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్ల్లో 990-T **Exempt Organization Business Income Tax Return** (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning JUN 1, 2018 and ending MAY 31, 2019 ► Go to www irs gov/Form990T for instructions and the latest information. Department of the Treasury Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) D Employer identification number Name of organization ( Check box if name changed and see instructions ) X Check box if (Employees' trust, see address changed instructions) THE JUNIOR LEAGUE OF AUSTIN, INC. 74-1168918 **B** Exempt under section Print F Unrelated business activity code 01 Number, street, and room or suite no. If a P.O box, see instructions X 501(c **103** ) Type 220(e) 5330 BLUFFSTONE LANE City or town, state or province, country, and ZIP or foreign postal code ] 408A 1530(a) 541800 AUSTIN, TX 78759 529(a) Book value of all assets at end of year 24,724,213. 

F Group exemption number (See instructions) ▶

G Check organization type ▶ ▼ 501(c) corporation 501(c) trust 401(a) trust Other trust H Enter the number of the organization's unrelated trades or businesses Describe the only (or first) unrelated trade or business here ightharpoonup ADVERTISING If only one, complete Parts I-V If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. X No 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation Telephone number ► 512-888-9043 The books are in care of MICHELLE LUPTON, TREASURER Unrelated Trade or Business Income (C) Net Part I (A) Income (B) Expenses 1a Gross receipts or sales b Less returns and allowances c Balance 10 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4h c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 5 5 6 Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 18,710. 18,710. Advertising income (Schedule J) 11 11 12 Other income (See instructions, attach schedule) 12 18,710. 18,710. Total. Combine lines 3 through 12 Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Part II (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) RECEIVED 15 Salaries and wages 15 16 Repairs and maintenance 16 S-0-S FEB 2 4 2020 17 Bad debts 17 Interest (attach schedule) (see instructions) 18 18 19 Taxes and licenses 19 OGDEN. UT 20 Charitable contributions (See instructions for limitation rules) 20 21 21 Depreciation (attach Form 4562) 22a 22b 22 Less depreciation claimed on Schedule A and elsewhere on return 23 23 Depletion 24 Contributions to deferred compensation plans 24 25 25 Employee benefit programs 26 26 Excess exempt expenses (Schedule I) 18.710 27 27 Excess readership costs (Schedule J) 28 Other deductions (attach schedule) Total deductions Add lines 14 through 28 29 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31

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Form 990-1		8918	Page					
Part I	II Total Unrelated Business Taxable Income	, , , , , , , , , , , , , , , , , , ,						
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.					
34	Amounts paid for disallowed fringes	34	-					
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)  35							
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of							
	lines 33 and 34	36						
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.					
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,	{						
	enter the smaller of zero or line 36	38	0.					
Part I	V Tax Computation							
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0.					
40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 38 from:							
	Tax rate schedule or Schedule D (Form 1041)	40						
41	Proxy tax See instructions	41						
42	Alternative minimum tax (trusts only)	42						
43	Tax on Noncompliant Facility Income See Instructions	43						
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.					
Part \	/ Tax and Payments	•						
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)							
b	Other credits (see instructions)							
C	General business credit Attach Form 3800							
d	Credit for prior year minimum tax (attach Form 8801 or 8827)							
е	Total credits. Add lines 45a through 45d	45e						
46	Subtract line 45e from line 44	46	0.					
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47						
48	Total tax. Add lines 46 and 47 (see instructions)	48	0.					
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.					
	Payments. A 2017 overpayment credited to 2018	`						
	2018 estimated tax payments							
	Tax deposited with Form 8868							
d	Foreign organizations. Tax paid or withheld at source (see instructions)  50d							
	Backup withholding (see instructions) 50e	1						
	f Credit for small employer health insurance premiums (attach Form 8941)  50f							
9	Other credits, adjustments, and payments Form 2439							
	Form 4136 Other Total <b>&gt;</b>							
51	Total payments Add lines 50a through 50g	51 L	· · · · ·					
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	52						
53	Tax due If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53						
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54						
55 Dort V	Enter the amount of line 54 you want Credited to 2019 estimated tax    Refunded	55						
Part \			Van Na					
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority		Yes No					
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country							
			X					
	here	<del></del>	X					
57	If "Yes," see instructions for other forms the organization may have to file							
58	Enter the amount of tax-exempt interest received or accrued during the tax year \bullet\$							
	Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled	dge and belief it is true	<del>L</del>					
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge							
Here		ay the IRS discuss this e preparer shown belo						
		structions)? X Y	-					
	Print/Type preparer's name Preparer's signature , Date Check	1						
D-:-	rimitrype preparer s hame reparer s manue self- employed	·   · · · · ·						
Paid	GEAN HOLCOMP (01/31/2020)	P01249	221					
Prepa	AND	74-290						
Use (	401 CONGRESS AVENUE, SUITE 1100							
		12-370-3	200					
823711 01		Form 9	90-T (2018					

Schedule A - Cost of Goods	s Sold. Enter	method of inver	tory v	aluation > N/A					
1 Inventory at beginning of year	1	6 Inventory at end of year				_	6		
2 Purchases	2	7 Cost of goods sold Subtract line 6							
3 Cost of labor	3			from line 5 Enter here	and in f	Part I,			
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		_ 8	Do the rules of section	263A (	with respect to		Yes	No
b Other costs (attach schedule)	4b			property produced or a	acquired	for resale) apply to			
5 Total Add lines 1 through 4b	5			the organization?				_Ļ	
Schedule C - Rent Income	(From Real	Property and	Pers	sonal Property L	.ease	d With Real Prope	erty)		
(see instructions)		<del></del>		· -		· · · · · · · · · · · · · · · · · · ·			—
1 Description of property									
(1)									
(2)	=								
(3)									
(4)									
		ed or accrued				2/a) Deductions du estiv e	connected with the	uncome in	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for p	personal	onal property (if the percentag property exceeds 50% or if ad on profit or income)	ge	3(a) Deductions directly c columns 2(a) and	3 2(b) (attach sche	dule)	
(1)									
(2)									
(3)						,			
(4)									
Total	0.	Total			0.				
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	n (A)	<b>&gt;</b>			0.	(b) Total deductions Enter here and on page 1, Part I, line 6 column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstru	ctions)					
			,	Gross income from		3 Deductions directly connect to debt-finance		able	
1 Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		deductions schedule)	5
(1)			1				<u> </u>		
(2)									
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	(column 6 x	ole deduction total of coli and 3(b))	
(1)				%					
(2)				%					
(3)			1	%					
(4)			1	%					
	•		•			nter here and on page 1, Part I, line 7, column (A)	Enter here a		
Totals				_		0.			0.
Total dividends-received deductions	ncluded in columi	18			L	<u> </u>	†		0.

2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
_					
					_
0.	0.				0.
	advertising income	advertising advertising costs	A. Gross advertising income  3. Direct or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	2. Gross advertising income 3. Direct advertising costs or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	advertising costs advertising costs advertising costs advertising costs col 3) If a gain, compute cols 5 through 7

Form 990-T (2018) THE JUNIOR LEAGUE OF AUSTIN, INC.

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

1 Name of periodical	2 Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) CAPITAL LINES -						
(2) CHRISTMAS ISSUE	18,710.		18,710.		30,192.	18,710
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1 Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1 Part II line 27
Totals, Part II (lines 1-5)	18,710.	0.				18,710

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

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)