIII.)		520,719.		
	Add lines 2a through 2d		•	2e	520,719
3	Subtract line 2e from line 1			3	4,099,362
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				, ,
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	53,500.		
	Other (Describe in Part XIII.)		1,302,647.		
	Add lines 4a and 4b			4c	1,356,147
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line			5	5,455,509
Par	t XIII Supplemental Information.	·-•			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			, r art 7, ii	ne z, i ait XI,
Part	V, line 4:				
The	endowment funds held by the Junior League of Houston Fou	undation are			
desi	gnated to initiate, finance, sustain and expand the Comm	nunity Program			
of T	he Junior League of Houston, Inc.				
Part	XI, Line 2d - Other Adjustments:				
Reve	nue of Foundation	4,559,320.			
Amou	nts eliminated in consolidation	-507,074.			
Tran	sfer to Junior League Foundation	-6,205,815.			
Tota	l to Schedule D, Part XI, Line 2d	-2,153,569.			
Part	XI, Line 4b - Other Adjustments:				

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Employer identification number 74-1185659 The Junior League of Houston, Inc. Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

P	art i	of fundraising Events . Complete if the				
		3	(a) Event #1 Charity Ball	(b) Event #2	(c) Other events None	(d) Total events (add col. (a) through
4			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	794,146.			794,146.
_		Less: Contributions	526,966.			526,966.
	3	Gross income (line 1 minus line 2)	267,180.			267,180.
	4	Cash prizes				
"	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	29,291.			29,291.
ect E	7	Food and beverages	53,754.			53,754.
Ë	8	Entertainment	39,533.			39,533.
	9	Other direct expenses	229,365.			229,365.
	10				•	351,943.
	11	Net income summary. Subtract line 10 from li				-84,763.
Pa	art I	II Gaming. Complete if the organization				
		\$15,000 on Form 990-EZ, line 6a.				
<u>Ф</u>			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col. (a) through col. (c))
Вè	1	Gross revenue				
ses	2	Cash prizes				
Exper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		•	
					_	
	0	Net gaming income summary. Subtract line 7	from line 1, column (a)			
9	En	ter the state(s) in which the organization condu	icts gaming activities:			
a	ls t	the organization licensed to conduct gaming action," explain:	ctivities in each of these s			Yes No
•						
	_					
	 n We	ere any of the organization's gaming licenses re			year?	Yes No
	 n We	ere any of the organization's gaming licenses re Yes," explain:			year?	Yes No

Sch	edule G (Form 990) 2021 The Junior League of Houston, Inc. 7	4-11856	59	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility		_	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
•	Enter the hame and address of the person time propares the organizations gaining openial stones books and records.			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party > \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	Name ▶			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	е		
	organization's own exempt activities during the tax year ▶ \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, lir	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Sheduic Grom 980 The Junior League of Bouston, Inc. 74-1183659 Page 4 Part IV Supplemental Information (continued)	Schedule G	(Form 990) The Junior League of Houston, Inc.	74-1185659	Page 4
	Part IV	Supplemental Information (continued)		
	_			

SCHEDULE I (Form 990)

Department of the Treasury

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.

OMB No. 1545-0047 **2021**Open to Public

Internal Revenue Service Inspection ► Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** 74-1185659 The Junior League of Houston, Inc. Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) AIDS Foundation Houston, Inc. 3202 Weslavan Street 76-0073661 501(c)(3) Houston, TX 77027 10,419. 0 External Project Support Asso for the Adv of Mexican 6001-E Gulf Freeway Houston, TX 77023 74-1696961 501(c)(3) 0. 10,000 Community Assistance Baylor College of Medicine 1504 Ben Taub Loop Houston, TX 77030 74-1613878 501(c)(3) 34,500 0 External Project Support BEAR-BE A Resource CPS Kids 2223 West Loop South Houston TX 77027 31-1516122 501(c)(3) 51 153 0. External Project Support Camp Janus PO Box 2717 83-2130137 501(c)(3) 0. Pearland TX 77588 11 388. External Project Support Casa de Esperanza de los Ninos PO Box 66581 Houston, TX 77266 76-0105306 501(c)(3) 39 470 0 External Project Support

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

Enter total number of other organizations listed in the line 1 table

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) 2021

26.

concado i (i cim coo)	Assistance to Dec	,	and Damastic Oc		adula I (Farm 000) D-		74-1103039 Page
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Scho	eaule I (Form 990), Pa I	π II.)	T
(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 non-cash assistance	(h) Purpose of grant or assistance
Chance for Hope Foundation PO Box 842044 Pearland, TX 77584	46-5359628	501(c)(3)	20,000.	0.			Community Assistance
Child Advocates, Inc. 2401 Portsmouth, Ste. 210 Houston, TX 77098	76-0111345	501(c)(3)	19,552.	0.			External Project Support
Children's Museum of Houston 1500 Binz Houston, TX 77004	74-2178563	501(c)(3)	33,920.	0.			External Project Support
Dress for Success Houston 3310 Eastside Street Houston, TX 77098	76-0579697	501(c)(3)	8,000.	0.			Ex ternal Project Support
Educational Programs Insp Com 6717 Stuebner Airline Rd. Houston, TX 77091	73-1644107	501(c)(3)	20,000.	0.			Community Assistance
Foster Care Advocacy Center 2429 Bissonnet St. #767 Houston, TX 77005	82-4805883	501(c)(3)	10,000.	0.			Community Assistance
Foundation for Autism Care, Education and Services - 13121 Louetta Road #1360 - Cypress, TX 77429	20-4767823	501(c)(3)	15,000.	0.			Community Assistance
Girls Empowerment Network- GENaustin - PO Box 3122 - Austin, TX 78764	74-2837732	501(c)(3)	10,000.	0.			Community Assistance
Houston Area Women's Center 1010 Waugh Drive Houston, TX 77019	74-2029166	501(c)(3)	15,000.	0.			External Project Support

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
Houston Food Bank							
535 Portwall Street							
Houston, TX 77029	74-2181456	501(c)(3)	10,000.	0.			External Project Support
Kids' Meals							
205 W. Crosstimbers							
Houston, TX 77018	76-0330447	501(c)(3)	66,431.	0.			External Project Support
Ronald McDonald House of Houston 1907 Holcombe Blvd.							
Houston, TX 77001	74-1984499	501(c)(3)	58,144.	0.			External Project Support
San Francisco Nativity Academy 5808 Renwick Houston, TX 77081	47-1472764	501(c)(3)	10,000.	0.			Community Assistance
Sleep in Heavenly Peace, Inc. P.O. Box 3373							
Nampa, ID 83653	46-4346568	501(c)(3)	10,000.	0.			Community Assistance
Star of Hope 6897 Ardmore Street	E4 1150500	501()(2)	25.045				
Houston, TX 77054	74-1152599	501(C)(3)	37,847.	0.			External Project Support
Texas Children's Hospital 6621 Fannin Street							
Houston, TX 77030	74-1100555	501(c)(3)	42,386.	0.			External Project Support
Texas Children's Hospital 6621 Fannin Street							
Houston, TX 77030	74-1100555	501(c)(3)	28,000.	0.			External Project Support
The Children's Assessment Center Foundation - 2500 Bolsover St							
Houston, TX 77005	76-0458780	501(c)(3)	20,000.	0.			Community Assistance

Part II Continuation of Grants and Other	er Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Scho T	edule I (Form 990), Pa I	rt II.) T	T
(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 non-cash assistance	(h) Purpose of grant or assistance
he St. Bernard Project, Inc.							
645 Toulouse Street							
New Orleans, LA 70119	26-2189665	501(c)(3)	10,000.	0.			Community Assistance
he Westview School							
900 Kersten Dr							
Houston, TX 77043	76-0487522	501(c)(3)	16,010.	0.			External Project Support
Yes Prep Public Schools							
455 South Loop East Freeway							
Houston, TX 77033	76-0563835	501(c)(3)	10,000.	0.			Community Assistance

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 ad	Iditional information.	
Part I, Line 2:					
The JLH External Project Support line items are for	r agencies to	which the			
Junior League of Houston has committed both volunt	eers and fina	ncial			
support on an ongoing basis. Unlike the JLH Extern	al Project Su	pport line			
items, the Community Assistance line items will ch	ange each fis	cal year.			
The Junior League of Houston provides Community As	sistance Gran	ts to			
501(c)(3) organizations that do not receive ongoing	g volunteer s	upport or			
financial assistance through the League's existing	community pr	ojects. The			
League's Community Assistance Committee reviews th	e grant reque	sts			

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization The Junior League of Houston, Inc. Employer identification number 74-1185659

Fai	LI	i ypes	or Property							
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			3
1	Art -	Works of a	art							
2			reasures							
			interests							
4			lications							
5			ousehold goods							
6			vehicles							
7			es							
8			perty							
9			olicly traded	Х	1	20,000.	FMV			
10			sely held stock			,				
11			tnership, LLC, or							
•										
12			cellaneous							
13			ervation contribution -							
	Histo	ric structu	ires							
14	Qual	ified conse	ervation contribution - Other							
15			esidential							
16	Real	estate - Co	ommercial							
17			ther							
18										
19										
20			lical supplies							
21										
22			cts							
23			mens							
24			ırtifacts							
25			Auction items	Х	178	125,356.	FMV			
26	Othe	er > (Raffle item)	Х	1	65.	FMV			
27	Othe	er > ()							
28	Othe	er 🕨 (
29	Num	ber of For	ms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for w	hich the o	rganization completed Form 828	33, Part V, D	onee Acknowledge	ement 29				
							ı		Yes	No
30a	Durir	ng the year	, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must	hold for a	t least three years from the date	of the initia	l contribution, and	which isn't required to be us	sed for			
	exem	npt purpos	es for the entire holding period?					30a		X
b	If "Ye	es," descri	be the arrangement in Part II.							
31	Does	the organ	ization have a gift acceptance p	oolicy that re	quires the review of	of any nonstandard contribu	tions?	31	Х	
32a	Does	the organ	ization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				
	conti	ributions?						32a		Х
b		•	be in Part II.							
33	If the	organizat	ion didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is che	cked,			
	desc	ribe in Par	t II.							

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

Schedule M (Form 990) 2021

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

Department of the Treasury Internal Revenue Service

Name of the organization

The Junior League of Houston, Inc.

Inspection **Employer identification number** 74-1185659

Form 990, Part I, Line 1, Description of Organization Mission:
The Junior League of Houston, Inc. is an organization of women
committed to promoting voluntarism, developing the potential of women,
and improving communities through the effective action and leadership
of trained volunteers.
Form 990, Part III, Line 1, Description of Organization Mission:
The Junior League of Houston, Inc. is an organization of women
committed to promoting voluntarism, developing the potential of women,
and improving communities through the effective action and leadership
of trained volunteers. Its purpose is exclusively educational and
charitable. The League has been "Building A Better Community" by
addressing community needs, including basic needs, abuse of women and
children, healthcare, education and cultural enrichment.
Form 990, Part III, Line 3, Changes in Program Services:
The Publishing program was discontinued for the 2021 - 2022 fiscal
year.
Form 990, Part III, Line 4a, Program Service Accomplishments:
Tea Room: The Junior League of Houston, Inc. established its first
community project as a well-baby clinic for indigent children that
would eventually grow into the Junior League Health Care Clinic at the
world-renowned Texas Children's Hospital. To fund this important
endeavor, members formed a Luncheon Club - the genesis of today's Tea
Room. The Tea Room supports the League's exempt purposes by serving as

Schedule O (Form 990) 2021	Page 2
Name of the organization The Junior League of Houston, Inc.	Employer identification number 74-1185659
a training facility where members are educated in the discipline of	
service, which is then carried into the various community service	
projects which the League undertakes. The training and education	
afforded by the Tea Room enables members to be more effective and	
efficient community volunteers. The Tea Room exclusively serves its Tea	
Room patron members and their guests. Effects from the ongoing COVID-19	
pandemic are evident in the 2021-2022 Tea Room financials.	
Form 990, Part III, Line 4b, Program Service Accomplishments:	
Community Program and Community Support Services: Community projects	
are a main focus of The Junior League of Houston, Inc. During the 2021	
- 2022 fiscal year, the League served individuals through community	
projects addressing a broad spectrum of needs in Houston and	
surrounding areas. Many of these programs are initiated by the League	
and fully supported through League volunteers and funding. League	
volunteers serve many people - infants, children, women in crisis,	
families and the elderly; in many places - hospitals, museums, camps	
and schools; and in many capacities - docents, mentors and program	
facilitators. During the 2021 - 2022 fiscal year, the League combined	
volunteer time with direct financial support through grants,	
collaborative efforts and community projects. Volunteer efforts were	
either modified or expanded by project as appropriate due to the	
ongoing COVID-19 pandemic.	
Form 990, Part III, Line 4c, Program Service Accomplishments:	
Membership Services, Training and Education: The Junior League of	
Houston, Inc.'s membership is more than 4,000 strong. In addition to	
community volunteer placements, active and provisional League members	

Schedule O (Form 990) 2021	Page 2
Name of the organization The Junior League of Houston, Inc.	Employer identification number 74-1185659
attend a required number of general membership meetings each year.	_
League members receive ongoing volunteer training and attend a variety	
of other meetings to include: council, education, leadership/training,	
community placement and committee meetings. League members create	
newsletters, seasonal event calendars, a bi-annual magazine and a	
yearly directory as well as maintain a comprehensive website and social	
media presence. The goal of membership training and education is to	
further the mission of the League in developing the potential of women	
and training volunteers for effective action and leadership in the	
community.	
Form 990, Part VI, Section A, line 6:	
Provisional: Provisional members are those engaged in complying with the	
requirements for admission to active membership and are not eligible to	
vote or hold office. Actives: Active members have completed the	
requirements for provisional membership and fulfill the League's	
requirements for active membership until the end of the fiscal year in	
which they either attain the age of 40 or complete their tenth year of	
service in the League. Sustainer members: Sustainer members have reached	
the age of 40 or have completed ten or more years of active service.	
Emeritus: Emeritus membership is granted to any sustainer who has reached	
the age of 80 years.	
Form 990, Part VI, Section A, line 7a:	
Members elect a 7-person committee from a slate of 14 names. The nominating	
committee slates the Executive Committee officers of the League under the	
leadership of the Nominating Chairman who is the League President two years	
removed. Active members approve the slate by acclamation or may propose an	

Name of the organization The Junior League of Houston, Inc.	Employer identification number 74-1185659
alternative slate of officers of the League prior to 14 days before the	
Annual Meeting in February. Officers shall assume their duties at the	
general meeting in May and shall serve for one year. The membership also	
votes to approve the Board of Directors proposed by the Executive	
Committee.	
Form 990, Part VI, Section A, line 7b:	
The membership votes to approve the League budget and material financial	
changes thereto (if applicable), approves by acclamation the Community	
Projects at the Annual Meeting in February, votes to approve the changes to	
the bylaws, votes to approve the Long Range Plan (if applicable) and	
approves by acclamation the minutes of the previous general meeting.	
Form 990, Part VI, Section B, line 11b:	
The Administrative Director manages the preparation of the tax return,	
including communications with the accounting firm. The Administrative	
Director reviews and comments on the draft return with input, as	
appropriate, from the Accounting Coordinator and Financial Vice President.	
The President, President-Elect and Communications Director then review the	
draft return. After all comments have been addressed, the tax return is	
provided to both the Finance Council and Board of Directors either in hard	
copy or by email. Finance Council and Board members are provided an	
opportunity to ask questions and comment on the tax return prior to filing	
with the IRS.	
Form 990, Part VI, Section B, Line 12c:	
Prior to a Board of Directors, Council or Sub-Council action or discussion	_
of a proposed action, members of the Board of Directors, Council or	

Name of the organization The Junior League of Houston, Inc.	Employer identification number 74-1185659
Sub-Council shall disclose any potential interest (personal, financial or	
business) of the member or member's family that would be affected by any	
action being considered for a vote by the Board of Directors, Council or	
Sub-Council. Such disclosure must be of record in the minutes. A member who	
has a conflict of interest may not participate in the discussion or vote	
and is required to excuse herself from the discussion of and vote on the	
action with which she has a conflict of interest. Prior to the meeting she	
may contact the moderator of the meeting to disclose material facts and to	
respond to questions. She may not attempt to exert her personal influence	
either at or outside the meeting. Each member shall annually complete a	
disclosure form identifying any relationships, positions, or circumstances	
in which she or any member of her family is involved that could contribute	
to a conflict of interest. Such relationships, position, or circumstances	
might include service as a trustee, director or consultant to a nonprofit	
organization or ownership of a business that might provide goods or	
services. Any changes during the year must be reported.	
Form 990, Part VI, Section B, Line 15b:	
A sub-set of the Personnel Committee, consisting of the President,	
President-Elect, and Financial Vice President, meets annually to review the	
performance and approve the compensation of any key employees. The	
Committee considers performance, current salary comparability data and the	
organization's overall budget in making compensation decisions.	
Form 990, Part VI, Section C, Line 19:	
The audited financial statements, governing documents and conflict of	
interest policy are provided 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 Name of the organization

The Junior League of Houston, Inc.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

74-1185659

	(a)	(b)	(c)	(d)	(e)) (f)		
Name, address, and EIN (if applicable) of disregarded entity		Primary activity	Legal domicile (state of foreign country)			r assets Direct c			
		-							
Part II	Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	n answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	or more related tax-exer	npt		
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b) controlled entity?		
					501(c)(3))		Yes	No	
	League of Houston Foundation -	_							
	·	⊣				1			
TX 770	027	Community Program	Texas	501(c)(3)	12a	of Houston, Inc.	Х		
	2046, 1811 Briar Oaks Lane, Houston,	Support JL of Houston Community Program	Texas	501(c)(3)	12a	The Junior League of Houston, Inc.	х		

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Predominant income (related, unrelated, excluded from tax under sections 512-514)	me Share of total	Share of	1	ortionate	Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		itions?	amount in box 20 of Schedule K-1 (Form 1065)	partner	ownership	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0	
	1											
	1											
	1											
	1											
	1											
	1											
	1											
	1											
		l .					l					

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	Citally:	
		country						Yes	No

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

Х

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "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		Х
	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
	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		Х
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
	Performance of services or membership or fundraising solicitations for related organization				11	Х	
n	Performance of services or membership or fundraising solicitations by related organization	on(s)			1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х	
	Sharing of paid employees with related organization(s)				10	Х	
р	Reimbursement paid to related organization(s) for expenses				1p		Х
q	Reimbursement paid by related organization(s) for expenses				1q	Х	
r	Other transfer of cash or property to related organization(s)				1r	Х	
s	Other transfer of cash or property from related organization(s)				1s		Х
	If the answer to any of the above is "Yes," see the instructions for information on who mu						
	(a)	(b)	(c)	(d)			
		Transaction	Amount involved	Method of determining amount invo	olved		
		type (a-s)					
1) י	Junior League of Houston Foundation	С	507,074.	Amount accrued			
2) '	Junior League of Houston Foundation	R	6,205,815.	Cash			
3)							
4)							
5)							
6)							
3216	3 11-17-21			Schedule F	R (Forr	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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership