	000 T	Exc	empt Organi	ization B	usir	ness Inc	ome Ta	x Return	0	OMB No 1545	-0687
F	Form <b>990-T</b>			proxy tax u				- 190		201	Ω
		-	r 2018 or other tax ye						2019	201	5
Depa	artment of the Treasury		o to www.irs.gov/i							Open to Public Insp	pection for
Inter	nal Revenue Service	► Do not	enter SSN numbers or				<u> </u>		<u> </u>	501(c)(3) Organizal mployer identification	tions Only
A (	Check box if address changed		The Tunion			changed and see			T (E	imployer identification imployees trust, see structions)	ii number
	xempt under sectio	n Print	The <u>Juni</u> or 1811 Briar	Oaks Lar	JE JI U	ouscon,	IIIC.			74-1185659	ı
	X 501( c X 3 ) 408(e) 220(	Type	Houston, TX	377027					F	nrelated business a	
	408(e)   220( 408A   530(	E)							- (	See instructions )	
ļ	529(a)	-,								722320 541	800_
C	Book value of all assets at end of year	F Group	exemption number	(See instruct	ions )	•					
,	24,180,154	G Check	k organization type	• <b>X</b>	501(c	) corporatio	n []50	l(c) trust	401(a)	trust Oth	ner trust
Н	Enter the number of t	ne organization	's unrelated trades	or businesses		<u>2</u>	C	escribe the only	(or first)	unrelated	
	trade or business he	re <u>Events</u>	and Recept	ions						ne, complete Pa	
	If more than one, de for each additional t				of the	previous s	entence, co	omplete Parts I	and II, (	complete a Sch	edule M
	During the tax year,	_	<del></del>		ted ar	oup or a par	rent-subsid	ary controlled	roup?	►∏Yes	χNο
	If 'Yes,' enter the na	· · · · · · · · · · · · · · · · · · ·	•	•	_			,		ا	
	The books are in care		cca Pivec	•		-	1	elephone numb	er > 7	13-622-419	1
≧ Pa	rt I Unrelated		Susiness Incon	ne		(A) In	come	(B) Expen	ses	(C) Net	t
$\sim$ $\frac{1}{3}$	a Gross receipts or :	sales	1,360,368.						,		-
~>	<b>b</b> Less returns and allowa			c Balance►	1 c		<u>60,368.</u>				
, 2	Cost of goods sold	•	•		2		<u>95,606.</u>				
	Gross profit Subtr				3	1,0	<u>64,762.</u>	u		1,064	,762.
	a Capital gain net in				4a			ļ		<u> </u>	
	D Net gain (loss) (Form 4	/9/, Part II, line I	/) (attach Form 4/9/)		4b	-		ļ	<del></del>	-	
₹ 5	Income (loss) from	tiori ior trusts. a partnership oi	r an S corporation		4c			,			
Z	(attach statement)	)			5						
₹ 6	b Net gain (loss) (Form 4 c Capital loss deduc Income (loss) from (attach statement) Rent income (Sche Unrelated debt-fin	edule C)			6		_				
$\int_{0}^{7}$	Unrelated debt-fina	anced income	(Schedule E)		7			ļ			
			u		8						
9 10	Exploited exempt		, (9), or (17) organization	OFF (Schedule G)	10			-			
11	Advertising income	•	•		11			+		_	
12					<del></del>			_			
	<b>.</b>				12						
13	Total. Combine lin	es 3 through 1	2		13	1,0	64,762.		0.	1,064	,762.
Pa	rt II Deduction	ns Not Take	n Elsewhere (	See instru	ction	s for limita	ations on	deductions.	) (Exc	ept for	
		ons, deducti	ions must be d	rectly con	necte	ed with the	e unrelat	ed business		e.)	
14	Compensation of o	micers, directo	ors, and trustees (	Schedule	<b>CF</b>	IVED			14	526	0.60
15 16					<u> </u>	<u>· · · — — </u>	10		16		,963. ,718.
17		enance		WA WA	D A	0.2020	RS-OSC		17	13	, /10.
18		hedule) (see ır	nstructions)	B WA	K U	9 2020	Ś		18		
19	Tayes and license	•		L			ᄺ		19	52	,699.
20	Charitable contribu	itions (See ins	tructions for limita	ation ruleOC	iDE	N, UT			20		
21	Depreciation (attac	ch Form 4562)					21	181,745	5.		
22	Less depreciation	claimed on Sc	hedule A and else	where on ret	urn		22a		22b	1,81	,745.
23	•								23	<u> </u>	
24		•	nsation plans						24		
25	Employee benefit	_	dula IS						25	145	<u>,578.</u>
26	·		•						26 27		
27 28	·	•					See	Statement		309	,599.
29	Total deductions.		•					Z			,302.
30	Unrelated business			rating loss de	eduction	on Subtract	line 29 fro	m line 13	30		,540.
31	Deduction for net opera					8 (see instructi	ons)	<b>っ</b>	31		- 1
	Unrelated busines				30		E 400011 1:0	3	32		540.
BA	A For Paperwork Re	duction Act N	otice, see instruct	tions.		TE	EA0201L 1/3	1/19		Form <b>990-1</b>	(2018)



		(2018) The Junior League of Houston, Inc.		74	-118565	9 F	Page 2
P <sub>i</sub> ar	t	Total Unrelated Business Taxable Income					
33		of unrelated business taxable income computed from all unrelated trades or busictions)	isinesses (see	)	33		0.
34	Amou	unts paid for disallowed fringes			34		
		ction for net operating loss arising in tax years beginning before January 1, 201	8 (see		-		
			tatement	2	35		
36		of unrelated business taxable income before specific deduction. Subtract line 3	5 from the su	m			
	of lin	es 33 and 34			36		<u>0.</u>
		ific deduction (Generally \$1,000, but see line 37 instructions for exceptions)			37		
38		lated business taxable income. Subtract line 37 from line 36. If line 37 is greated the arraller of Taxable line 37.	er than line 36	5,	38		0
-		the smaller of zero or line 36	<del></del>		30		<u>0.</u>
		Tax Computation					
39		nizations Taxable as Corporations. Multiply line 38 by 21% (0 21)		•	39		0.
40		ts Taxable at Trust Rates. See instructions for tax computation. Income tax on the	ne amount	_	40		
		ne 38 from		•	40		
	•	y tax. See instructions			41		
		native minimum tax (trusts only)			42 43		
		on Noncompliant Facility Income. See instructions					
		Add lines 41, 42, and 43 to line 39 or 40, whichever applies			44		0.
		Tax and Payments					
		gn tax credit (corporations attach Form 1118; trusts attach Form 1116)  45					
		r credits (see instructions)					
		ral business credit Attach Form 3800 (see instructions) 45					
		t for prior year minimum tax (attach Form 8801 or 8827).	a		45 -		•
		credits. Add lines 45a through 45d act line 45e from line 44			45 e		<u>0.</u>
		r taxes Check if from Form 4255 Form 8611 Form 8697 Form 886	6		46		0.
٦,		taxes officer in form 4233			47		
48		tax. Add lines 46 and 47 (see instructions)			48		0.
49		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), lii	ne 2		49		<del></del>
		nents A 2017 overpayment credited to 2018 50 estimated tax payments 50					
		deposited with Form 8868 50					
		gn organizations Tax paid or withheld at source (see instructions) 50			•		
		up withholding (see instructions)					
		t for small employer health insurance premiums (attach Form 8941)			•		
		credits, adjustments, and payments Form 2439			7		
	_	orm 4136 Other Total ► 50	a				
51	Total	payments. Add lines 50a through 50g	<u> </u>		51		0.
		nated tax penalty (see instructions) Check if Form 2220 is attached		►□Ì	52		<del></del>
53		lue. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		 ▶	53		
54		payment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount	overnaid	•	54		
55		the amount of line 54 you want. Credited to 2019 estimated tax		Refunded ►	55		
_	t <sub>i</sub> VI						
56		y time during the 2018 calendar year, did the organization have an interest in or a sign	<u> </u>		er a	Yes	No
50	•	cial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization		•			
		t of Foreign Bank and Financial Accounts If 'Yes,' enter the name of the foreign coun	-	<b>&gt;</b>	· · · · · · · · · · · · · · · · · ·		Х
57		g the tax year, did the organization receive a distribution from, or was it the gra		nsferor to	a foreign tri	ıst?	X
3,		s,' see instructions for other forms the organization may have to file	111101 01, 01 110	maicror to, t	a foreign ac		
58		the amount of tax-exempt interest received or accrued during the tax year > \$		0			
	LINCI	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all inform	and statements, a	nd to the best o	f my knowledge	and	
Sigi	n				knowledge May the IRS di		ro with
Her			<u>sident</u>		the preparer sh	nown below (se	e l
		Signature of officer Date Title				XYes	No
D=:		Print/Type preparer's name Preparer's signature Date		Check If	PTIN		
Paid Pre-		Barbara Murphy Dubachush 2.	21.2020	self employed	P0138	86215	
pare		Firm's name Blazek & Vetterling		Firm s EIN	76-0269		
Üse	<b>!</b>	Firm's address 2900 Weslayan, Suite 200					
Onl	У	Houston, TX 77027-5132		Phone no	(713)	439-573	39
BAA		TEEA0202L 01/24/19				orm <b>990-T</b> (2	

Schedule A - Cost of Good	ds Sold. Ent	er method of inve	entory valuation	<u> </u>						
1 Inventory at beginning of year	ar	1		Invento	ory at	end of year	6			
2 Purchases		2		7 Cost o	f good	ds sold. Subtract				
3 Cost of labor		3				ne 5 Enter here				
4 a Additional section 263A costs (attacl	h schedule)			and in	Part I	, line 2	7	<u> </u>	14	
•	·	4 a							Yes	No
<b>b</b> Other costs		4 b		3 Do the	rules	of section 263A (wi duced or acquired fo	th res	pect to		
(attach sch)  5 Total. Add lines 1 through 48	b	5		to the	organı	zation?	1636	ite) apply		Χ
Schedule C - Rent Income	(From Rea	Property and	Personal F	roperty	Leas	sed With Real P	rope	rty) (see ır	nstructi	ons)
1 Description of property		- · · · · ·					_			
(1)										
(2)										
(3)										
(4)										
	2 Rent receive	ed or accrued				3(a) Deduction	se dira	ctly connec	tod wit	h
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	personal	(if the perce property ex	eal and person entage of rent to ceeds 50% or it on profit or in	or person f the rent	al	the income ii	n colu			
(1)										
(2)	_		,							
(3)										
(4)										
Total		Total				(1) T. I. I. I. I. I. I.	F - 4			
(c) Total income. Add totals of col here and on page 1, Part I, line 6,		I 2(b) Enter ►				(b) Total deductions here and on page 1, Pa I, line 6, column (8)				
Schedule E - Unrelated De	bt-Finance	d Income (see	instructions)							
1 Description of debt	·financed prop	ertv	2 Gross incor		<b>3</b> De	eductions directly co debt-fina	nnect nced (	ed with or a property	allocab	le to
T Beschiption of desic	maness prop	o. ty	financed pr		depr	(a) Straight line reciation (attach sch		(b) Other de (attach sc		
(1)										
(2)										
(3)										
(4)										
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable t	djusted basis of o debt-financed tach schedule)	6 Colum divided column	by 5		7 Gross income ortable (column 2 x column 6)		Allocable of (column 6 x olumns 3(a)	total	of
(1)				્ર						
(2)	<u> </u>			%						
(3)				%						
(4)				8						
					Enter	r here and on page 1, line 7, column (A	1, Ent	er here and	on pa	ige 1,
					"	i, ine 7, column (A	' 'a	, <b>.</b> / ,	COIGITII	رد) .
Totals		_		•	<u> </u>		_			
Total dividends-received deduction	ons included in					<del></del>		F 1	000 T /	2010
RAA		TC	E VUOUSI U1/3U/10					Form 9	フプリーI(	ZU (8)

<b>,</b>			-,							`		<u> </u>
			Exem	npt Con	trolled O	rga	nizations					
1 Name of controlled organization	ıde	Employer ntification number	11	Net uni ncome ee instri			<b>4</b> Total of speci payments ma		organiz		in c	eductions directly connected with come in column 5
(1)						+	-					
(2)						+						
(3)						+	-					
(4)						+			<u> </u>			
Nonexempt Controlled Organiz	ations		<del></del>								1	
7 Taxable Income	8 N	et unrelated come (loss) instructions)			f specifie nts made	d	10 Part of included in organization	n the c	ontrolling		connecte	ctions directly d with income olumn 10
(1)			+							+		
(2)			+			_				<del></del>		
(3)			+						·	+	•	
(4)			+-									
Totals	·		1			•	Add columns here and on p 8, co		, Part I, line		e and on p	s 6 and 11 Enter page 1, Part I, line lumn (B)
Schedule G – Investmer	at Inco	me of a Sec	ction	501/	c)(7) (9	<u>, , , , , , , , , , , , , , , , , , , </u>	or (17) Organ	nizati	On (see in	truction	ne)	
1 Description of income		2 Amount o			3 dire	De ctly	eductions connected schedule)		4 Set-aside	s	<b>5</b> Tota set-a	Il deductions and sides (column 3 us column 4)
(1)					(611	uc.,	Jone Garey		<u></u>		-	
(2)					<b>.</b>						-	
(3)		<del></del> .—	-									
(4)												
Totals	•	Enter here and Part I, line 9,	colun	nn (A)	The		A alvantinina I				Part I, I	ere and on page I ine 9, column (B)
Schedule I – Exploited E	xemp	<del>-</del>				Т		1				1
1 Description of exploited a	activity	2 Gross unrelated business income fro trade or business	d s m	conne prod of u	ises directly ected with duction nrelated iss income	fro or 2 r	Net income (loss) om unrelated trade business (column minus column 3) f a gain, compute lumns 5 through 7	activi unrela	s income from ty that is not ited business income	attribu	penses itable to imn 5	7 Excess exempt expenses (column 6 minus column 5, bu not more than column 4)
(1)				-		<b>†</b>						
(2)						t						
(3)		-										
(4)						T						
Totals		Enter here on page Part I, line column (A	1,	on p Part I	here and page 1, , line 10, mn (B)		•		. — 1		. <u> </u>	Enter here and on page 1, Part II, line 26
Schedule J – Advertisin			uotic:	) )		L			<del></del>			<u> </u>
					n a a li al a	+	d Posis					
Part I Income From Pe	riodic								1.1			125
1 Name of periodical		2 Gross advertisin income		adve	Oirect ertising osts	(1	Advertising gain or loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		rculation ncome		idership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)						4						4
(2)		<b>_</b>				4						4
(3)						-	·					-{
(4)	-	<del> </del>				+			-			<del> </del>
Totals (carry to Part II, line (5))	) 1	•										

BAA

| Partill | Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

| 1 Name of periodical | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5 Circulation income | 6 Readership costs (col 6 minus col 5, but not more than col 4) | (1) | (2) | (3) | (3) | (3) | (4) | (4) | (5) | (6) | (7) | (7) | (7) | (7) | (7) | (8) | (7) | (8) | (7) | (8) | (7) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (9) | (

(3)
(4)

Totals from Part I

Enter here and on page 1, Part I, line 11, column (B)

Totals, Part II (lines 1 – 5)

Enter here and on page 1, Part I, line 11, column (B)

Enter here and on page 1, Part II, line 27.

Schedule K -	<ul> <li>Compensation of Officers</li> </ul>	s, Directors, and	Trustees (see instructions)
--------------	--	-------------------	-----------------------------

1 Name	<b>2</b> Tıtle	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		ે	
		%	
		%	
		%	
Total. Enter here and on page 1, Part II, line 14		<b>•</b>	

TEEA0204 L 12/31/18

Form 990-T (2018)

## SCHEDULE M (Form 990-T)

### Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 6/01, 2018, and ending 5/31, 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

	The Junior League of Houston, Ir	nc.		74-118565	9	
Ur	related business activity code (see instructions) ➤ 722320					<u> </u>
De	escribe the unrelated trade or business > Advertising		•			
Parl	Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net
1a	Gross receipts or sales					• •
b	Less returns and allowances c Balance ►	1c				•
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit. Subtract line 2 from line 1c	3				-
4a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c	-			
5	Income (loss) from a partnership or an S corporation (attach statement)	5		• ,		
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11	31,374.	11,9	25.	19,449.
12	Other income (See instructions; attach schedule)	12		-		
13	Total. Combine lines 3 through 12	13	31,374.	11,9	925.	19,449.
Part	deductions must be directly connected with the unrelated	d busine				
14	Compensation of officers, directors, and trustees (Schedule	K)			14	
15 10	Salaries and wages				16	
16 17	Repairs and maintenance Bad debts				17	
					18	
18 19	Interest (attach schedule) (see instructions) Taxes and licenses				19	
20	Charitable contributions (See instructions for limitation rules	-1			20	<del></del>
21	Depreciation (attach Form 4562)	•/	21			
22	Less depreciation claimed on Schedule A and elsewhere on	return	22a		22b	
23	Depletion	· · · Ctai· · ·	LLU	<del></del> -	23	
24	Contributions to deferred compensation plans				24	
25	Employee benefit programs				25	
26	Excess exempt expenses (Schedule I)				26	
27	Excess readership costs (Schedule J)				27	19,449.
28	Other deductions (attach schedule)				28	20/330.
29	Total deductions. Add lines 14 through 28				29	19,449.
30	Unrelated business taxable income before net operating loss deduction. Sub-	tract line 2	9 from line 13		30	
31	Deduction for net operating loss arising in tax years beginn			2018 (see		
	instructions)	-		•	31	

BAA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income Subtract line 31 from line 30

32

Schedule M (Form 990-T) 2018

32

•								
Form 990-T (2018) The Juni	or League of Houst	on, Inc.		74	-118	5659	Ρ	age 3
Schedule A - Cost of Good								
1 Inventory at beginning of year			tory at end	of year	6			
2 Purchases	2	7 Cost	of goods so	old. Subtract				
3 Cost of labor	3	line 6	from line 5	Enter here	<u></u> -			
4 a Additional section 263A costs (attach	schedule)	and ir	n Part I, line	9 2	7		Tv.	
·	´ 4a			0524			Yes	No
<b>b</b> Other costs (attach sch)	4 b	8 Do the	e rules of so extra produce	ection 263A (with dominated for acquired for	th respi	ect to e) annly		
5 Total. Add lines 1 through 4b	5		organization		, , , , , , , , , , , , , , , , , , , ,	o, app.,		X
Schedule C - Rent Income	(From Real Property ar	d Personal Propert	y Leased	With Real P	roper	ty) (see i	nstruct	ions)
1 Description of property								
(1)								
(2)				···				
(3)	·· <del>·</del>							
(4)								
	2 Rent received or accrued			21.5				
(a) From personal prope (if the percentage of rent for property is more than 10% more than 50%)	personal (if the perbut not property e	real and personal proper centage of rent for person xceeds 50% or if the rend d on profit or income)	nal	3(a) Deduction the income ir (att	n colum			
(1)		a on prom or moomey						
(2)								
(3)				<del></del>				
(4)		<del></del>	-	1.2				
Total	Total							
(c) Total income. Add totals of colonere and on page 1, Part I, line 6,			her	Total deductions e and on page 1, Pa ne 6, column (8)				
Schedule E - Unrelated De	bt-Financed Income (se	e instructions)						
1 Description of debt-	financed property	2 Gross income from or allocable to debt-	3 Deduc	tions directly co debt-fina	nnecte nced pr	d with or operty Se	allocab ee St	le to
r bescription of debt	intended property	financed property		Straight line ition (attach sch		o) Other d (attach so		
(1)								
(2)								
(3)								
(4)	<del></del>							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)		reporta	ross income ble (column 2 x olumn 6)	(	Allocable o column 6 umns 3(a	x total	of

કૃ Enter here and on page 1, Enter here and on page 1, Part I, line 7, column (A) • Total dividends-received deductions included in column 8

e

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Form 990-T (2018)

**Totals** 

(1) (2)

(3)

(4)

									<u> </u>		<u> </u>
		E	Exempt C	ontrolled O	rganız	ations		· ·· —			
1 Name of controlled organization	ıde	Employer ntification number	ıncom	nrelated e (loss) tructions)		otal of spec ayments ma		organia		in c	eductions directly connected with ome in column 5
(1)					+		-				
(2)					+					<del>-  </del> -	
(3)					<del> </del>						
(4)					+						
Nonexempt Controlled Organiza	ations				L						
		et unrelated	9 Total	of specifie	<u>ч</u> [	10 Part of	colum	n Q that is	<del></del>	11 Deduc	ctions directly
7 Taxable Income	in	come (loss)		ents made		included ii organizatio	n the c	controlling	,	connecte	d with income olumn 10
(1)											
(2)											
(3)				_							
(4)											
Totals						Add columns ere and on p 8, co		, Part I, line	Add here	e and on p	s 6 and 11 Enter page 1, Part I, line lumn (B)
Schedule G - Investmen	it Inco	me of a Sec	tion 501	(c)(7), (9	), or	(17) Orgai	nizati	on (see ins	struction	ns)	····
1 Description of income		2 Amount o		dire	Dedu			4 Set-aside ttach sched	s	<b>5</b> Tota set-a	I deductions and sides (column 3 us column 4)
(1)							-			<u> </u>	
(2)											·-··
(3)				1							
(4)	•										
Totals	<b>&gt;</b>	Enter here and Part I, line 9, c	column (A							Part I, I	ere and on page 1 ine 9, column (B)
Schedule I – Exploited E	xemp	<del></del>	come, O	ther Tha	n Ad	vertising	Incor	ne (see ins			
1 Description of exploited a	ctivity	2 Gross unrelated business income fror trade or business	cor p n of	enses directly inected with roduction unrelated ness income	from or bus 2 min	income (loss) unrelated trade siness (column us column 3) gain, compute ns 5 through 7	activ	s income from ty that is not ated business income	attribi	penses Itable to Imn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)			<u> </u>		<del>                                     </del>						
(2)			<del>-  </del>	·	1						
(3)					<u> </u>						_
(4)					1						
		Enter here a on page 1 Part I, line column (A	, or 10, Par	r here and page 1, t I, line 10, umn (B)	İ			•			Enter here and on page 1, Part II, line 26
Totals					<u> </u>						
Schedule J – Advertising						•					
Part I Income From Per	riodic										T==
1 Name of periodical		2 Gross advertising income		Direct vertising costs	(loss col	vertising gain or ) (col 2 minus 3) If a gain, mpute cols 5 through 7		rculation ncome		idership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)											
(2)					_						4
_(3)					4						-
(4)					+						
Totals (carry to Part II, line (5))	, '	•									

Form 990-T (2018) The Junior League of Houston, Inc. 74-1185659 Page
Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1 Name of periodical	2 Gross advertising income	<b>3</b> Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	<b>6</b> Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1) Houston News (2) (3) (4)	31,374.	11,925.	19,449.	6,957.	32,426.	19,449.
Totals from Part I			, , ,	2		
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1− 5)	31,374.	11,925.	- '-		7	19,449.

Schedule K — Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	<b>2</b> Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		9	
		%	
		%	
		%	
Total. Enter here and on page 1, Part II, line 14		•	

BAA TEEA0204 L 12/31/18 Form 990-T (2018)

### Form **4562**

# **Depreciation and Amortization** (Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2018

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

The Junior League of Houston. Inc.

Identifying number

	<u>Junior League o</u>		lnc.				/4	-1185659
	ess or activity to which this form rela	tes		•				
	m 4562 only							
Par			Property Under Sec		Oart I			
	<del></del>		complete Part V before	you complete r	arti		1	****
1	Maximum amount (see in:	,		- >			2	
2	Total cost of section 179 p		•	•			3	
3	Threshold cost of section				is)		-	
4	Reduction in limitation Su Dollar limitation for tax ve		•			filma	4	
5	separately, see instruction		from tine i it zero or it	ess, enter -u- ir	married	ming	5	
-6		Description of property		(b) Cost (business	s use only)	(c) Elected cos		
		, , , , ,		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		ζ-/		
	··· · ·					•		•
7	Listed property Enter the	amount from line	29	-	7			
8	Total elected cost of secti			(c), lines 6 and 7	7		8	<del></del>
9	Tentative deduction Ente	r the <b>smaller</b> of lin	ne 5 or line 8				9	
10	Carryover of disallowed de	eduction from line	13 of your 2017 Form 4	562			10	
11	Business income limitatio					5 See instrs	11	
12	Section 179 expense dedu						12	
13	Carryover of disallowed de				▶ 13			
	: Don't use Part II or Part I							
Par	t II Special Deprec	<u>iation Allowan</u>	ce and Other Depre	eciation (Don't	include	listed property S	ee ins	tructions )
14	Special depreciation allow	ance for qualified	property (other than list	ed property) pla	ced in se	rvice during the		•
	tax year See instructions	,	. , , , ,	, , , , , , , ,		_	14	
15	Property subject to section	n 168(f)(1) election	ר				15	
16	Other depreciation (includ	ing ACRS)					16	
Par	t III MACRS Depre	ciation (Don't ind	clude listed property Se	e instructions)				
	•		Section	n A				
17	MACRS deductions for ass	sets placed in serv	vice in tax years beginni	ng before 2018			17	180,952.
18	If you are electing to group	any assets placed ii	n service during the tax ve	ear into one or mo	ore genera	al —		
	asset accounts, check her					- □		
	Section B	- Assets Placed	in Service During 2018	Tax Year Using	the Gene	eral Depreciation	Syste	m
	(a)	(b) Month and	(C) Basis for depreciation (business/investment use	(d)	(e) Conven			(g) Depreciation deduction
	Classification of property	year placed in service	only — see instructions)	Recovery period	Conven	tion Wethou		deduction
19 a	3-year property			•				
	5-year property	Ī.,						
	7-year property	1						
	10-year property	1						
	15-year property	1						-
f	20-year property	1						
	25-year property	1		25 yrs		S/L		
	Residential rental			27.5 yrs	MM			
	property			27.5 yrs	MM			
i	Nonresidential real	Various	61,848.	39 yrs	MM			793.
•	property	TULLUUS	02/0101	02 123	MM			
		- Assets Placed in	Service During 2018 T	ax Year Using th			n Svs	tem
20 a	Class life	7.55cts / lacca ii	l convice burning 2010 1	ax roar osing a	1	S/L	,-	
		-		12 ure	<del></del>	S/L		
	12-year : 30-vear	1		12 yrs 30 yrs	MM			<del>-</del> ·
	: 30-year I 40-year			40 yrs	MM			
				40 ÅT2	I I'II'	3/1		
Par			- <del></del>			<del></del>	21	
21	Listed property Enter ame		101 00			<u> </u> -	21	
22	Total Add amounts from line 12 the appropriate lines of your retu	, lines 14 through 17, h rn. Partnerships and S	nes 19 and 20 in column (g), a corporations — see instruction	ina iine 21. Enter her is	e and on		22	181,745.
23	For assets shown above a	•	•	_			<del></del> +	1017,710.
	the portion of the basis at			,	23			

2018	Federal Statements		Page 1
	The Junior League of Houston, Inc.		74-1185659
Statement 1 Form 990-T, Part II, Line 28 Other Deductions	·		
Administrative support feed Armored car Bank charges Cost of functions Facility expense Information technology Insurance Kitchen expense Linens Office expense Postage Professional fees Supplies	es	\$  Total \$	21,043. 653. 18,693. 2,078. 136,234. 4,186. 23,611. 1,400. 35,920. 8,393. 215. 15,930. 41,243. 309,599.

#### Statement 2 Form 990-T, Part III, Line 35 Net Operating Loss Deduction

Loss Year Ending	0	riginal Loss	Loss Previousl Used	-У	Loss <u>Available</u>
5/31/01 5/31/02 5/31/03 5/31/04	\$	191,934. 193,312. 96,682. 168,142.	\$ 9	95,323. \$ 0. 0. 0.	96,611. 193,312. 96,682. 168,142.
5/31/05 5/31/06 5/31/07 5/31/08		208,297. 217,997. 189,969. 50,727.		0. 0. 0.	208,297. 217,997. 189,969. 50,727.
5/31/09 5/31/10 5/31/11		112,414. 48,013. 97,491.		0. 0. 0.	112,414. 48,013. 97,491. 201,175.
5/31/12 5/31/13 5/31/14 5/31/17		201,175. 58,174. 82,327. 37,103.		0. 0. 0.	58,174. 82,327. 37,103.
5/31/18 Net Operating Loss Taxable Income Net Operating Loss		117,314. (Limited to T	axable Income)	0.	117,314. \$ 1,975,748. \$ 0. \$ 0.