Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

2022	
Open to Public	
Inspection	

B Case and Company of the Company of	<u> </u>	or the	$= 2022$ calendar year, or tax year beginning $\cup \cup \cup$	ending <u>M</u>	AY 31, 2023	
Table Contributions and article Contributions and actives to the province, country, and ZIP or foreign postal code SAN ANTONIO, TX 78216 Color of two, state or province, country, and ZIP or foreign postal code SAN ANTONIO, TX 78216 Final Association Color of two, states or province, country, and ZIP or foreign postal code SAN ANTONIO, TX 78216 Final Association Color of two, states or province, country, and ZIP or foreign postal code SAN ANTONIO, TX 78216 Final Association Color of two, states or province, country, and ZIP or foreign postal code SAN ANTONIO, TX 78216 Final Association Color of two states Color of two	B (Check if applicable	C Name of organization		D Employer identifi	cation number
More and street for P.O. box il mail is not delivered to street address) Room/sulle Z10 - 225 - 1861			JUNIOR LEAGUE OF SAN ANTONIO, INC			
Number and street (if P.0. for if nall is not deliverable to street aboutisss) 10.0 NE LOOP 410 10.0 N		chang	Doing business as		74-12724	13
City or town, state or province, country, and ziP or foreign postal code Ann ANTONIO, TX 78216 Feature and address of principal officer.RACHEL BRUNO SAME AS C ABOVE Feature and address of principal officer.RACHEL BRUNO J Tax-exement status: X 5016(x)3 5016()) (insert no.) 4947(a)(1) or 522 Webste: WWW. JLSA.ORG H(c) aroup exemption number K form of organization: X Corporation Trust Association Other Lycar of formation: 19 24 M State of legal domicile: TX Part II Summary 1 Briefly describe the organization's mission or most significant activities: THE JUNIOR LEAGUE OF SAN ANTONIO, INC. IS AN ORGANIZATION OF WOMEN WHOSE MISSION IS TO Check this box if the organization discontinued its operations or disposed of more than 2956 of its net assets. Number of violating embles of the governing body (Part VI, line 1b) 4 112 Total number of individuals employed in calendar year 2022 (Part V, line 1b) 4 112 Total number of violating embles of the powerning body (Part VI, line 1b) 4 17, 333 471, 110. B Contributions and grants (Part VIII, line 1b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 1b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributions and grants (Part VIII, line 2b) 4 417, 333 471, 110. B Contributi		return	,			
SAN ANTONIO, TX 78.216 H(a) is this a group return for subordinates? Yes X No Horse and address of principal officer. RACHEL BRUNO F Name and address of principal officer. RACHEL BRUNO Tax-exempt status: X 501(c)(3) 501(c) (insert no.) 4947(a)(1) or 527 M H(b) has a subordinates? Yes X No Horse Yes Yes No Horse Yes No Horse Yes		lreturn/		.01	210-225-	
SAME AS C ABOVE Falme and address of principal officer RACHEL BRUNO Hugh strines a group return for subconfinates? Yes X No RAME AS C ABOVE Two subconfinates included! Yes No Rose No			, , , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	632,025.
SAME AS C ABOUTE		return	SAN ANIONIO, IX 78218		H(a) Is this a group re	eturn
Taxexempt status: Stort(St(St) Sol1(c) (insert no.) 4947(a)(1) or Stort Thro." attachance inclusion? Verbell No. Thro." attachance is stort incurrence No. Thro." attachance is stort No. Thro." attachance No. Thro. No.		Application	F Name and address of principal officer: RACHEL BRUNO		for subordinates	? Yes X No
Website: WWW.JLSA.ORG		pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
Part Summary	<u></u>	Гах-ех	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	r 527	If "No," attach a	list. See instructions
Part Summary					H(c) Group exemption	n number
Briefly describe the organization's mission or most significant activities: THE JUNIOR LEAGUE OF SAN ANTONIO, INC. IS AN ORGANIZATION OF WOMEN WHOSE MISSION IS TO	KF	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1924 N	M State of legal domicile: TX
ANTONIO, INC. IS AN ORGANIZATION OF WOMEN WHOSE MISSION IS TO	Pa	art I	Summary			
5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7 a Total unrelated business taxable income from Form 990T, Part I, line 11 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1b) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Benefits paid to or for members (Part IX, column (A), line 1) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 1) 16 Total revenue (Part VIII, column (A), line 11e) 17 Other expenses (Part IX, column (A), line 11e) 18 Total expenses (Part IX, column (A), line 11e) 19 Tother expenses (Part IX, column (A), line 11e) 10 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 21 Total isabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 18 from line 12 21 Total labilities (Part X, line 26) 31 Signature Block 32 Data assets (Part IX, line 16) 32 Prepart II Signature Block 33 Signature of officer 34 CACHEL BRUNO, PRESIDENT 2023–2024 34 Type or print name and title 44 Print/Type preparer same 34 Preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 35 Firm's address 7800 IH 10 WEST, STE. 505 36 Firm's address 7800 IH 10 WEST, STE. 505 36 Phone no. 210–366–9430	_	1	Briefly describe the organization's mission or most significant activities: THE J	UNIOR	LEAGUE OF	SAN
5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7 a Total unrelated business taxable income from Form 990T, Part I, line 11 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1b) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Benefits paid to or for members (Part IX, column (A), line 1) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 1) 16 Total revenue (Part VIII, column (A), line 11e) 17 Other expenses (Part IX, column (A), line 11e) 18 Total expenses (Part IX, column (A), line 11e) 19 Tother expenses (Part IX, column (A), line 11e) 10 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 21 Total isabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 18 from line 12 21 Total labilities (Part X, line 26) 31 Signature Block 32 Data assets (Part IX, line 16) 32 Prepart II Signature Block 33 Signature of officer 34 CACHEL BRUNO, PRESIDENT 2023–2024 34 Type or print name and title 44 Print/Type preparer same 34 Preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 35 Firm's address 7800 IH 10 WEST, STE. 505 36 Firm's address 7800 IH 10 WEST, STE. 505 36 Phone no. 210–366–9430	nce		ANTONIO, INC. IS AN ORGANIZATION OF WOMEN	WHOSE	MISSION IS	TO
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5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7 a Total unrelated business taxable income from Form 990T, Part I, line 11 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1b) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Benefits paid to or for members (Part IX, column (A), line 1) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 1) 16 Total revenue (Part VIII, column (A), line 11e) 17 Other expenses (Part IX, column (A), line 11e) 18 Total expenses (Part IX, column (A), line 11e) 19 Tother expenses (Part IX, column (A), line 11e) 10 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 21 Total isabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 18 from line 12 21 Total labilities (Part X, line 26) 31 Signature Block 32 Data assets (Part IX, line 16) 32 Prepart II Signature Block 33 Signature of officer 34 CACHEL BRUNO, PRESIDENT 2023–2024 34 Type or print name and title 44 Print/Type preparer same 34 Preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 35 Firm's address 7800 IH 10 WEST, STE. 505 36 Firm's address 7800 IH 10 WEST, STE. 505 36 Phone no. 210–366–9430	Ş.	3	Number of voting members of the governing body (Part VI, line 1a)		3	12
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Solution	/itie					685
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Prior Year Current Year 417, 333, 471, 110.	⋖	1				0.
9 Program service revenue (Part VIII, line 2g)					Prior Year	Current Year
9	4	8	Contributions and grants (Part VIII, line 1h)		417,333.	471,110.
12 Total revenue (Part VIII, column (A), lines 5, 62, e2, e1, e2, and 116) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Benefits paid to or for members (Part IX, column (A), lines 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising fees (Part IX, column (A), line 4) 17 Other expenses (Part IX, column (A), line 25) 18 Total expenses (Part IX, column (A), line 25) 19 Total fundraising expenses (Part IX, column (A), line 25) 10 Total expenses (Part IX, column (A), line 25) 10 Total expenses (Part IX, column (A), line 25) 11 Total expenses (Part IX, column (A), line 25) 12 Total assets (Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 Signature Block Moder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Part II Signature Block Note that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Pirm's perparer's name RACHEL BRUNO, PRESIDENT 2023–2024 Type or print name and title Print/Type preparer's name RANDY L. WALKER, CPA Firm's name RANDY WALKER & CO Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210–366–9430	evenue	9			400.	750.
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 474,107	ĕ	11			-37,360.	-131,076.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 10 3, 400 . 61, 970 . 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 . 0 . 0 . 0 . 0 . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 115, 915 . 125, 572 . 126 Professional fundraising fees (Part IX, column (A), line 11e) 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0		1				
14 Benefits paid to or for members (Part IX, column (A), line 4) 0 . 0 . 0 . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 115, 915 . 125, 572 . 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 . 0 . 0 . 17 Other expenses (Part IX, column (A), line 25) 61,094 . 18 Total expenses (Part IX, column (A), lines 25) 454,436 . 495,357 . 19 Revenue less expenses. Subtract line 18 from line 12 19,67158,670 . 19 Revenue less expenses. Subtract line 18 from line 12 19,67158,670 . 20 Total assets (Part X, line 16) 20 30 4,846,411 . 21 Total liabilities (Part X, line 26) 55,508 . 301,936 . 22 Net assets or fund balances. Subtract line 21 from line 20 4,673,158 . 4,544,475 . Part II Signature Block Signature Block Signature of officer Date RACHEL BRUNO						
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 115, 915. 125, 572. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. 0. 17 Other expenses (Part IX, column (D), line 25) 61,094. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 454, 436. 495, 357. 19 Revenue less expenses. Subtract line 18 from line 12 19,671. -58,670. 20 Total assets (Part X, line 16) 4,728,666. 4,846,411. 21 Total liabilities (Part X, line 26) 55,508. 301,936. 22 Net assets or fund balances. Subtract line 21 from line 20 4,673,158. 4,544,475. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		1				
16a Professional fundraising fees (Part IX, column (A), line 11e) 0 . 0 . 0 . b Total fundraising expenses (Part IX, column (D), line 25) 61 , 094 . 17 Other expenses (Part IX, column (A), line 11a, 11d, 11f, 24e) 235 , 121 . 307 , 815 . 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 454 , 436 . 495 , 357 . 19 Revenue less expenses. Subtract line 18 from line 12 19 , 67158 , 670 . 20 Total assets (Part X, line 16) 4 , 728 , 666 . 4 , 846 , 411 . 21 Total liabilities (Part X, line 26) 55 , 508 . 301 , 936 . 22 Net assets or fund balances. Subtract line 21 from line 20 4 , 673 , 158 . 4 , 544 , 475 . Part II Signature Block Signature Block Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date RACHEL BRUNO	"	45			115,915.	125,572.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 33 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer RACHEL BRUNO, PRESIDENT 2023-2024 Type or print name and title Print/Type preparer's name RANDY L. WALKER, CPA Preparer Firm's name RANDY WALKER & CO Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210-366-9430	Se	16a				
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Sign Signature of officer Date	Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	knowledge and belief, it is
Sign Signature of officer Date	true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.	
RACHEL BRUNO, PRESIDENT 2023-2024 Type or print name and title Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Print/Type preparer Preparer's signature Preparer's signature Print/Type preparer's name Preparer's signature Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's nam						
## RACHEL BRUNO, PRESIDENT 2023-2024 Type or print name and title	Sign	n	Signature of officer		Date	
Type or print name and title Print/Type preparer's name RANDY L. WALKER, CPA Preparer Firm's name RANDY WALKER & CO Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210-366-9430			RACHEL BRUNO, PRESIDENT 2023-2024			
Paid RANDY L. WALKER, CPA If self-employed self-employed P00963779 Preparer Use Only Firm's name RANDY WALKER & CO Firm's EIN 20-3992693 Use Only Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210-366-9430			Type or print name and title			
Paid RANDY L. WALKER, CPA self-employed P00963779 Preparer Firm's name RANDY WALKER & CO Firm's EIN 20-3992693 Use Only Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210-366-9430			Print/Type preparer's name Preparer's signature			PTIN
Preparer Use Only Firm's name RANDY WALKER & CO Firm's EIN 20-3992693 Use Only Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210-366-9430	Paid	i				P00963779
Use Only Firm's address 7800 IH 10 WEST, STE. 505 SAN ANTONIO, TX 78230 Phone no. 210-366-9430						
SAN ANTONIO, TX 78230 Phone no. 210-366-9430						
		•	•		Phone no. 21	0-366-9430
	May	/ the IF	· · · · · · · · · · · · · · · · · · ·			

Га	Obselvi Ochseld Oceanics and a second plantine its	X
_	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
1	Briefly describe the organization's mission: THE JUNIOR LEAGUE OF SAN ANTONIO, INC. IS AN ORGANIZATION OF W	ОМЕМ
	WHOSE MISSION IS TO ADVANCE WOMEN'S LEADERSHIP FOR MEANINGFUL	OHEN
	COMMUNITY IMPACT THROUGH VOLUNTEER ACTION, COLLABORATION, AND	
	TRAINING. ITS PURPOSE IS EXCLUSIVELY EDUCATIONAL AND CHARITABL	
		<u> </u>
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O.	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes _A_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	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organizations are required to report the amount of grants and allocations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organization 501(c)(expenses, and
	revenue, if any, for each program service reported.	11,372.)
4a	(Code:) (Expenses \$ 351,311. including grants of \$ 61,970.) (Revenue \$	
	THE JUNIOR LEAGUE OF SAN ANTONIO, INC. IS AN ORGANIZATION OF WWHOSE MISSION IS TO ADVANCE WOMEN'S LEADERSHIP FOR MEANINGFUL	
	IMPACT THROUGH VOLUNTEER ACTION, COLLABORATION, AND TRAINING.	
	PURPOSE IS EXCLUSIVELY EDUCATIONAL AND CHARITABLE. JLSA IS PRO	
	NOTE THAT IN THE 2022-2023 LEAGUE YEAR 71% OF OUR EXPENSES WEN	
	DIRECTLY TO SERVING OUR MISSION.	<u> </u>
	DIRECTED TO SERVING OUR MISSION:	
	WE BEGAN THE 2022-2023 LEAGUE YEAR BY WELCOMING 48 WOMEN APPLI	CANTS TO
	OUR NEW MEMBER PROGRAM WHICH OFFERS A VARIETY OF COMMUNITY AND	
	FUNDRAISING PROJECTS, MEMBER ENGAGEMENT OPPORTUNITIES, TRAININ	
	ENHANCING COMMUNITY AWARENESS AND MISSION RELATED VOLUNTEER	35
	OPPORTUNITIES.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
70	(Code:) (Expenses a) (nevenue a)	,
4c	(Code:) (Expenses \$	<u> </u>
	(Costs) / (Expenses +	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 351,311.	
		Form 990 (2022)

17060410 130509 JUNIOR LEAGUE

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
•	Schedule D, Part III	l °		
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?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	ا ا		.
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
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		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	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			T -
	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,"	"		
13	·	19		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	• •	20a 20b		 ^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		\vdash
21		,,	Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Λ	<u> </u>

Form	1990 (2022) JUNIOR LEAGUE OF SAN ANTONIO, INC 74-127	2413	Р	age 4
Pai	rt 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	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		├─
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			1,7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			3,7
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			3,7
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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			3,7
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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			3,7
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			1,7
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			- T
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			- T
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
05 -	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		x
07	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	0.7		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	Х	
Pai	Note: All Form 990 filers are required to complete Schedule 0 rt V Statements Regarding Other IRS Filings and Tax Compliance	38	_ ^	
. u	Check if Schedule O contains a response or note to any line in this Part V			
	Chook in Contourie Co Contains a response of note to any line in this rait v		Yes	N ₂
1-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	0	168	No
		5		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7		
·				4

232004 12-13-22

(gambling) winnings to prize winners?

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Form 990 (2022)

JUNIOR LEAGUE OF SAN ANTONIO, 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		5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccou	nt)?	4a		X
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 Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Form 114, Report of Foreign Bank and Financial Actions for FinCEN Foreign Bank and Financial Actions for F	ccou	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e org	anization solicit			,,
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons c	or gifts	١		
_	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			_		v
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser					X
			do.ad	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					x
	to file Form 8282?	1	1	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	•	70		х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		CT?	7e 7f		X
f g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		800 as required?	7g		
•	If the organization received a contribution of qualified intellectual property, did the organization file ro			7 <u>9</u> 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			/		
Ū		•		8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the appropriate appropriate realist contact the distributions and a continuous 40000			9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
b	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	112	1			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11k				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	104	l?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b)	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
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	۱	1			
	organization is licensed to issue qualified health plans	13b		4		
	Enter the amount of reserves on hand	130	;			77
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule the explanation of the			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			45		x
	excess parachute payment(s) during the year?			15		
16	If "Yes," see the instructions and file Form 4720, Schedule N.	t inco	mo?	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O.	LITICO	me?	16		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivitio	ie.			
17	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.			- 17		

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				X
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	1a 12			
	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	1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship w	rith 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 d				
			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990		4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's asset		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 appo				
	more members of the governing body?		7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stock				
	persons other than the governing body?		7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b				
а	The governing body?	,	8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	nue Code)			
		,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chap				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body b	efore filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes				
	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	X	
15	Did the process for determining compensation of the following persons include a review and approval by				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
	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 arrangeme	nt 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				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	ation'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 filedNONE				
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	ble
	for public inspection. Indicate how you made these available. Check all that apply.				
	Own website X Another's website X Upon request Other (explain o	n Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, confi	,	d financ	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			
	SHELLEY WEBER - (210) 225-1861				
	100 NE LOOP 410, 101, SAN ANTONIO, TX 78216				

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, box 6 of 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.

Check this box if neither the organiz		orga T	nıza			nper	sate	T -		(E)
(A)	(B)			() Pos	C) ition	1		(D)	(E)	(F)
Name and title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated
	hours per week					s both or/trus		compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	direc				- - - -		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Iltrus	nal tr		loyee	dwos		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SHELLEY WEBER	1ine) 40.00	프	Ë	₩	-S	iž is	훈			
MANAGING DIRECTOR	40.00	-		х				18,958.	0.	1,631.
(2) NICOLE ALABI	2.00			^				10,930.	0.	1,031.
MEMBER AT LARGE	2.00	X						0.	0.	0.
(3) MARY BETH MURPHREE	10.00	^						0.	0.	0.
VP OF RESEARCH AND DEV	10.00	X						0.	0.	0.
(4) SARAH SCHIMPFF	10.00							0.	0.	<u> </u>
VP OF COMMUNICATION	10.00	х						0.	0.	0.
(5) SUMMER KOSTSON	10.00									
VP OF COMMUNITY		х						0.	0.	0.
(6) BROOKE HALEY	10.00									
VP OF FUND DEVELOPMENT		Х						0.	0.	0.
(7) KRISTY PACHECO	10.00									
VP OF MEMBERSHIP DEV		Х						0.	0.	0.
(8) AMANDA CROUCH	12.00									
PRESIDENT		Х		Х				0.	0.	0.
(9) ELIZABETH FORESTER	12.00									
TREASURER		Х		Х				0.	0.	0.
(10) RACHEL BRISEO BRUNO	10.00									
PRESIDENT-ELECT		Х		Х				0.	0.	0.
(11) PAMELA RODRIGUEZ	10.00									
TREASURER-ELECT		Х		Х				0.	0.	0.
(12) DAWN WALKER	10.00									
BOARD SECRETARY		X		Х				0.	0.	0.
						_	_			
		1								
		1								
		-								
		1								
		-								
		1								
		-								
			<u> </u>	<u> </u>		<u> </u>				000

Part VII Se	ction A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)			_ (0	•			(D)	(E)			(F)	
	Name and title	Average	(do		Posi heck i		າ than d	one	Reportable	Reportable		E	stimate	ed
		hours per	box	, unles	ss per	son i	s both	an	compensation	compensation		a	mount	of
		week (list any					1	,	from the	from related		000	other	tion
		hours for	direct				_			organization (W-2/1099-MIS		l .	npensa from th	
		related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)		l	ganizat	
		organizations	trust	nal tru		oyee	om pe		1099-NEC)	,		1 '	nd relat	
		below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	mer				org	janizati	ons
		line)	lu	Inst	0#i	Key	e Fig	For						
			-											
-														
1b Subtotal									18,958.		0.		1,6	31.
	om continuation sheets to Part VI								0.		0.		<u> </u>	0.
	dd lines 1b and 1c)								18,958.		0.		1,6	
	mber of individuals (including but n									000 of reportable				
compens	sation from the organization								•	•				0
													Yes	No
3 Did the o	organization list any former officer,	director, truste	ee, k	кеу е	empl	oye	e, or	hig	hest compensated empl	oyee on				
	lf "Yes," complete Schedule J for s											3		X
	ndividual listed on line 1a, is the su													77
	ed organizations greater than \$150											4		X
, .	person listed on line 1a receive or a					,			ed organization or individ	lual for services		5		Х
	I to the organization?	plete Schedule	e J t	or su	ıch r	oers	on .					5		21
	e this table for your five highest co	mpensated ind	lene	nder	nt cc	ntra	actor	rs th	nat received more than \$	100 000 of com	ensa	tion fr	om	
•	nization. Report compensation for	•	•							, ,			•	
	(A)								(B)			(C)	
	Name and business	address	N	ONE	3				Description of s	ervices	C	Compe	ensatio	n
								\dashv						
								\dashv						
								\dashv						
						_								
2 Total nur	mber of independent contractors (in	ncluding but no	ot lir	nited	to t	thos	se lis	ted	above) who received mo	ore than				
\$100.000	of compensation from the organiz	zation				()							

Form 990 (2022) JUNIOR
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	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
υs	1 :	Federated campaigns 1a					
ant		Membership dues 1b	91,371.				
چ <u>و</u>			304,331.				
fts,		I Related organizations 1d	301,3311				
ig,		Government grants (contributions)					
Sin		All other contributions, gifts, grants, and					
uti Je	•	similar amounts not included above 1f	75,408.				
Contributions, Gifts, Grants and Other Similar Amounts		Noncash contributions included in lines 1a-1f	73,400.				
no d	•			471,110.			
0 10		Total. Add lines 1a-1f	Business Code	17171101			
	2 -	MEMBERSHIP ENGAGEMENT	900099	750.	750.		
/ice			200022	750.	750.		
er ue	k						
m S							
gra Re	(
Program Service Revenue	•						
_		All other program service revenue		750.			
-		Total. Add lines 2a-2f		750.			
	3	Investment income (including dividends, intere		95,903.			95,903.
		other similar amounts)		93,903.			93,903.
	4	Income from investment of tax-exempt bond p					
	5	Royalties(i) Real	(ii) Personal				
	_		(II) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
			(ii) Othor				
	7 8	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	K	Less: cost or other basis					
her Revenue		and sales expenses					
eve	•	Gain or (loss)					
Ę.		Net gain or (loss)					
‡	8 8	Gross income from fundraising events (not					
ğ		including \$ 304,331. of					
		contributions reported on line 1c). See	E1 E66				
			51,566.				
			195,298.	-143,732.			1/2 722
		Net income or (loss) from fundraising events		-14J,/JZ.			-143,732.
	9 a	Gross income from gaming activities. See	2 024				
		Part IV, line 19	2,034.				
		Less: direct expenses 9b	0.	2,034.			2,034.
		Net income or (loss) from gaming activities		2,034.			2,034.
	10 a	Gross sales of inventory, less returns	7 024				
		and allowances 10a					
		Less: cost of goods sold 10b	40.	6,984.	6,984.		
\dashv		Net income or (loss) from sales of inventory	Business Code	0,304.	0,904.		
SI		MICCELLANDOUG INCOME	900099	3,638.	3,638.		
eo Te	11 a	MISCELLANEOUS INCOME	300033	3,030.	3,030.		
Miscellaneous Revenue	k						
sce Be							
ž	(All other revenue		3,638.			
		Total. Add lines 11a-11d			11 272	0	_15 705
	12	Total revenue. See instructions		436,687.	11,372.	0.	-45,795.

Secti	ion 501(c)(3) and 501(c)(4) organizations must compl	lete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respons		this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	42,220.	42,220.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	19,750.	19,750.		
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	76,524.	42,877.	24,345.	9,302.
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	31,768.	17,799.	10,107.	3,862.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9		9,198.	5,154.	2,926.	1,118.
	Other employee benefits	8,082.	4,528.	2,571.	983.
10	Payroll taxes	0,004.	+,540.	4,311.	303.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е					
f	Investment management fees	32,716.	18,331.	10,408.	3,977.
g		- , -	,	,	
9	column (A), amount, list line 11g expenses on Sch 0.)	28,595.	16,022.	9,097.	3,476.
40		21,700.	10,022.	5,0511	21,700.
12	Advertising and promotion	20,377.	15,147.	2 200	
13	Office expenses	20,3//.		3,399.	1,831.
14	Information technology	13,462.	7,543.	4,283.	1,636.
15	Royalties				
16	Occupancy	123,004.	98,403.	12,300.	12,301.
17	Travel	7,043.	7,043.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	21,034.	21,034.		
20	Interest	49.	44.	5.	
21	Payments to affiliates	10.			
22	Depreciation, depletion, and amortization	1,135.		1,135.	
23	Insurance	1,133.		1,133.	
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 O.)	24 224			
а	SA WORKS SUPPLIES	31,231.	31,231.		
b	BANK FEES	7,469.	4,185.	2,376.	908.
С					
d					
е		405.055	254 244		
25	Total functional expenses. Add lines 1 through 24e	495,357.	351,311.	82,952.	61,094.
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)				
	(AGC 300-720)				000

Par	τχ	Balance Sneet				
		Check if Schedule O contains a response or r	ote to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		182,615.	_	196,993
	2	Savings and temporary cash investments		299,065.	2	303,808
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		0.	4	1,375
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub	ostantial contributor, or 35%			
		controlled entity or family member of any of the	nese persons		5	
	6	Loans and other receivables from other disqu	· · · · · · · · · · · · · · · · · · ·			
		under section 4958(f)(1)), and persons describ	ed in section 4958(c)(3)(B)		6	
g	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
₹	9	Prepaid expenses and deferred charges		56,535.	9	11,373
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	10c	4 055 000
	11	Investments - publicly traded securities		4,181,308.	11	4,057,380
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, lin		13		
	14	Intangible assets		0 1 4 2	14	075 400
	15	Other assets. See Part IV, line 11		9,143.	15	275,482
	16	Total assets. Add lines 1 through 15 (must ed		4,728,666.	16	4,846,411
	17	Accounts payable and accrued expenses	8,609.	17	4,229	
	18	Grants payable	10 210	18	10 040	
	19	Deferred revenue		18,319.	19	19,049
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complet			21	
es	22	Loans and other payables to any current or fo				
<u></u>		trustee, key employee, creator or founder, sub				
Liabilities	00	controlled entity or family member of any of the			22	
	23	Secured mortgages and notes payable to unr			23	
	24	Unsecured notes and loans payable to unrela Other liabilities (including federal income tax,			24	
	25	parties, and other liabilities not included on lir	•			
		of Schedule D	les 17-24). Complete Part A	28,580.	25	278,658
	26			55,508.		301,936
	20	Organizations that follow FASB ASC 958, c		3373001	20	301/330
Se		and complete lines 27, 28, 32, and 33.				
ğ	27			4,673,158.	27	4,544,475
3a16	28	Net assets with donor restrictions		, ,	28	, - , -
<u> </u>		Organizations that do not follow FASB ASC				
፰		and complete lines 29 through 33.				
<u></u>	29	Capital stock or trust principal, or current fund	ds		29	
sets	30	Paid-in or capital surplus, or land, building, or			30	
Ass	31	Retained earnings, endowment, accumulated			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		4,673,158.	32	4,544,475
-	33	Total liabilities and net assets/fund balances		4,728,666.	33	4,846,411

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	43	6,6	87.
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,3	
3	Revenue less expenses. Subtract line 2 from line 1	3		8,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,67		
5	Net unrealized gains (losses) on investments	5		8,1	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-1	1,8	65.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,54	4,4	75.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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	<u> </u>	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	, , , , , , , , , , , , , , , , , , , ,	•			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_X_	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				37
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ed audit	4.		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	(2225)
			Form	990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

ZUZZ

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

JUNIOR LEAGUE OF SAN ANTONIO, 74-1272413 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support	T	Т	Γ	1	r	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for th						
80	organization, check this box and stop ction C. Computation of Publi						
	Public support percentage for 2022 (I			oolumn (f))		14	04
	Public support percentage from 2021					15	<u>%</u>
	33 1/3% support test - 2022. If the	•		line 13 and line			
100	stop here. The organization qualifies				14 13 00 17070 01 111		
h	33 1/3% support test - 2021. If the		•				
	and stop here. The organization qual	-					
17a	10% -facts-and-circumstances test		• • •				
	and if the organization meets the fact						
	meets the facts-and-circumstances te			=	•		
b	10% -facts-and-circumstances test	-	•	*	-		
	more, and if the organization meets the	-					
	organization meets the facts-and-circle						
18	Private foundation. If the organization		-				s
			•	·			(Form 990) 2022

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

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

Sec	qualify under the tests listed be ction A. Public Support	elow, please comp	lete Part II.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
	Gifts, grants, contributions, and	(4) = 0 + 0	(2) 20 10	(0) = 0 = 0	(4) = 0 = 1	(0) = 0 = 1	(1) 10101		
	membership fees received. (Do not								
	include any "unusual grants.")	287,366.	241,406.	239,527.	417,333.	471,110.	1656742.		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	13,653.	5,484.	3,111.	2,009.	7,774.			
3	Gross receipts from activities that	,	•	•	•	•	•		
	are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	301,019.	246,890.	242,638.	419,342.	478,884.	1688773.		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.		
c	Add lines 7a and 7b						0.		
8 Sec	Public support. (Subtract line 7c from line 6.)						1688773.		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
	Amounts from line 6	301,019.	246,890.	242,638.	419,342.	478,884.	1688773.		
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	22,947.	90,259.	87,106.	93,734.		389,949.		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
	Add lines 10a and 10b	22,947.	90,259.	87,106.	93,734.	95,903.	389,949.		
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	95 433	114,716.	57,931.	3,653.	0.	271,733.		
12	Other income. Do not include gain or loss from the sale of capital				3,0331				
	assets (Explain in Part VI.)	153,656.	2,896.	87.	F4.6 F0.0		160,277.		
	Total support. (Add lines 9, 10c, 11, and 12.)	573,055.	454,761.	387,762.	516,729.	578,425.	2510732.		
14	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3) organizatio	on,		
0-		- O D							
	ction C. Computation of Publi						67.06		
	Public support percentage for 2022 (li		•			15	67.26 %		
	Public support percentage from 2021					16	61.60 %		
	ction D. Computation of Inves						15 52		
	7 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 15 • 53 %								
	Investment income percentage from 2					18	14.47 %		
19a	33 1/3% support tests - 2022. If the								
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the						X		
	line 18 is not more than 33 1/3%, che	ck this box and st o	op here. The orga	nization qualifies a	s a publicly suppo	rted organization			
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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")? |f "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?
- 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).
- 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
4		
1		
2		
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3b		
3c		
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10a		
10b		
ule A (Forr	n 990)	2022

232024 12-09-22

Par	Tiv 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?	3	
	A family member of a person described on line 11a above?)	
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		4
	detail in Part VI.		
Sec	tion B. Type I Supporting Organizations	1	_
		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.		
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,		
<u>Sac</u>	supervised, or controlled the supporting organization. 2 tion C. Type II Supporting Organizations		
<u> </u>	tion 6. Type it supporting Organizations		Τ
_	Ways a saciality of the apparientian's directors on to stop during the tay year also a saciality of the directors	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		
		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	163	140
•	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?		
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).		
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.		
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 instructions)	ion <u>s).</u>	
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.		
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.		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.		_
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.		

Schedule A (Form 990) 2022

Pai	¹t V Type III Non-Functionally Integrated 509(a)(3) Supportin	ng Organi	zations					
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.				
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.							
Section A - Adjusted Net Income (A) Prior Year (opt				(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-functiona	lly integrated	d Type III supporting orga	nization (see				
	instructions).	. •		•				

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	ued)						
Secti	Section 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	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								
	(provide details in Part VI). See instructions.			8						
9	Distributable amount for 2022 from Section C, line 6			9						
10	Line 8 amount divided by line 9 amount	T	Γ	10						
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022					
1	Distributable amount for 2022 from Section C, line 6									
2	Underdistributions, if any, for years prior to 2022 (reason-									
	able cause required - explain in Part VI). See instructions.									
3	Excess distributions carryover, if any, to 2022									
a	From 2017									
b	From 2018									
c	From 2019									
d	From 2020									
e	From 2021									
f_	Total of lines 3a through 3e									
g	Applied to underdistributions of prior years									
<u>h</u>	Applied to 2022 distributable amount									
i_	Carryover from 2017 not applied (see instructions)									
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.									
4	Distributions for 2022 from Section D,									
	line 7: \$									
	Applied to underdistributions of prior years									
	Applied to 2022 distributable amount									
	Remainder. Subtract lines 4a and 4b from line 4.									
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h									
	and 4b from line 1. For result greater than zero, explain in									
	Part VI. See instructions.									
7	Excess distributions carryover to 2023. Add lines 3j									
	and 4c.									
8	Breakdown of line 7:									
	Excess from 2018									
	Excess from 2019									
	Excess from 2020									
	Excess from 2021									
<u>e</u>	Excess from 2022									

Schedule A (Form 990) 2022

Part VI Su	uppleme	ital Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
Pa line Se	ırt IV, Sectio e 1; Part IV,	n 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, 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, s 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
SCHEDULE	A, P	RT III, LINE 12, EXPLANATION FOR OTHER INCOME:
INSURANC	E PROC	EEDS
2018 AMO	UNT: \$	9,799.
OTHER IN	COME	
2018 AMO	UNT: \$	143,857.
2019 AMO	UNT: \$	2,896.
2020 AMO	UNT: \$	87.
2021 AMO	UNT: \$	0.
2022 AMO	UNT: \$	

Schedule B

Department of the Treasury Internal Revenue Service

(Form 990)

Schedule of Contributors

INC

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

JUNIOR LEAGUE OF SAN ANTONIO

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

OMB No. 1545-0047

2022

Schedule B (Form 990) (2022)

Name of the organization

Employer identification number

74-1272413

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. 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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. 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 \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022) Page **2**

Name of organization Employer identification number

JUNIOR LEAGUE OF SAN ANTONIO, INC

74-1272413

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
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

JUNIOR LEAGUE OF SAN ANTONIO, INC

74-1272413

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
223/53 11-15			Schedule B (Form 990) (2022)

Page 4

Name of organization **Employer identification number** 74-1272413 JUNIOR LEAGUE OF SAN ANTONIO, 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 (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 (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

Inspection

Name of the organization

JUNIOR LEAGUE OF SAN ANTONIO, INC **Employer identification number** 74-1272413

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		nilar Funds or Ac	counts. Complete if the
	, , , , _{, , , , , , , , , , , , , , ,}	(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held	in donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant	funds can be used o	nly
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any	other purpose conferr	ing
	impermissible private benefit?			Yes No
Pai	rt II Conservation Easements. Complete if the organization	anization answered "Yes"	on Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreati	ion or education)	Preservation of a histo	orically important land area
	Protection of natural habitat		Preservation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contributi	on in the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic structure	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired af	fter July 25,2006, and not	on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or ten	minated by the organi	zation during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection	n, handling of	
	violations, and enforcement of the conservation easements it l	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	enforcing conservatio	n easements during the year
_	 			
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enfor	rcing conservation eas	sements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements (of section 170(h)(4)(R)	(i)
Ü	and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·		
9	In Part XIII, describe how the organization reports conservation			
Ū	balance sheet, and include, if applicable, the text of the footnot		•	
	organization's accounting for conservation easements.	oto to the organization o m	idioidi otatoriiorito tri	at describes the
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treas	sures, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form 9			
1a	If the organization elected, as permitted under FASB ASC 958		ue statement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for publ	•		
	service, provide in Part XIII the text of the footnote to its finance	•		
b	If the organization elected, as permitted under FASB ASC 958			sheet works of
	art, historical treasures, or other similar assets held for public	•		
	provide the following amounts relating to these items:	,		,
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(m) 4			•
2	If the organization received or held works of art, historical trea-			provide
_	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2022

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17060410 130509 JUNIOR LEAGUE

	t III Organizations Maintaining C	Collections of Ar				r Other			Conti		age Z
3	Using the organization's acquisition, accessi								COILL	iueu)	
3	collection items (check all that apply):	on, and other record	is, crieck	ally of the	ioliowing tha	it make sig	iiiicani	ase or its			
а	Public exhibition	,	d \square	Loan or ove	hange progr	am					
b	Scholarly research										
		,		Other							
C	Preservation for future generations	allastians and avalai	n have th	ov frutborth		on'o over	nt numa	oo in Dort	VIII		
4	Provide a description of the organization's co							se in Part	XIII.		
5	During the year, did the organization solicit of								٦ ٧		٦
Dai	to be sold to raise funds rather than to be ma								Yes		No
Fai	t IV Escrow and Custodial Arrange reported an amount on Form 990, Pa		iete it the	e organizatio	n answered	"Yes" on F	-orm 990	, Part IV, I	line 9, or		
			d: £								
та	Is the organization an agent, trustee, custodi								7 v		٦ ٨ ٦
	on Form 990, Part X?								Yes		_ No
р	If "Yes," explain the arrangement in Part XIII	and complete the to	ollowing t	able:					Amoun	+	
	5								Amour		
	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
	Ending balance						1f		_		_
	Did the organization include an amount on F						y?	L	Yes	<u> </u>	∐ No
	If "Yes," explain the arrangement in Part XIII.										
Pai	t V Endowment Funds. Complete										
		(a) Current year	(b) F	Prior year	(c) Two yea	ars dack (d) Inree y	ears back	(e) Fou	years	раск
	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		e (line 1ç	g, column (a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	t are held ar	nd administe	red for the					
	organization by:	•								Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm	nent.									
	Complete if the organization answere		0, Part IV	/, line 11a. S	See Form 990), Part X, li	ne 10.				
	Description of property	(a) Cost or o			or other (other)	1 ' '	cumulate reciation		(d) Boo	k value	е
1a	Land				·						
	Buildings										
	Leasehold improvements										
	Equipment	I									
	Other										
	. Add lines 1a through 1e. (Column (d) must e		X colun	nn (R) line 1	0c.)						0.
	a (Oolullii) (a) Mast E	rander of the coop i all	A COIUII	, <u>,-, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	~~ <i></i>						

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 JUNIOR LEAG	UE OF SAN ANTO	ONIO, INC 7	4-1272413 Page 3
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11b. See Form 990. Part X. line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives		,	
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	<u> </u>		
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	<u> </u>		
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description	, ,	(b) Book value
(1) SECURITY DEPOSIT	<u> </u>		8,142.
(2) FINANCE LEASE RIGHT-OF-USE	ASSETS - NET	Г	14,625.
(3) OPERATING LEASE RIGHT-OF-U	JSE ASSET		252,715.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u>: 15.)</u>		275,482.
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) FINANCE LEASE PAYABLE			14,624.
(3) OPERATING LEASE PAYABLE			264,034.
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 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

Schedule D (Form 990) 2022

278,658.

(6) (7) (8)

Schedule D (Form 990) 2022

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

2022

Open to Public Inspection

Name of the organization **Employer identification number** 74-1272413 JUNIOR LEAGUE OF SAN ANTONIO 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 b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g d 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.

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

Schedule G (Form 990) 2022

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines i and 60. List 6	events with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			SPECIAL		NONE	1 ' '
			EVENTS			(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
þ			(CVCITE type)	(CVCITE type)	(total Hamber)	
eu			255 225			255 225
Revenue	1	Gross receipts	355,897.			355,897.
ш						
	2	Less: Contributions	304,331.			304,331.
	3	Gross income (line 1 minus line 2)	51,566.			51,566.
	Ŭ	Greed interne (into 1 minute into 2)	02,0001			02/0001
		Cook prizes				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses						
eus	6	Rent/facility costs				
×						
ct E	7	Food and beverages				
j.	-					
	8	Entertainment				
			195,298.			195,298.
	9	Other direct expenses				195,298.
		- · · · · · · · · · · · · · · · · · · ·				
_		Net income summary. Subtract line 10 from li				-143,732.
Pa	ırt I		answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
a)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Birigo	bingo/progressive bingo	(b) outlot gaining	col. (a) through col. (c))
eve						
ď	1	Gross revenue				
	2	Cash prizes				
ses	_	Odon pn200				
Expenses	_	Namanah minan				
×	3	Noncash prizes				
St E						
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No ——	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	•	Direct expense carrinary. Add into 2 arreagn				
	۰	Not coming income aumment Culatract line 7	from line 1 column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)			
	_					
		ter the state(s) in which the organization condu				
а	ls t	he organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No
b	lf "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	voked, suspended, or te	rminated during the tax v	/ear?	Yes No
		Yes," explain:				
		· ·				
	_					

Schedule G (Form 990) 2022

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Sch	edule G (Form 990) 2022 JUNIOR LEAGUE OF SAN ANTONIO, INC 74-1	<u> 1272413</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No 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:		
		13a	%
	The organization's facility	13b	
	An outside facility	130	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L 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		
	Name		
	Addings		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
47	Mandaton diatributions		
	Mandatory distributions:		
а	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		
	organization's own exempt activities during the tax year \$		
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule G	G (Form 990)	JUNIOR	LEAGUE	OF	SAN	ANTONIO,	INC	74-1272413	Page 4
Part IV	G (Form 990) Supplemental Infor	mation _{(con:}	tinued)						
				_					

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Attach to Form 990.

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

2022
Open to Public

Inspection

Name of the organization	ACITE OF C	ANI ANIMONTO	TNO				Employer identification number
Part I General Information on Grants a		AN ANTONIO,	INC				74-1272413
Does the organization maintain records criteria used to award the grants or assis Describe in Part IV the organization's properties. Part II Grants and Other Assistance to	to substantiate the stance? ocedures for monit Domestic Organia	oring the use of grant	funds in the United	d States. Complete if the org			X Yes No
1 (a) Name and address of organization or government	\$5,000. Part II can	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CLARITY CHILD GUIDANCE CENTER 8535 TOM SLICK AVE SAN ANTONIO, TX 78229	74-1153067	501(C)(3)	30,520.	0.			PAVING NEW PATHS (CENTENNIAL PROJECT)
2 Enter total number of section 501(c)(3) a3 Enter total number of other organization							•

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

Schedule I (Form 990) 2022

(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
		· · · · · ·			
FAME AWARDS	11	14,750.	0.		
SCIENCE CAMP GRANT	1	5,000.	0.		
Part IV Supplemental Information. Provide the information re	l quired in Part I, lin	e 2; Part III, column	(b); and any other ac	 dditional information.	
PART I, LINE 2:					
THE APPLICATION AND SELECTION PROC	ESS IS MA	NAGED BY T	HE VICE PR	ESIDENT OF	
COMMUNITY (BOARD MEMBER) AND VICE	CHAIR OF	COMMINITAN	FINANCE A	PPI.TCATTONS	
ARE REVIEWED TO INSURE THEY ALIGN	WITH THE	JUNIOR LEA	AGUE OF SAN	ANTONIO	
(JLSA) COMMUNITY POSITIONS, AS OUT	LINED IN	THE GRANT	APPLICATIO	N GUIDELINE	
DOCUMENT. GRANTS ARE AWARDED BY A	VOTE FROM	THE APPRO	OVAL SELECT	ION	
COMMITTEE WHICH IS COMPRISED OF VI	CE CHAIR	OF COMMUNI	TY FINANCE	, VP OF	
COMMINITY WE ELECT OF COMMINITY	PRESTDENT	PRESTDEN		REAGURER AND	

TREASURER ELECT. GRANT RECIPIENTS AGREE TO PROVIDE PICTURES AND DESCRIPTION

SCHEDULE O (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

2022
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

JUNIOR LEAGUE OF SAN ANTONIO, INC

Employer identification number 74-1272413

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ADVANCE WOMEN'S LEADERSHIP FOR MEANINGFUL COMMUNITY IMPACT THROUGH
VOLUNTEER ACTION, COLLABORATION, AND TRAINING. ITS PURPOSE IS
EXCLUSIVELY EDUCATIONAL AND CHARITABLE.
SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION
JUNIOR LEAGUE OF SAN ANTONIO, INC
100 NE LOOP 410 NO 101
SAN ANTONIO, TX 78216
EMPLOYER IDENTIFICATION NUMBER: 74-1272413
FOR THE YEAR ENDING MAY 31, 2023
JUNIOR LEAGUE OF SAN ANTONIO, INC IS MAKING THE DE MINIMIS SAFE HARBOR
ELECTION UNDER REG. SEC. 1.263(A)-1(F).
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
FROM OUR FOUNDING IN 1924 JLSA HAS INSTILLED IN OUR MEMBERS A DEEPLY
FELT DUTY TO ENGAGE IN VOLUNTARISM, WOMEN'S LEADERSHIP AND MEANINGFUL
COMMUNITY IMPACT. WE CONTINUTED THAT LEGACY THROUGH THE 2022-2023
LEAGUE YEAR WITH OVER 685 DEDICATED AND COMMITTED MEMBERS. THE LEAGUE
FEATURED 218 WOMEN SERVING AS ACTIVE PLACEMENT MEMBERS HOLDING
POSITIONS SUCH AS BOARD OF DIRECTORS, APPOINTED JOBS AND COMMUNITY
VOLUNTEERS. THE VARIETY OF PLACEMENTS PROVIDED MEMBERS WITH TRAINING,
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization

JUNIOR LEAGUE OF SAN ANTONIO, INC

DEVELOPMENT, AND LEARNING OPPORTUNITIES IN A WIDE RANGE OF AREAS

INCLUDING, BUT NOT LIMITED TO, FUND DEVELOPENT, COMMUNICATIONS,

COMMUNITY, MEMBERSHIP DEVELOPMENT, FINANCE, ESEARCH AND DEVELOPMENT AND

SO MUCH MORE.

THE JLSA CONTINUES TO IMPROVE OUR COMMUNITY YEAR ROUND THROUGH

PARTNERING WITH 30+ COMMUNITY AGENCIES. OUR VOLUNTEERS IN THE 2022-2023

LEAGUE YEAR COMPLETED OVER 11,160 COMMUNITY VOLUNTEER HOURS THROUGH OUR

DONE IN A DAY PROJECTS. DURING THESE PROJECTS JLSA MEMBERS ARE ABLE TO

USE THEIR DIVERSE AND MEANINGFUL TALENTS TO MEET IMMEDIATE NEEDS OF A

SAN ANTONIO COMMUNITY NON-PROFIT. IN ADDITION TO DONE IN A DAY

PROJECTS, JLSA ASSISTED COMMUNITY PARTNERS THROUGH A VARIETY OF

SPECIFIC PROJECTS FOCUSED ON AREAS PERTAINING TO ITS MISSION AND

POSITIONS STATEMENTS THROUGH VOLUNTEER HOURS, FUNDS AND PROVIDING

PROGRAMMING.

DURING 2022-2023, JLSA SUCCESSFULLY HELD SEVERAL FUNDRAISING EVENTS

RAISING OVER \$140,000 TO SUPPORT OUR COMMUNITY AND OUR MEMBERS THROUGH

VOLUNTEER HOURS, TRAININGS AND OTHER OPPORTUNITIES. THIS YEAR ALSO

MARKED THE CLOSE OF OUR PAVING NEW PATHS CAMPAIGN IN WHICH JLSA

SUCESSFULLY PARTNERED WITH SEVERAL TRAILBLAZERS WHO SHARE THE LEAGUE'S

PASSION FOR PROMOTING RESILIENCE AND MENTAL WELLNESS IN OUR COMMUNITY

TO FUNDRAISE OVER \$300,000 FOR LOCAL NON-PROFIT, CLARITY CHILD GUIDANCE

CENTER.

MOVING INTO OUR 100TH YEAR, THE JUNIOR LEAGUE OF SAN ANTONIO IS POISED

TO CONTINUE ITS LEGACY OF SERVICE TO THE GREATER SAN ANTONIO COMMUNITY

AS WELL AS THE WOMEN WHO COMMIT THEIR TIME AND TALENTS TO CREATING A

Schedule O (Form 990) 2022 Page 2

Name of the organization

JUNIOR LEAGUE OF SAN ANTONIO, INC

Employer identification number
74-1272413

HAPPIER, MORE EQUITABLE CITY.

FORM 990, PART VI, SECTION A, LINE 4:

JUNIOR LEAGUE OF SAN ANTONIO INC AMENDED ITS BYLAWS TO REFLECT THE NEW

MISSION STATEMENT: JUNIOR LEAGUE OF SAN ANTONIO INC. IS AN ORGANIZATION OF

WOMEN WHOSE MISSION IS TO ADVANCE WOMEN'S LEADERSHIP FOR MEANINGFUL

COMMUNITY IMPACT THROUGH VOLUNTEER ACTION, COLLABORATION AND TRAINING. ITS

PURPOSE IS EXCLUSIVELY EDUCATIONAL AND CHARITABLE.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS CONSIST OF PROVISIONAL MEMBERS, ACTIVE MEMBERS, AND SUSTAINING

MEMBERS. PROVISIONAL MEMBERS ARE NEW MEMBERS AND BECOME ACTIVE MEMBERS

AFTER CERTAIN CONDITIONS ARE MET. ACTIVE MEMBERS MAY CHOOSE TO BECOME

SUSTAINING MEMBERS AFTER THE REQUIRED CONDITIONS ARE MET. THE ACTIVE

MEMBERS ARE THE ONLY MEMBERS ELIGIBLE FOR VOTING RIGHTS.

FORM 990, PART VI, SECTION A, LINE 7A:

ACTIVE MEMBERS ARE THE ONLY MEMBERS ALLOWED TO VOTE. VOTING IS CONDUCTED DURING DESIGNATED MEETINGS AND EMERGENCY MEETINGS THAT MAY ARISE.

FORM 990, PART VI, SECTION A, LINE 7B:

CHANGES TO THE BY-LAWS REQUIRE APPROVAL BY THE MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS ELECTRONICALLY DISSEMINATED TO THE BOARD AND

DISCUSSED/APPROVED AT A MEETING PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

Schedule O (Form 990) 2022 Page 2

Name of the organization

JUNIOR LEAGUE OF SAN ANTONIO, INC

Employer identification number 74-1272413

EACH CONTRACT MUST GO THROUGH A VETTING PROCESS THAT INCLUDES GETTING THREE
BIDS AND BEING APPROVED BY A VP OR THE PRESIDENT. BOARD MEMBERS TURN OVER
EACH YEAR AND SIGN A CONFLICT OF INTEREST FORM THAT IS FILED IN THE OFFICE
AT THE BEGINING OF THEIR TERM. IF A CONFLICT ARISES, THE BOARD MEMBER WILL
BE EXCUSED AND NOT ALLOWED TO TAKE PART IN DISCUSSIONS OR VOTING IN
DECISIONS ON THAT CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR THE COMPENSATION DECISIONS OF
THE LEAGUE. ANNUALLY, THE COMMITTEE EVALUATES THE MANAGING DIRECTOR'S
PERFORMANCE AND, IF A PAY INCREASE IS MERITED, COMPARES COMPENSATION
INFORMATION PROVIDED BY AN INDEX FROM THE ASSOCIATION OF FUNDRAISING
PROFESSIONALS AND A SURVEY OF OTHER JUNIOR LEAGUES AROUND THE COUNTRY
PROVIDED BY THE ASSOCATION OF JUNIOR LEAGUES INTERNATIONAL INC (AJLI).
AFTER CAREFUL CONSIDERATION AND DISCUSSION, THE DECISION OF THE COMMITTEE
IS THEN DOCUMENTED IN THE COMMITTEE MINUTES. THIS PROCESS WAS LAST
PERFORMED IN MAY 2022.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS,
AND FORM 990 ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C

THE ORGANIZATION'S PROCESS FOR ASSUMING RESPONSIBILITY FOR OVERSIGHT OF

THE AUDIT, REVIEW, OR COMPILATION OF ITS FINANCIAL STATEMENTS AND THE

SELECTION OF AN INDEPENDENT AUDITOR HAVE NOT CHANGED FROM THE PRIOR

YEAR.